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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 perioperative staff

GENERAL PRINCIPLES

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
1	All perioperative areas have written plans to implement the actions required in the situation of a disaster occurring	• 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 including, but not limited to alarms, fire hoses and	 All staff meets the facility disaster educational requirements, for example fire equipment, emergency equipment usage.
	extinguishers, evacuation equipment, radiation "off" switch	 Practice drills should be performed at regular intervals and audited by appropriate individuals.
		 Debriefing sessions are held after drills or actual events to ensure staff safety and to promote problem solving and planning.

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Date of next review: 2024





3	Patient and staff safety is maximized to maintaining uncluttered work environment	 A clutter free work environment will contribute to a safe evacuation. This is facilitated by ensuring: 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 utilities i.e. oxygen or electricity or significant structural damage.	 To ensure immediate and continuing function of the organisation, the contingency plans shall include: 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

RECOMMENDED READING

Civil Defence Emergency management Act 2002 (amended 2016)

Fire and Emergency New Zealand Act 2017

Fire and Emergency NZ Fire Safety & Evacuation procedures and Evacuation Schemes.2018

NZ Fire Service Building Act 2004

DHB health Emergency plans

National Health Emergency Plan (NHEP) 2015