Emergency And Business Continuity Plan

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November 2010

Contents

PRIMARY HEALTH EMERGENCY PLAN

Organisation:			
Address:			
Telephone:		**Fax:**	
E-mail Address:			

Date Plan Created:	
Date Plan Reviewed:	
Plan Approved by:	

Introduction

This plan is a guide to the systems and processes that ***Name of Organisation*** will use to prepare and respond to an emergency situation.

The following factors have been considered as part of this emergency plan:

1. treatment of injuries and illnesses
2. evacuation procedures
3. accounting for all personnel
4. assignment of responsibilities
5. provision of equipment/materials
6. training
7. review process

Examples of Emergencies

- Medical collapse
- Fire
- Earthquake
- Flooding
- Hazardous substances spill
- Robbery
- Challenging behaviour
- Missing person

Key Targets/Responsibilities

- Ensure ***Name of Organisation*** will be able to meet the minimum needs of its stakeholders and respond to an emergency event
- Provision of appropriate communication strategies to ensure key responders are well informed during an incident
- Review of plan to be undertaken no less than every three years

Emergency Management Structure *(insert structure diagram here)*

Key Roles *(example only)*

Name	Role
	Health and Safety Representative
	Infection Control Liaison

Site Map *(insert site map here)*

Emergency Resources *(example only)*

Equipment	Location	Audit Frequency	Maintained By
First Aid Equipment			
Emergency Kit			
Emergency Keys			
Torches			
Emergency Pager			
Nurse Call Bells			
Emergency Water Supply			
AED (nearest location)		2 yearly	HBDHB

Medical Emergencies

Sudden collapse of person:

Call for help
Be aware of your own safety

Not Breathing?

1. Clear airway
2. Commence mouth to mouth resuscitation

Collapsed or Unconscious?

1. Airway – tilt head back, clear mouth
2. Breathing – if no breathing evident, start mouth to mouth
3. Circulation – if no pulse, start CPR

Bleeding?

1. Apply direct pressure
2. Use gloves if available
3. Elevate limb if possible

Seek medical assistance immediately or call for an ambulance if necessary

Have the person's personal record on hand

Fire

Response necessary to reduce the risk of injury and the effects of a fire by ensuring a prompt, safe and orderly evacuation of the building in accordance with the Fire Safety and Evacuation of Buildings Regulations 1992.

The ***Name of Organisation*** follows a fire scheme/fire procedures approved by the Fire Service.

Definitions

Building Warden: Designated person responsible for safely evacuating the building occupants in the event of a fire.

Fire Warden: Designated person to coordinate the safe evacuation of the building and pass on information to either the Building Warden or the Fire Service.

Fire Safety System: The combination of all methods used in a building to warn people in an emergency, provide safe evacuation and restricts spread of fire.

Total Evacuation: Evacuation where all the building occupants are evacuated to a safe place outside the building.

Staged Evacuation: A staged evacuation is one that may be approved for a building that complies with Regulation 16 of the Fire Safety & Evacuation of Buildings Regulations 1992. Staged evacuation makes provision for evacuation to a place within the building or staged evacuation to a series of two or more places within the building, prior to possible evacuation of the building itself, if required by the Fire Service or a Building Warden or otherwise, to a predetermined assembly point or assembly points (excerpt sec. 16 Fire Safety and Evacuation of Buildings Regulations 1992).

Process

In the event of a fire

Remove people and yourself from danger

Alert the occupants, and the Fire Service - dial ***111 (insert prefix if required)***. **Clearly state the name, address of the building and nature of the emergency.**

Confine the fire, shut doors and windows

Extinguish the fire – only if it is safe to do so

Evacuate - designated assembly point

All occupants should be accounted for once everyone has been evacuated to the assembly area. The Building Warden should report to emergency services to advise on the success of the evacuation. If people are missing, the Building Warden should report this to the first responding fire officer. Leave lights on as you evacuate to assist with visibility.

Immediate Response if Fire Occurs

Smell of Smoke:

- If you smell smoke, operate the manual fire alarm or call ***111 (insert prefix if required)***
- Try and locate the source of the smell
- Check your escape routes for smoke or fire
- Don't be concerned if the cause is only the neighbour's rubbish fire. It is better to be safe than sorry, the Fire Service will only record the call as a "false alarm with good intent"

Fire Warden

Responsible for the evacuation of their designated area.

On receiving notification or hearing the fire alarm:

- Determine means of escape
- Systematically evacuate all people from area via the nearest safe exit
- Ensure that the fire service has been called
- Physically check all storerooms, cupboards, toilets and places where people may hide, close door to signal room is empty
- If it is safe to do so, close all doors and windows, and electrical or gas appliances

- Account for occupants, note the location of any person remaining in the building and the reason they are not evacuating
- Reports to the Building Warden or the Fire Service, at the ***Name of Assembly Point***, on the status of evacuation and any missing persons
- If someone is unaccounted for during an evacuation, this information must be given to the Building Warden:
    - Missing person's name
    - Where they were last seen
    - Any other relevant information

Only if conditions permit and it is safe to do so, should any attempt be made to extinguish the fire. Persons remaining in the building to extinguish the fire must have their location reported to the Fire Service on their arrival.

Occupants

1. Follow the instructions of the Fire Warden
2. Leave by the nearest safe exit route - move quickly but **do not run**
3. Assist any other persons with disabilities
4. Proceed around the outside of the building to the fire assembly point
    - ***Add assembly point in here***
5. MUST remain outside the building until the "all-clear" is given by the Fire Service

Building Warden

Responsible for the overall co-ordination of evacuation of the facility.

On receiving notification or hearing the fire alarm:

- Proceed to fire alarm panel, the panel will indicate the "affected area" of the fire
- Direct arriving staff to assist with evacuation where most required
- Receive report from each Fire Warden
- Advises the New Zealand Fire Service of the status of evacuation and any missing persons
- Following "All Clear" instruction from the Fire Service, ensure all staff are advised of the "All Clear" status

The building Warden will require the following information from each evacuated area:

- The status of the fire and confirmation of the fire site if available
- An update of any individuals remaining in the fire zone
- The status of evacuation progress and current location of individuals

All information, if possible, should be recorded and will be used for provision of information to others and for debriefing purposes.

The Building Warden provides the following information to the senior Fire Officer:

- The status of the fire and confirmation of the fire site
- An update of any individuals remaining in the fire zone
- The status of evacuation progress
- If approved fire cells are involved, advise the Fire Officer as to which cell has been used for evacuation purposes
- Information on Evacuation Board up to date

Continue to advise the Fire Service of changes in status until the senior Fire Officer gives the All Clear.

