



DISASTER PLANNING AND MANAGEMENT

OVERVIEW

THIS DOCUMENT This guidance statement provides a framework for developing procedures relating to the role of perioperative staff in the event of a disaster.

A disaster may include but is not limited to: fire, explosion, or earthquake.

PURPOSE To assist in the development of contingency planning.

SCOPE All peri-operative staff.

GENERAL PRINCIPLES

1. The health care team must be prepared for disasters by ensuring that contingency plans are developed, current and available to the perioperative team.

| | RECOMMENDED PRACTICE | RATIONALE |
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| 1 | All perioperative areas have written plans to implement the actions required in the situation of a disaster occurring. | <ul style="list-style-type: none"> • Education is regularly undertaken to ensure all staff (multidisciplinary) are familiar with the initial responses required • All staff are able to locate the resources required to assist in the event of an emergency • Audits of appropriate responses should be undertaken and used as a monitoring tool for education requirements and planning • All facility documents must be assessed regularly, and reflect changes in standards of community expectations. |
| 2 | All perioperative nurses are educated in the protocol and use of emergency equipment e.g. Alarms, fire hoses and extinguishers, evacuation equipment. | <ul style="list-style-type: none"> • All staff meet the facility disaster educational requirements e.g. annual fire extinguisher use, emergency equipment usage etc • Practice drills should be performed at |

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| | | <p>regular intervals e.g. six monthly and audited by appropriate individuals.</p> <ul style="list-style-type: none"> • Debriefing sessions are held after drills or actual events to ensure staff safety and to promote problem solving and planning. |
| 3 | Patient and staff safety is maximized by maintaining uncluttered work environment. | <p>A clutter free work environment will contribute to a safe evacuation. This is facilitated by ensuring:</p> <ul style="list-style-type: none"> • Exits and escape routes are not obstructed • Smoke stop doors and exits are clearly labelled |
| 4 | Contingency plans shall be available to maintain facility and organisation function in the event of disaster. This may include, but is not limited to, the loss of vital supplies e.g. oxygen, electricity or significant structural damage. | <p>To ensure immediate and continuing function of the organisation, the contingency plans shall include:</p> <ul style="list-style-type: none"> • Potential safe areas. • Guidance on triaging patients. • Initial and long term options for maintaining patient and staff safety. • Protocols for the supply, storage and distribution of equipment and sterile stock. |

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RECOMMENDED READING

Civil Defence Emergency Management Act 2002
NZ Fire Service Act 1975
NZ Fire Service Building Act 2004
Fire Safety and Evacuation of Buildings Regulations 2006
DHB Health Emergency Plans
National Health Emergency Plan 2008

STATEMENT

GUIDANCE

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