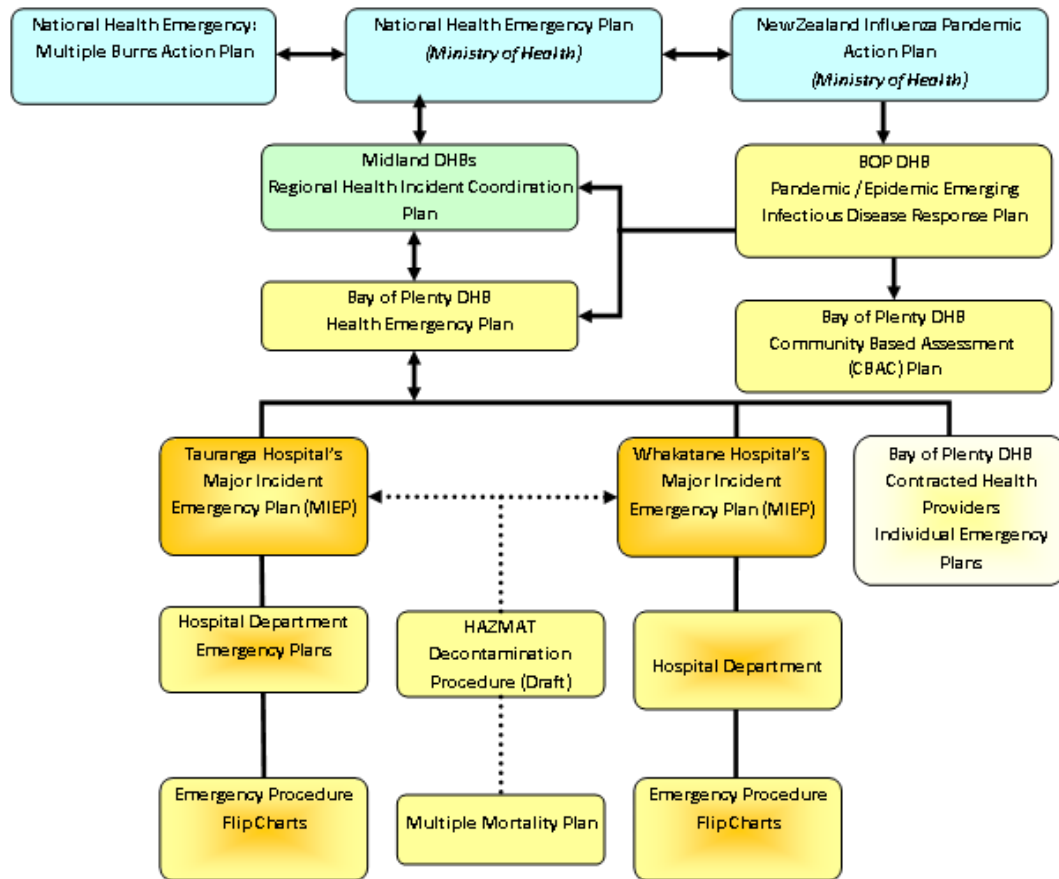


STANDARDS TO BE MET

1. Bay of Plenty District Health Board (BOPDHB) Emergency Planning

1.1 Relationship with other plans:



1.2 These emergency plans will be maintained, tested, reviewed and updated.

- a) The DHB will conduct an exercise at least every 3 years to test components of the plan. A report will be written following the exercise. This report will contain at least the following information:
 - i. Objectives
 - ii. Description of the exercise
 - iii. Actual outcomes
 - iv. Analysis and recommendations for updating the plan
- b) Each service / facility are expected to test their internal and external communication trees at least once per year.
- c) The DHB will be involved in relevant regional and local authority and emergency services planning and exercises.

1.3 The organisation will ensure that each plan meets the standards below:

- i. Developed in consultation with staff
- ii. Known by all staff
- iii. Exercised to the standards outlined in 1.2 above

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 <p>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</p> <p>EMERGENCY MGT PROTOCOL</p>	<p>EMERGENCY MANAGEMENT PROCEDURES</p>	<p>Policy 5.2.1 Protocol 1</p>
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- iv. Dated showing when it was last updated and when the next review date is. Plans will be reviewed at least every 3 years or sooner if a major change has occurred.