Emergency Warning Systems

Emergency warning systems include both automatic and manual alarms, intercom systems and portable telephones.

Name of Organisation has in place the following fire protection systems:

- Smoke stop doors
- Fire cells separated by fire rated walls and fire doors
- Automatic closing doors
- Manual fire alarm points

These are backed up by:

- Sprinkler systems
- Smoke detectors
- Fire hose reels
- Fire extinguishers

These are supported by:

- Fire evacuation notices
- Fire evacuation procedures

Manual Fire Alarm / Emergency Telephone Number

Red manual fire alarm points are located throughout the building.

All staff must:
1. Know the location of the manual fire alarm call points in their work area
2. How to break the glass and activate the alarm switch

The Fire Service is automatically advised when the manual fire alarm is activated

But staff are still required to telephone:
1. The Emergency Telephone Number ***111 (insert prefix if required)***
2. Clearly state the premises name, address (including suburb and town/city) and nature of emergency

Alarm System

(Details of alarm system here, e.g. type of alarm – continuous, pulsing, bell, specific action required and any fire cells within facility)

Survival Tactics

- Don't panic

- Breathe slowly and quietly
- Stay low
- Check for heat before standing up
- Feel doors for heat
- If trapped, attract attention

1. ***Don't panic.*** Panic spreads faster than fire, take time to think. Take time to look for escape routes and decide your next action.
2. ***Try to breathe quietly.*** You will take in less smoke and hot toxic gases, which could increase your chances of survival.
3. ***Stay low.*** Fire and smoke grows like a mushroom. Fire burns upward. Smoke rises. Air is clearer and cooler at floor level.
4. If you have to stand up, raise your arm above your head to feel how hot it is.
5. Feel doors for heat before opening them. If the door is hot, the fire could be on the other side.
6. If totally trapped, yell from a window. Use a telephone if there is one to call the Fire Service and advise them of your location.

Responsibilities for Fire Safety

All Staff:

1. Are responsible for the safe and expedient evacuation of people in the workplace
2. Be familiar with and implement fire safety management strategies and evacuation procedures when appropriate
3. Know what to do if a fire is suspected or known in their work area
4. Attend mandatory and workplace specific fire safety and evacuation training
5. To report any fire hazard to the Manager or appropriate person
6. Ensure that the fire fighting equipment in the area is accessible at all times
7. Make others aware of fire safety or evacuation instructions as appropriate

Check the means of escape in your work area at regular intervals to ensure:

- All exits are kept clear of obstacles at all times.
- Exit doors are not locked; barred or blocked so as they prevent occupants from leaving the building when the building is occupied.
- Smoke control and fire stop doors are not to be kept open by methods, other than hold open devices, that comply with the Building Code.
- Stairways and passageways designed specifically for means of escape from fire are not used as storage or places where refuse is allowed to accumulate.
- Flammable liquids or materials are not stored near or within any part of the building used as a means of escape from fire. They shall be in non-combustible containers.

Any fault affecting the means of escape must be rectified immediately or reported to the building owner for action.

All Clear Procedure

On receiving the “All Clear” statement from the New Zealand Fire Service, the Building Warden can then initiate the “All Clear Procedure” by informing all staff.

The Building Warden, if possible, should discuss the evacuation response with the Senior Fire Officer and report back to the debrief meeting with any relevant details.

Organise a debrief as soon as possible after the All Clear has been given.

Debrief Procedure

As soon as practicable, after the All Clear has been given, a debrief meeting should be arranged to evaluate the evacuation response.

Those attending should include:

- Chief Executive Officer/Manager (if applicable)
- Manager
- Building Warden
- Fire Wardens
- Any staff who were involved and are able to attend

The debrief meeting should include:

- Response times
- Numbers of staff arriving to assist
- Feedback from the Fire Service
- Any problems experienced
- Improvements to response which may be made

Following the meeting a Fire Report must be completed.

Fire Reports

The Fire Report is completed by the Building Warden with the assistance as soon as possible after the debrief meeting.

This report should include:

- Date and time of event
- How the alarm activation occurred
- Why the activation occurred (practice, false alarm, actual fire)
- How the activation could have been avoided
- The response times
- Numbers of individuals assisting (include whether call-back of staff was initiated)
- Evaluation of how staff responded to the event (what went well, issues, problems)
- Feedback from Fire Service
- How the evacuation procedure could be improved

Once this report is completed a copy should be kept of file.

Fire Alarm Technician *(delete this section if not applicable)*

1. Under normal circumstances the Fire Alarm Technician is contacted directly through the automatic fire alarm system.
2. Note: If there is a sprinkler activation, staff will be required to call ***111 (insert prefix if required)*** for the Fire Service and ***insert technician contact here*** for Technician to reset alarm.
3. This applies for all fire activation's and fire alarm panel defects. The Fire Alarm Technician should normally respond within 30 minutes of any fire alarm or defect.
4. It is imperative that the Building Warden ensures that the Fire Alarm Technician has actually responded to the alarm activation.
5. The Fire Alarm Technician's role is to reset the fire alarm.

Fire Training

1. The Manager is responsible for the co ordination of all mandatory training.

2. All staff must attend training in fire safety and evacuation annually. The training to be appropriate for the level of responsibility.

Training to focus on:

- Fire prevention
- Fire evacuation
- Evacuation methods

All Staff are Required to be Aware of the Following:

- the evacuation procedures
- where the fire alarms are and how to use them
- where the exits are
- where the hose reels and extinguishers are and how to use them
- the special hazards in the building

Time Frames:

- Workplace Orientation, all new staff, first day of work.
- Workplace Refresher, frequency to be determined by the nature of work activities, to be completed at least every twelve months.

Trial Evacuations:

- Trial evacuations to be conducted at not less than six months after any previous emergency or trial evacuation.
- The Manager is responsible for the scheduling of the trial evacuations.
- The New Zealand Fire Service monitors the trial evacuations.

