

equipment (PPE)

V. Scenario/Exercise

Overall objectives include: (1) Development of a Health Services (ED) specific CBR Plan; (2) Enhancing multi-agency communication and co-operation; (3) Improving patient outcomes; (4) Improving staff safety; and (5) Protection of the public health system.

Public and acute health personnel also are working with Emergency Service Organisations (fire, police, ambulance, Local Government, Health Services, state emergency services) to strengthen public health emergency management capacity through:

- a. Consultation and liaison
- b. Formation of agreements, protocols, procedures and plans
- c. Acting as drivers and leading change processes

This has been facilitated through the development of a regional medical and public health emergency management plan.

Keywords: agreements; chemical, biological; nuclear; consultation; emergency departments; emergency services organizations; hospitals; plans; protocols; public health; regional; safety

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Free Papers: Global Sharing: Disaster Planning

Disaster Collaboration on Hokkaido Island

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Introduction: Japan consists of four islands. Hokkaido Island is located in the north and comprises one-fifth of the total area of Japan. It includes rural areas and isolated islands. Hokkaido Island is famous for active volcanoes.

Objective: Hokkaido Island experienced many catastrophic events during the last 10 years. Based upon this experience, collaboration between the medical functions and those of other organizations has been developed.

Cases: Typical events/disasters that have occurred within the last decade include: multiple chain-reaction traffic accidents on a freeway in 1992 (2 died); an offshore earthquake in Kushiro in 1993 (2 died); another offshore earthquake in southwestern Hokkaido in 1993 (229 died); collapse of the Toyota tunnel in 1996 (20 died); the eruption of the Mt. Usu volcano in 2000; and the bomb blast (terrorism) at the Yosakoi festival in 2000.

Results: During such situations, an emergency delivery system using helicopters is required. A transportation system for conveying severely injured patients using helicopters and/or fixed-wing aircraft was established after the eruption of Mt. Usu; this system was applied on the Okinawa summit (G8) in 2000. Hokkaido Island has an atomic power plant with its associated risks. Accidents in this plant have occurred three times, and resulted in the

following injuries: severe burns, an anoxic accident, and a leg fracture. In these cases, the patients were transported to the hospital by helicopter.

Conclusions: The disaster circle always must be considered, and training provided during the silent phase. It is important to construct collaboration with fire departments, police stations, self-defense force, and prefecture government. Enlightenment of citizens is also necessary.

Keywords: accidents; atomic power plant; collaboration; disasters; education; fixed-wing aircraft; helicopters; preparedness; training; trauma

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Improving Disaster Management

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Disasters never can be considered routine. A disaster is defined as a sudden massive disproportion between hostile elements of any kind and the survival resources that are available to counterbalance these within the shortest period of time. A multi-departmental approach to disaster planning is effective to meet the broad scope of needs; however, circumstances and approaches differ for each type of precipitating event and for individual departments. Disasters can take on a life of their own, so being prepared for the unexpected and unplanned is the only way to improve circumstances.

When a disaster occurs, healthcare settings experience everything except the routine; demands exceed the capacity of personnel and facilities. In recent years, there has been an increased incidence of civil disasters; the spectrum of possible catastrophes also has increased dramatically as a result of an increasingly technologically sophisticated society. Being prepared for the unexpected and unplanned is the only way to improve circumstances. Disaster preparedness plans must encompass the possibility of nuclear accidents, hotel and high-rise fires, terrorist attacks, aviation accidents, bomb blasts, riots, and industrial explosions, as well as natural calamities such as floods, epidemics, drought, and cyclones.

The emphasis of medical management shifts from individualized treatment to standardized therapy for disaster victims with the aim of providing maximum benefit to a maximum number of salvageable patients. A successful medical response to civilian disasters that produce multiple victims, whether natural or manmade, dictates formulation, dissemination, and periodic assessment of a contingency plan to facilitate the triage and treatment of the victims.

Keywords: casualties, multiple demands; disasters; events; injuries; needs; plan; preparedness; resources; technology; triage

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Community-Based Disaster Preparedness in West Bengal

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The Indian State of West Bengal is prone to all types of natural disasters including those from floods, cyclones, drought, landslides, earthquakes, and high tide, as well as