2. BOPDHB Health Emergency Plan (HEP)

2.1 The BOPDHB HEP will contain at least the following information:

- a) Identifies Coordinated Incident Management Systems (CIMS) as the model for response, used in all Service / Facility Emergency Management Plans.
- b) Outlines how the DHB will continue to ensure services are provided to consumers whilst responding to an incident at any of its services / facilities.

2.2 It is the responsibility of the Emergency Planning team to develop and maintain the BOPDHB HEP.

2.3 The BOPDHB HEP will be developed in consultation with the health provider stakeholders and Civil Defence groups covered by the BOPDHB.

3. The BOPDHB Pandemic / Infectious Diseases Outbreak Response Plan

3.1 The BOPDHB Pandemic / Infectious Diseases Outbreak Response Plan has been developed to describe BOPDHB's response to a pandemic, and outlines the operational activities to ensure essential health services continue to function as effectively as possible.

3.2 BOPDHB has also developed a separate Community Based Assessment Centre (CBAC) plan for assessment centres to be set up within the region in response to a pandemic influenza to provide advice, medication when appropriate and referral for people suffering from the influenza, as directed by the Ministry of Health.

4. Major Incident Emergency Plan (MIEP)

4.1 There will be a MIEP for each of the following:

- a) Tauranga Hospital
- b) Whakatane Hospital

4.2 The MIEP will contain at least the following information:

- a) Identification of:
 - i. a management structure utilising the principles of CIMS key roles with reference to where the associated job / action / duty cards can be accessed.
 - ii. an Emergency Operations Centre, including a back-up location
 - iii. how the Major Incident Emergency Plan links with the BOPDHB Health Emergency Plan
 - iv. a section to cover a multiple trauma event which includes a triage location
 - v. assigning temporary identification numbers to casualties
 - vi. a public and media information process
 - vii. back-up systems for utilities
 - viii. recovery processes
- b) Documented internal and external communication processes, including means of communication and back-up systems.
- c) Processes for communicating the plan to staff.

4.3 Each MIEP will be developed in consultation with DHB senior management.

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5. Department Emergency Plans

- 5.1 There will be one Department Emergency Plan for each unit. The Service Leader / General Manager for each area will be responsible for the plan but may delegate to the Clinical Nurse Manager or manager responsible for the relevant area.
- 5.2 The plan will contain general contingency plans for major service failure. Additional indices may be added as appropriate for each area e.g. clinical areas will add an index for multiple trauma.
- 5.3 Staff in each ward and department will be involved in the development of the emergency plans specific to their area.
- 5.4 The Emergency Plan will be kept where staff can have access to it at all times.

6. Emergency Procedures Flipchart

- 6.1 The date of publication of the flipchart will be printed under the front cover of the flipchart. The flipchart will be reviewed and pages updated as necessary once every three (3) years or sooner if a major change has occurred.
- 6.2 There will be at least one (1) flipchart in every ward and department on display and easily accessed by all staff.
- 6.3 Any changes to the flipcharts will be notified to and co-ordinated by the Emergency Planning team.
- 6.4 There will be two (2) distinct flipcharts; one (1) each for the:
a) Hospital;
b) Telephonists
and one (1) Community Based Services Emergency Procedure Booklet
- 6.5 Emergency procedures will be listed for at least the following situations:

Emergency Situations	Hospital Flipchart	Community Services Booklet	Telephonist Flipchart
Fire	√	√	√
Fire Alarm Sounding / All Clear	√	√	√
First Aid	√	√	√
Aggression	√	√	
Hold up	√	√	
Hazardous Material Alert	√	√	√
Essential Utility Failure	√		√
Suspicious Activity / Unauthorised Visitor or Media	√	√	
Bomb Threat / Suspicious Object	√	√	√
Missing Patient	√		
Abduction / Hostages	√	√	
Clinical Emergency	√		√
Natural Disaster	√	√	√
Security Incidents		√	√
Important Contact Numbers		√	√
Medical Emergency		√	
Home Visits		√	
Dog Attacks		√	
Car Accidents		√	

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 5.2.1 Emergency Management
- Bay of Plenty District Health Board policy 5.2.2 Fire Safety

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