Prevention:

- Housekeeping - clean and tidy, dispose of flammable goods
- Constant checks - electrical, heating exits
- Storage - tidy, away from ignition sources, store chemicals separately
- Reporting - report anything that appears worn or dangerous
- Training - keep up training in Fire Safety

Earthquake

All occupants should:

- Stay calm.
- Take shelter in a safe part of the building, take cover under a table/desk or where no furniture is available "drop, cover and hold", cover your head and bury your face in your arms, keep away from windows if possible
- Do not attempt to run outside
- If in a lift, stop it at the nearest floor and get out
- Evacuate if instructed to do so
- If outdoors move clear of buildings, large trees, high banks, power poles, overhead power lines and other potential hazards

After the earthquake:

- Senior staff member (Site Controller) to take charge of the area and co-ordinate actions
- Staff member to be designated to evacuate each area (Warden)
- Move everyone away from windows and outside walls
- Pull curtains across broken windows
- Leave doors open
- Account for everyone
- Assess and aid the injured
- Identify hazards e.g. severed power and gas lines, broken glass, unstable structures
- Disconnect equipment as appropriate
- Gather vital records, equipment and resources
- Evacuate if necessary

Wardens should:

- If inside — Instruct everyone to take cover (by calling earthquake)
  Reassure people
  Evacuate the building, as for fire, if instructed to do so, or if it is unsafe to remain inside

- If evacuating — Ensure everyone has a safe passage to the assembly area, ***name of assembly area***
  Ensure that people have safe footwear and warm clothes (if needed)
  Ensure that all rooms have been evacuated
  Turn off all appliances and services
  Supervise the evacuation to the assembly area
  Take the roll of all occupants
  Advise the Site Controller of any missing people, staff, contractors or known visitors

- If outside — Instruct everyone to move clear of buildings, large trees, high banks, power poles, overhead power lines and other potential hazards

The Site Controller should:

- Undertake the activities associated with fire evacuation
- Listen to a local radio station for reports and act as instructed
- Advise staff and other people to be prepared for further shocks
- Liaise with emergency services as required
- Ensure the emergency plan is activated

Your building may be damaged but the priority goes to saving life. Be conscious of the number of emergency calls that will be made after an earthquake. Do you really need emergency assistance to rescue or aid people? In the meantime, keep people out of harm's way.

Listen to radio broadcasts for the activation of the nearest Welfare Centre to your location.

Flooding

Floods are the most common cause of Civil Defence emergencies.

When a flood threatens you need to:

- Listen to the radio for advice and information
- Follow Civil Defence advice and instructions
- Disconnect electrical appliances and move valuables, clothing, flood, medicines and chemicals above the likely reach of floodwater
- Be aware that you may need to evacuate. You may be asked to evacuate by the emergency services or you may make this decision on your own. The well being and welfare of your charges should be foremost in your thinking.
- Turn electricity and gas off at the mains
- Take emergency kit, if you need to evacuate
- Do not walk or allow others to walk through flooded areas
- Stay away from downed power lines and electrical wires

Stay together as a group if evacuating from your site. If Hawke's Bay Civil Defence Emergency Management officials are involved in the evacuation, then emergency welfare centres will be established to receive evacuees.

After The Flood:

- Listen to a radio or television and don't return to the facility until authorities indicate it is safe to do so.
- Before entering a building, a building inspector will need to inspect foundations for cracks or other damage. Don't go in if there is any chance of the building collapsing. Look for electrical system damage. If you see sparks or broken or frayed wires, or if you smell hot insulation, turn off the electricity at the main fuse box or circuit breaker. If you have to step in water to get to the fuse box or circuit breaker, call an electrician for advice. Keep power off until an electrician has inspected your system for safety.
- Check for gas leaks. If you smell gas or hear blowing or hissing noise, open a window and quickly leave the building. Turn off the gas at the outside main valve if you can and call the gas company from another property. If you turn off the gas for any reason, it must be turned back on by a professional.
- Until local authorities proclaim your water supply to be safe, boil water for drinking and food preparation vigorously for five minutes before using.
- Do not prepare and eat any foodstuff that has been contaminated by flood water.
- Upon entering the building, don't use matches, cigarette lighters or any other open flames, since gas may be trapped inside. Instead, use a torch if necessary to light your way.
- Be careful walking around. After a flood, steps and floors are often slippery with mud and covered with debris, including nails and broken glass.
- Check for sewage and water line damage.
- If the facility has suffered damage, call the insurance company or agent who handles your flood insurance policy right away to file a claim.

Hazardous Substances Spill

Hazard Assessment *(example only)*

Hazard	Location	Control Plan	Completed By
Chemical Storage			
Oxygen Bottles			
Gas Bottles			

It is the responsibility of the Manager to ensure:

- Provision of product data sheets (PDS) and material safety data sheets (MSDS), ***add location here***
- All containers of chemicals and cleaning agents are labelled
- Keep and maintain a register of hazardous substances
- Provide staff with instructions on handling and documenting hazardous substances
- Conduct regular assessment on the safe use of hazardous substances

Chemical Incident

Caution should be taken with all emergencies involving chemicals. A number of scenarios exist.

When a moderate size spill occurs at the facility:

- Secure the immediate area
- Evacuate if necessary
- Contact the Fire Service if necessary - dial ***111 (insert prefix if required)***
- Wear appropriate personal protective equipment
- Begin a clean up following the manufacturer's recommendations

Spills that occur outside the facility may also require a response by you. Emergency services will advise you what action to take. There are two options:

In-place protection

Is often used for toxic chemical spills. You should go into the centre of a building and close all the doors and windows. Also shut down air conditioning units etc. In-place protection allows you to shelter inside until a toxic cloud passes. Once the cloud has passed, and on the advice of the emergency services, people should leave their buildings and allow ventilation of the building.

Evacuation

Is used during a spill of potentially explosive chemicals. Emergency services will advise you if you need to evacuate. Listen to a local radio station for information during an emergency. It is the easiest way for emergency services to pass on advice.

Mercury Spill

- Do not touch spilt mercury e.g. from dropped thermometer with bare hands. Pick up with a paper scoop or cardboard.
- If porous substance involved consider removing this from the facility or contact specialist cleaning services.

- Ventilation is important – mercury will vapourise at room temp producing a poisonous gas.
- Store waste Mercury in an air tight container covered with a suitable liquid - to prevent release of mercury vapour.
- Contact OSH to ascertain appropriate waste disposal operators. Do not dispose of in normal rubbish collection.
- Consider whether mercury exposure of worker or employee has occurred. If so, arrange appropriate (probably an occupational physician) management and follow-up. Consider contacting National Poisons Centre.

Gas Leak

- In the event of a gas leak **DO NOT SET OFF THE ALARM**
- Advise the Fire Service immediately (using a telephone well away from the gas leak)
- Advise the Site Controller (manager or most senior person) immediately
- Shut off the gas if you can do so safely
- Initiate an evacuation by word of mouth
- Do not use any electrical devices
- Leave all lights as they are
- Turn off any gas heaters

Evacuation

Evacuation and Temporary Relocation

An evacuation will be necessary when it is **unsafe** to remain in a facility. In most cases the event will be sudden and evacuation immediate (e.g. fire or gas leak).

