

## **RECOMMENDATIONS**

### **1. MOCK DRILLS**

Since the disaster plan is laid down on paper, its importance lies in the implementation of the plan. Disaster is unpredictable; therefore the disaster plan should be well versed by each employee who is a part of disaster plan so that they can do justice to their role promptly. To ensure full compliance, mock drill has to be conducted once in a month. Moreover, mock drills should be conducted at different times of the day (both day & night) so that a fool proof plan could be developed which can smoothly handle any disastrous situation. Post mock drills, a briefing should be called, in which loopholes of the plan should be discussed and the plan has to be modified accordingly.

### **2. ASSOCIATION WITH NEARBY HOSPITAL**

The capacity of Asian hospital is to treat a maximum of 50 casualties; a tie up should be initiated with nearby hospitals (Metro Heart Institute, Sarvodaya Hospital, QRG Hospital, Sunflag Hospital) so that the victims can be shifted to other hospitals when AIMS hospital is in full capacity. This will ensure proper time management “GOLDEN HOUR RULE” which is crucial in such traumatic scenarios.

### **3. DISASTER PRIVILEGES**

Disaster privileges may be granted when the Hospital’s emergency operations plan has been activated and the Hospital is unable to handle immediate patient needs. The Medical Service Director or his or her designee should be authorized to grant disaster privileges on a case-by-case basis on his or her sole discretion as outlined in the medical by-laws and the Disaster Responsibility for Volunteer Practitioner and Disaster Privileges policies. Volunteers will report to security central command for a security packet including temporary identification and instructions on where to report.

### **4. IN-HOUSE TRAINING, INFORMATION AND EXERCISE**

Disaster is unpredictable, therefore each and every must be trained and trained about their roles and responsibilities. To ensure 100 % effectiveness department heads / team leaders should ensure that all staff in their areas/ departments receive in- service training on

Asian Hospital Disaster plan. The Security Head should provide in – service training to key personnel and ensure that they participate in the mock drill.

**5. TRANSPORT MANAGEMENT**

The capacity of the hospital to treat is about 50 casualties depending upon the occupancy of the hospital. Although security, maintenance and housekeeping staff are responsible for transporting the patients but during full occupancy there will be shortage of manpower. To prevent such circumstances, hospital can tie up with various non – government organizations (NGOs) who will act as a helping hand for transportation and controlling the crowd.

Moreover, transport agencies could be contacted to provide with extra vehicles and drivers to transport the victims to desired location.

**6. HUMAN RESOURCE PLANNING WITH RESPECT TO TIMELINES**

A study should be conducted for every department which identifies the personnel who can reach the hospital fast from their home. Then a list has to be prepared which can be useful in such scenarios, as time is a crucial factor in such circumstances.