For evacuation the fire procedure is to be followed.

The decision to relocate is made by the Site Controller (manager or most senior person) in consultation with the Emergency Response Advisor at Hawkes Bay District Health Board 027-245-3692 and the Primary Health Organisation.

Hawkes Bay District Health Board Role

During a Civil Defence Emergency Declaration, Hawkes Bay District Health Board assumes responsibility for all health care services across the region. Requests for assistance should be made to the Emergency Operations Centre at Hawkes Bay Hospital.

Escape Routes and Assembly Areas

Escape routes are clearly marked and lead to the nearest safe exit (or in building assembly area). All exit doors, including smoke stop doors, doors on escape routes and doors between adjoining rooms, open from the inside in the direction of outward travel without the use of keys. All exits that could be used as an escape route are regularly checked to ensure that they are kept clear.

Evacuation Control Points

A system of Command and Control is an integral part of the evacuation system.

The Building Warden controls the evacuation.

The evacuation control points/assembly areas are:
(Add evacuation points in here)

People are to assemble at the designated evacuation points and await further instructions.

Safety Register *(example only)*

Equipment	Location	Audit Frequency	Maintained By
Fire alarms and manual call points			
Fire hose reels			
Fire extinguishers			
Fire blankets			
Smoke alarms			
Fire brigade inlets and sprinkler valve			
Fire and smoke doors			
Fire alarm indicator panel			
Exit ways			
Assembly areas			

Turning Off Services *(example only)*

Equipment	Location	Audit Frequency	Maintained By
Water Mains			
Backflow Preventers			
Gas Mains			
Shut off valves for water services			
Shut of valves for gas			
Main valves for heating system			
Plant/Boiler Room			
Emergency lighting			
Emergency lighting fuses			
Emergency signage/exits			
Outside lighting/security			

Robbery

Any business handling cash is at risk from robbery. This is also true of premises which store drugs.

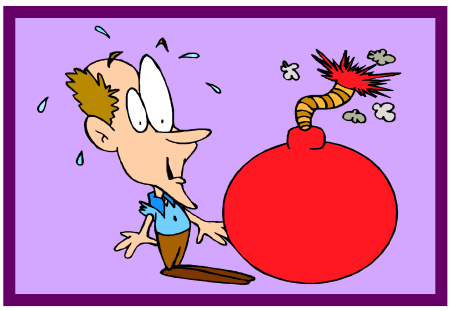
Procedures that minimise the risk of robbery: ***(example only)***

- Doors fitted with tamper-resistant locks, catches and hinges
- Windows locked and secured
- Security lighting
- Signage indicating that a minimal amount of cash/drugs is held on site

In the event of:

1. OBEY EXACTLY THE DEMANDS OF THE ROBBER(S)
2. Try to remain calm and attempt to calm the offenders (or others). Observe the alleged offenders. If security company calls give incorrect code (known as “unset under duress”).
3. When able to (assuming offender has departed) check other occupants are all right. Assist where necessary. Secure both entrances and call the Police on ***111 (insert prefix if required)***. Don’t touch anything the offender(s) touched, or left behind.

4. Ask all witnesses to remain until the Police arrive
5. Write down an offender description and suggest any others do similar
6. Liaise with the emergency services as appropriate
7. Inform the Manager/Owner



Safe transportation of cash:
If banking is done by a member of staff:

- Use an unmarked bag to carry cash
- Vary the time and day when banking is done
- Vary the route taken to the bank

Challenging Behaviour

Violence is the unjust or unwarranted use of force and power. Many people in their workplaces are the victims of violence, including verbal abuse, threats, harassment, physical assault, serious bodily injury and death. Violence can occur in any occupation and in a variety of situations.

Name of Organisation procedure for dealing with occupational violence is as follows:

1. Document:
   - incidents, in as much detail as possible
   - the names and addresses of people involved and willing to support your version of events
2. Report the incident to your employer and provide them with details
3. Ask your employer or an outside organisation to provide advice, support and assistance in dealing with workplace bullying
4. Document all incidents and appropriate measures taken to prevent recurrence (e.g. reporting to the police)

Personal Threat

Personal threat may be in the form of unarmed or armed confrontation. The definition of these is as follows:

- unarmed: a threat by others confronting in a violent or threatening manner; or where a person threatens self-harm or suicide
- armed: as above but where the person exhibiting threatening behaviour is armed with a weapon and there is a perception that the weapon will be used

Procedure

When experiencing a personal threat:

- keep further than arm's length away from the subject
- maintain an exit path for own escape where possible
- avoid being trapped in a corner or small room
- clear the area of all items that may be used as weapons or items that may cause damage
- notify another staff member if possible and ask them to contact ***111 (insert prefix if required)*** and ask for the police
- if no-one is available, try to call ***111 (insert prefix if required)*** and ask for the police
- preserve the scene until police arrive
- exclude media

Attempt to separate the other people from the person who is being aggressive - if you can do so safely.

If the offender is armed and is clearly a danger to others, follow their instructions without hesitation.

Contact the Police as soon as you can. Dial ***111 (insert prefix if required)*** and ask for Police.

Try and remember as much as you can about the offender:

- Height
- Ethnicity
- Skin and eye colour
- Hair colour and style
- Scars, tattoos, piercings etc
- Clothes - style, colour, brand
- Jewellery
- Accent

Try and remember as much about the weapon as possible:

- Size
- Shape
- Colour
- Firearm/knife/other
- Was it held in one hand or two?
- Was the barrel/blade long or short?
- Was it fired?
- Do you know the make of weapon?

Note: The safety of people is paramount. Staff are not expected to put themselves at risk.

Missing Person

If a person in your care goes missing, you should contact the Police and:

- Make a thorough search of the facility, including every space into which a person could crawl.
- Ask every person present (including staff, other clients/patients and visitors) if they have seen the person.
- Contact the family of the missing person - just in case they collected them without your knowledge.

After contacting the Police:

- Keep someone by the phone to liaise with Police until they arrive.
- The Police will search the facility again.
- The Police may ask a staff member to accompany them on an area patrol to search for the person beyond the facility.
- Information the Police are likely to require includes when and where the person was last seen and the person's emotional state

Debriefing

The last step in this process is to record everything that has happened in the significant events register including:

- what happened
- why it happened
- how it was handled
- if it could have been handled better
- how it could be prevented
- actions to take to prevent recurrence, when they should be completed and by whom

Emergency Exercises or Drills

An emergency exercise will be conducted on a two yearly basis.

Fire evacuation drills are conducted at 6 monthly intervals.

Annual training will be conducted for all staff as determined by the Manager/Owner.

Assigned Actions for Key Personnel

Owner/Manager

Readiness:

- Aware of responsibilities
- Ensure staff are prepared and participate in a minimum of one exercise per year (table top, simulated and actual event)
- Document outcomes and improvements required and plan to achieve these
- Review and update emergency plan every three years or more frequently if changes occur to your environment or policy or legislated requirements are identified
- Ensure maintenance of critical resources required to respond
- Responsible for the renewal of the Building Warrant of Fitness
- The development of operative fire evacuation system and procedures
- Ensure staff receive mandatory fire safety training
- Ensure that Material Safety Data Sheets for Hazardous Substances are available in the workplace

Response:

- Assess the event and respond accordingly
- Assign roles/tasks to individual staff members
- Ensure continued provision of critical supplies
- Keep incident log, including actions taken and communication log

Recovery:

- Undertake a debrief, complete an event report and review plan

Staff on Site

- Assess situation
- Undertake response as per plan or instruction from person in control

- Notify Manager of additional staffing requirements or staff availability and resource requirements

References, Resources and Templates

- Ministry of Health (www.moh.govt.nz)
    - NZ Public Health and Disability Act 2000
    - National Health Emergency Plan: Guiding Principles for Emergency Management Planning in the Health and Disability Sector, 2005
    - The National Health Emergency Plan (www.moh.govt.nz/nhep)
    - The New Zealand Influenza Pandemic Action Plan (www.moh.govt.nz/pandemic)
    - The National Health Emergency Plan: Hazardous Substances Incident Hospital Guidelines, 2005
    - The Health Act 1956
    - The Epidemic Preparedness Act 2006
    - Influenza Pandemic Planning Business Continuity Planning Guide 2005: http://www.med.govt.nz/upload/27552/planning-guide.pdf
    - National Health Emergency Plan: Infections Diseases:http://www.moh.govt.nz
- The MoH Operating Policy Framework (latest version); (available from DHBs)
- Ministry of Civil Defence (www.MCDEM.govt.nz)
    - The Civil Defence & Emergency Management Act 2002
    - The National Civil Defence Emergency Management Plan, Sections 6 and 9
    - Civil Defence Emergency Management Regulations 2003: http://www.legislation.govt.nz
    - Emergency Procedures: handbook for management and wardens
- The NZ Health and Safety in Employment Act 1992
- AS/NZS 4360:2004 (Risk Management)
- SAA/SNZ HB 228:2001 (Guidelines for Managing Risk in Healthcare)

Cross Reference to:

- Fire Safety and Evacuation of Buildings Regulations 2006: http://legislation.govt.nz
- Hazardous Substances and New Organisms Act 1996: http://www.legislation.govt.nz
- New Zealand Fire Service Evacuation Scheme:http://evaconline.fire.org.nz
- Resource Management Act 1991: http://www.legislation.govt.nz
- Standards New Zealand Business Continuity Plan AS/NZS HB221:2004
- Occupational Safety and Health Service, (undated). Hazard Management Guide.
- Occupational Safety and Health Service, (undated). Learn the basic steps to make your workplace safer. Occupational Safety and Health Service, Department of Labour, Wellington. OSH 4031-4039

Legislative Compliance

- NZ Public Health & Disability Act 2000
- Code of Health & Disability Services Consumers Rights 1996
- Health Information Privacy Code 1994
- RNZCGP
- Health & Safety Employment Act 1992 & 2002 Amendment
- Medicines Act 1984
- The Building Act 1991
- Building Code, Fire Safety and Evacuation of Buildings Regulations 1992

Emergency Call Back List *(example only)*

(Insert date here)

Senior staff member:

Notifies the Manager/Owner who commences the call back list.

Name	Designation	Telephone	Cellphone

EMERGENCY CALL BACK LIST FORMAT TO USE:

Initiated call begins at the top of the list.

"This is ..... speaking".
"We have an EMERGENCY ....., we need …….. staff." (state whether practice or real event).
"Are you able to attend?"

If **YES:** **"You are staff number ....., please ring the next person on the list."**

If **NO:** **"Can you ring the next person on list and pass on the message?"**

The last person on the phone list contacts the facility with the number of staff able to attend and assist.

Essential Contacts List

Agency/Organisation	Phone	After Hours	Fax

PRIMARY HEALTH
BUSINESS CONTINUITY PLAN

Organisation:			
Address:			
Telephone:		**Fax:**	
E-mail Address:			

Date Plan Created:	
Date Plan Reviewed:	
Plan Approved by:	

Introduction

This plan is a guide to the systems and processes that ***Name of Organisation*** will use to prepare and respond to a situation where there is risk to business continuity. This plan is flexible in order to cater for a variety of situations and is based on known hazards and risks and available resources.

Examples of Emergencies

- Natural disasters (e.g. earthquake, storm, tsunami, flood, hurricane, cyclone)
- Accidental hazards (e.g. fire, gas leak, vehicle collision, industrial accident)
- Hostile acts (e.g. war, terrorism, sabotage, vandalism)
- Wilful/malicious damage (e.g. security breach, theft, IT virus, media leak)
- System or equipment failure (e.g. IT or telecommunications, electronic security systems, electrical equipment)
- Loss or destruction of vital records or information
- Loss or lack of critical resources (e.g. power, water, office facilities, supplies)
- Loss or lack of critical support functions (e.g. payroll, finance, administration)
- Loss or lack of key personnel

Threat Analysis for Hawke's Bay

Hazardous Substances
The fact that road, rail, sea and air transport converges throughout the region exposes it to the likelihood of a hazardous substance spill resulting from a transportation accident. However, the area affected would generally be small by comparison to the overall size of the region. The eventuality is considered slight.

Heavy Rainfall/Flooding
The initial effect of heavy rainfall is unlikely to cause significant disruption apart from surface flooding and landslips. However, continued heavy rainfall has the potential to cause disruption in affected areas through both flooding and land subsidence resulting in threat to life and/or property. Floods have, and will continue to be, a major threat to the region.

Pandemic
Pandemic influenza is the most likely major incident and its inevitability presents the greatest challenge for health with response required over a 2 to 3 month period during which 37% of the population will become clinically unwell in a scenario where the "outside" cannot be depended upon for assistance.

Earthquake
The region lies within an earthquake zone of relatively high risk and has experienced the effects of major earthquakes in 1863, 1904 and 1931. The processes that caused those quakes are ongoing, therefore earthquake must be considered an ever present probability and one that could have a significant effect on the entire region.

Volcanic Activity
The direct explosive effect of volcanic eruption is unlikely, however, should the wind direction be unfavourable, areas of the region could be influenced by volcanic fallout from eruptions in the Central North Island. Evidence of previous eruptions is present throughout the region in the form of ash layers.

Tsunami
The proximity of some population centres close to the east coast exposes some communities to the potential for Tsunami damage generated by earthquakes in the Pacific. Indications are that this risk is small.

Probabilities of Major Threats:

Hazchem Spill 1 in 5 year event
Flooding 1 in 10 year event
Pandemic 1 in 30 year event
Earthquake 1 in 72 year event
Volcanic Activity 1 in 100 year event
Tsunami 1 in 200 year event

Key Targets/Responsibilities

- Identify risks and hazards
- Assign responsibilities for plan maintenance and the direction of all phases of readiness, response and recovery
- Provide safety of staff and community population
- Protect business information and assets
- Ensure ***Name of Organisation*** will be able to meet the minimum needs of its stakeholders and continue the provision of essential services
- Provide for appropriate communication strategies to be in place to ensure key stakeholders are well informed during an incident until key functions are restored
- Provide for a rapid return to operational status for critical activities and business processes and allow an orderly transition to normal operations when facilities are restored
- Minimise financial loss
- Planning and exercising of response is aligned with the emergency response systems at HBDHB

- Review of plan to be undertaken every three years

Planning

Planning for response to risks to business continuity uses an 'all-hazards' approach using the four 'Rs' of emergency management planning:

The Four 'Rs' of Planning	
Reduction	Recognition of hazards and risks and mitigation to avoid or minimise the impact prior to the event.
Readiness	Planning, establishing response systems, training, maintaining readiness to respond.
Response	Mobilising and activating the plan.
Recovery	Actions to recover from the incident, including moving back to business/service as usual and reviewing and updating the business continuity plan, based on what has been learnt from the incident.

Organisation Overview

Organisation Description

Provision of

Number of Enrolled Patients/Clients/Residents:

Number of Staff:

	Management	Clinical	Admin/Support Staff
Day Shift			
Afternoon Shift			
Night Shift			

Location of Plans and/or Hazard Register:

Location of Staff Call-back List:

Service – Critical Functions (These are the agreed critical functions that are required to occur to continue delivering service, ranked in order of priority including time delay sustainable until function must be restored i.e. tolerable outage time)

Critical Functions	***Tolerable Outage Time (Hrs - Wks)***							
	2	***8***	***12***	***24***	***48***	***72***	***1wk***	***2wk***
1.								
2.								
3.								

Vital Records

Back-up Computer records stored at:

Critical paper records stored at:

Backup supplies stored at:

Relocation Site Preferences and Agreed Memorandum of Understanding:

1.

2.

Assigned Actions for Key Personnel

Owner/Manager

Readiness:

- Aware of responsibilities
- Complete the business continuity plan
- Ensure insurance cover regarding facilities, equipment and loss of income
- Maintain current staff and essential contacts phone lists
- Ensure staff are prepared and participate in a minimum of one exercise per year (table top, simulated and actual event)
- Document outcomes and improvements required and plan to achieve these
- Review and update emergency and business continuity plans annually or more frequently if changes occur to your environment or policy or legislated requirements are identified
- Ensure maintenance of critical resources required to respond

Response:

- Assess the event and respond accordingly
- Identify ongoing staff needs and plan future requirements based on assessment of situation
- Initiate staff call-back if required
- Assign roles/tasks to individual staff members
- Notify major stakeholders, e.g. Board of Directors, DHB Emergency Response Service
- Maintain staff register
- Rest/rotate staff
- Ensure continued provision of critical supplies
- Keep incident log, including actions taken and communication log
- Initiate situation reporting
- If required plan to relocate to identified location with reference to alternate sites already decided as per MOU
- Keep staff informed of decisions and progress
- Establish liaison with external services if event escalates or is part of a community event
- Assess ongoing services needs

Recovery:

- Planning for return to normal service
- Undertake a debrief, complete an event report and review plan

Staff on Site

- Assess staff, patient/client/resident and visitor safety
- Clearly identify all patients/clients/residents/visitors
- If practical/safe collect essential records, client medications (if applicable) and essential supplies, if evacuation likely
- Undertake response as per plan or instruction from person in control
- Notify Manager of additional staffing requirements or staff availability and resource requirements
- Commence personnel/visitor log if required
- Assess capability to provide additional service if requested i.e. capacity to take on additional patient/client volumes or clients who are able to be discharged

Organisational Dependencies

Equipment Essential to Your Service Delivery				
Equipment essential to your service delivery. Please specify if this equipment is mobile or fixed, if mobile and if there are specific requirements for moving please add this also. Also add where this equipment is located in your organisation and if you have access to back up items.				
Equipment Name	***Current Location***	***Mobile or Fixed?***	***Available at alternative locations? Where?***	***Comment***

Clinical Supplies Essential to Your Service Delivery			
Clinical Supplies essential to your service delivery. Please specify or forecast the amount required and a frequency of how often this amount is required e.g. daily. Also who the supplies are normally sourced from, associated contact details and whether a supplier agreement exists for prioritised supply within an emergency or incident.			
Item Name / Description	***Amount Required and Frequency***	***Name and Contact Details of Supplier***	***Prioritised Supply Agreed***

Utilities Used

List here the utilities used by your organisation and identify the dependency you have on the utility in order to continue to deliver your service.

0 = No dependency
1 = Low dependency – could continue without
2 = Medium dependency – could continue, using substitutes
3 = High dependency – could not function without it

Item Name/Description	Dependency Level				Comment
	0	1	2	3	
Wall Oxygen					
Portable Oxygen					
Suction					
Heating					
Air Conditioning					
Water					
Sewage					
Power					
Nitrous Oxide					

Natural Gas					
Computers					
Telephone					
Cell Phone					
Fax					
Fuel (e.g. for boilers)					
Beds					
Linen					
Waste Disposal					
List other supplies and utilities specific to your organisation:					

External Service Dependencies					
Enter here any other services on which you are dependant in order to provide your service, and identify the level of that dependency					
0 = No dependency 1 = No dependency for first 24 hours 2 = Low dependency – could continue to function with some inconvenience 3 = Moderate dependency – loss of support service or utility causes restriction in service delivery 4 = Critical – service is unable to function and therefore ceases					
Organisation Name	**Dependency Level**				
	0	**1**	**2**	**3**	**4**
ACC					
Birthing Units					
Community Health Services					
Community Lab					
Computer/IT (Name)					
CYFS					
Fire Service					
GPs					
Insurance Company					
Hospital					
Laundry Services (Name)					
Mental Health Services					
Ministry of Health					
Pharmacies (Name)					
Police					
Private Hospitals					
Public Health Service					
Resthomes (Name)					
Security					
Social Workers					
St John					
Taxis or Other Transport Service					
Undertaker (Name)					
WINZ					
Others:					

CONTINGENCY PLANS FOR FACILITIES AND EQUIPMENT FAILURE *(example only)*

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Electricity failure	1	• Inability to supply normal services to all areas • Hygiene risks • Perishable food at elevated temperatures • Failure of ovens • Failure of dishwashers • Unable to use soldering irons for equipment repair	1-5 days	• Backup generators operate following a timed 10 second delay • Reduce perishable supplies held • Promote chilly bins • Supply cold food • Access other sites for cooking of hot foods • Utilise single use eating utensils and sanitise trays between use • Butane gas canisters for gas soldering
Emergency generator failure	1	• Limited switching capability • Sewage unable to be pumped • Water supply failure	1 day	• Re-analysis of HBDHB function ability required • Promote pit privies • Promote bottled water • Water restrictions
Lighting failure	1	• Patient and staff safety compromised • Inability to observe people in seclusion areas	1-2 days	• Adequate lighting on essential power • Torches and batteries available in all areas • Ensure all areas are clear of hazards
Sewage system failure	1	• Inability to dispose of waste • Inability to dispose of radiological wastes	2-5 days	• Restrict water/sewage useage • Hireage of mobile toilet units • Mobile/fixed large septic tanks for effluent and location and means of pumping • Effluent disposal trucks

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Water supply failure	1	• Fire sprinklers and wet risers compromised • Handwashing compromised • Drinking water in short supply	1 day	• Regular daily chemical testing of water take-off due to increased demand from source bore • Promote hand washing solutions • Promote water conservation • Initiate water purification if required • Assess drinking water requirements in each area
Natural gas supply failure	1	• Hot water and heating supply delivery impacted • Inability to cook on gas fired stoves	1 day	• Relocate affected areas if necessary • Run boilers on diesel • Electric or steam cooking • Cut into existing water supply, isolate and initiate new feed supply system
Medical gases failure	1	• Wellbeing and life of patients compromised • Inability to provide oxygen and suction at the bedside	1 day	• Stockpiling of supplies of portable oxygen, nitrous oxide and entonox • Portable oxygen delivery by BOC, ensure priority supply • Use of portable suction unit
Utility software failure	1	• Water supply may fail	8 hours	• Manual control
Security risks	1	• Inability to maintain safe environment	1 day	• Arrangement with external security provider to increase monitoring • Use of signage and barriers if required
Hot water supply failure	1	• Unable to provide basic hygiene requirements for people	1 day	• Assess requirements • Heat water on stove and/or BBQ as required and if available
Defibrillators inoperable	1	• Unable to defibrillate a person in a cardiac arrest situation	1-2 days	• Batteries constantly charging

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Refrigeration failure	2	• Unable to store drugs, milk and foodstuffs safely	2 days	• Utilise chilly bins and slicker pads • Only essential items refrigerated • Kitchen chiller and freezer have an independent electricity source • Management of essential drugs • Essential power for Pharmacy fridge • Undertakers to retrieve the deceased ASAP
12 lead ECG machine inoperable	2	• Access to diagnostic results in cardiac patients limited	< 1 week	• Source alternate machine
Non invasive blood pressure monitors inoperable	2	• Close monitoring of blood pressure in an unstable person more labour intensive	1-4 weeks	• Use manual sphygmomanometers
Monitors including cardiac and oximetry inoperable	2	• Failure to identify or document arrythmias or oxygen saturation • Unable to closely monitor a person	1-2 days	• Increase nursing and medical observation • Utilise battery operated pulse oximeters • Ensure adequate supplies of batteries available
Radiological imaging equipment inoperable	2	• Unable to perform radiological imaging • Unable to develop films	< 1 week	• Use mobile imagers on emergency power • Use alternate development methods
Failure of client/resident call bells	3	• Client/resident//staff unable to call for assistance/help	2 days	• Hand bells (one per room) • Increased staff vigilance • Increase staff ratio on night duty
Steriliser flash unit inoperable	3	• Unable to flash sterilise instruments contaminated during procedures	1-2 weeks	• Source a unit run on electricity
Pan room hopper – sluice inoperable	3	• Unable to clean bed pans, urinals and bowls properly	1 day	• Dispose of excretions using toilet • Cold water soak disinfecting
Client/resident hoist inoperable	3	• Staff compromised when handling heavy patients	1 week	• Utilise manual hoists e.g. lifting belts • Utilise manual lifting techniques • Additional staff required for heavy lifting

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Heating/air conditioning failure	3	• Inability to regulate environmental temperature	1 day	• Essential areas on essential power • Utilise portable air conditioning units if temperature >25^{0}C • Use fans • Open windows and doors • Relocate care delivery areas if necessary
Electronic infusion devices inoperable	3	• Monitoring of IV fluid delivery more labour intensive	1-4 weeks	• Batteries constantly charging • All pumps have 6 hours of backup battery at 1400 mL/hr • Stock of burettes for volumetric pumps or Stat 2 Pumpette sets
Enteral feeding pumps inoperable	3	• Monitoring of enteral feeding more labour intensive	1-4 weeks	• Bolus feed • Gravity feed

CONTINGENCY PLANS FOR INFORMATION/COMMUNICATIONS SYSTEMS FAILURE *(example only)*

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Telephone/PABX failure – internal communications	1	• No communication system internally • Loss of contact with people	0-3 days	• Appointed runner in reception • Encourage staff to bring in cellphones
Carrier services failure – external communications	1	• No communication system externally • Loss of contact with others	0-3 days	• Reroute phones to second connection • Reroute external telephone number • Prepare voice message to be used as required • Broadcast message to public regarding contingency • Message to staff to prioritise external calls, message to be delivered by runner • Explore alternate voice and data carriers in the event that Telecom services would be unavailable for a substantial period
Paging system failure	1	• No paging contact with key staff • No nurse call via pagers	0-5 days	• All areas advised of failure • Key staff to inform reception area of alternate contact numbers • Use alternate contacts for on-call staff • Bell system for nurse call
Failure of duress alarms	1	• Unable to summon help quickly in a situation of danger	10-21 days	• Alarms on essential power with battery back-up
Internal data communications failure	1	• Loss of access to all information systems for affected area	0-3 days	• Manual system implementation • Identify and utilise alternate fibre runs • Non essential services shed while running on alternate systems • Equipment inventory, redistribute as required • Repair or replace
Failure of entire computer system	2	• Unable to register people • Unable to admit/discharge or transfer people • Unable to determine appointments • Unable to generate supplier information	1-2 days	• Manual registration process using preprinted forms • Minimum standard of identification consists of full name, DOB, NHI number • Utilize information stored on back-up discs or USB sticks

Problem	Priority	Impact	Estimated Resolution Time	Contingency
Failure of Ministry of Health NHI system	2	• Unable to allocate new U/R numbers • Unable to search for existing U/R numbers	2-3 days	• Utilize temporary minimum standards of identification
Failure of hardware utilised by core systems	2	• No information systems available for extended period of time	5-15 days	• Manual systems • Accurate documentation
Failure of fax/photocopier	2	• Unable to send information within facility or to other healthcare providers in written form • Unable to duplicate information	1-10 days	• Courier for external needs • Letters/appointment/reports to be typed using carbon paper or stand alone system with local printer if available
Failure of printing system	3	• Unable to generate hard copy of client information or reports	1-2 days	• Utilize word and word templates • Use of prepared hard templates

Recovery

Recovery planning is the process undertaken to restore business as usual during and following an event. This includes the provision of equipment and supplies, as defined in your Business Continuity Plan as well as the support and follow up process required to ensure staff are able to continue in their duties.

Recovery processes are integral in the planning for the management of an event. Recovery may be managed either internally or by external personnel, e.g. HBDHB.

The senior staff managing the event will direct recovery procedures. These individuals will begin considering requirements from the outset of the event based on the information available to them.

The key points for staff to be aware of in relation to recovery are:

- Update documentation regarding what you need to continue to provide your service
- Use the templates provided in your Business Continuity Plan
- Stand Down should be communicated when all parties involved in the management of the event response agree that the event is resolved and all risks around it have been mitigated

Recovery includes:

- Immediate event debrief sessions
- Event review

An event report will be written and findings used to update the Business Continuity Plan.

The key points for staff to be aware of in relation to debriefing post event:

- Staff may not recognise the impact an event has had on them and should be aware that the effects may emerge at any time during or following an event
- Senior staff should actively follow up with other and encourage utilisation of follow up support if required

Actions

In the event of and dependent on structure damage, it is the responsibility of ***Name of Organisation*** to contact the Hawke's Bay District Health Board Emergency Response Service and/or inform Primary Health Organisation (PHO).

	Criteria	Comments
1	Alternative location to operate from	Contact Hawke's Bay District Health Board (HBDHB) Emergency Response Service via HBDHB call centre (06) 878 8109 and inform PHO of decision
2	Loss of site	MOU with ***add name*** or HBDHB assist
	Loss of power	Emergency generator, ***add detail,*** or HBDHB assist
	Shortage of water	Stored water, ***add detail,*** or Local City Council
3	Nutritional provisions (if occupants need to stay put etc)	***Add detail***
4	Liaison personnel	Manager – ***Name*** Health and Safety Representative – ***Name***
5	Staff succession plan	Manager – ***Name***
6	Debrief procedure	Manager – ***Name*** Health and Safety Representative – ***Name***
7	Transport	***Add detail***
8	Replacement and repair priorities	Dependent on replacement – Owner or delegated authority to Manager May need to access HBDHB for critical equipment Insurance claims to be lodged
9	Provision of extra supplies	Refer to suppliers list or HBDHB assist
10	Auxiliary communication system	Most staff members have individual cell phones Nearest HBDHB radio set - ***add detail***
11	Communication system other than telephones to families/whanau	Most staff members have individual cell phones Nearest Civil Defence Welfare Centre - ***add detail***
12	Security provision	Alarm System

References, Resources and Templates

- Ministry of Health (www.moh.govt.nz)
    - NZ Public Health and Disability Act 2000
    - National Health Emergency Plan: Guiding Principles for Emergency Management Planning in the Health and Disability Sector, 2005
    - The National Health Emergency Plan (www.moh.govt.nz/nhep)
    - The New Zealand Influenza Pandemic Action Plan (www.moh.govt.nz/pandemic)
    - The National Health Emergency Plan: Hazardous Substances Incident Hospital Guidelines, 2005
    - The Health Act 1956
    - The Epidemic Preparedness Act 2006
- The MoH Operating Policy Framework (latest version); (available from DHBs)
- Ministry of Civil Defence (www.MCDEM.govt.nz)
    - The Civil Defence & Emergency Management Act 2002
    - The National Civil Defence Emergency Management Plan, Sections 6 and 9
- The NZ Health and Safety in Employment Act 1992
- AS/NZS 4360:2004 (Risk Management)
- SAA/SNZ HB 228:2001 (Guidelines for Managing Risk in Healthcare)
- Hawke's Bay & Gisborne Care Facilities Emergency Planning Guide

Cross Reference to:

- Civil Defence Emergency Management Act 2002: http://www.legislation.govt.nz
- Civil Defence Emergency Management Regulations 2003: http://www.legislation.govt.nz
- Fire Safety and Evacuation of Buildings Regulations 2006: http://legislation.govt.nz
- Hazardous Substances and New Organisms Act 1996: http://www.legislation.govt.nz
- Health Act 1956: http://www. Legislation.govt.nz
- Influenza Pandemic Planning Business Continuity Planning Guide 2005: http://www.med.govt.nz/upload/27552/planning-guide.pdf
- National Health Emergency Plan:Infections Diseases:http://www.moh.govt.nz
- New Zealand Fire Service Evacuation Scheme:http://evaconline.fire.org.nz
- Resource Management Act 1991: http://www.legislation.govt.nz
- Standards New Zealand Business Continuity Plan AS/NZS HB221:2004

Legislative Compliance

- NZ Public Health & Disability Act 2000
- Code of Health & Disability Services Consumers Rights 1996
- Health Information Privacy Code 1994
- RNZCGP
- Health & Safety Employment Act 1992 & 2002 Amendment
- Medicines Act 1984

Contacts List

Service Provider	*Phone*	*After Hours*	*Fax*

MEMORANDUM OF UNDERSTANDING

Memorandum of Understanding between:

(<<<name of organisation>>>)

and

(<<<name of organisation>>>)

have agreed to provide support under such circumstances and subject to the terms of this agreement.

This agreement sets out the responsibilities of both parties in an event posing a risk to business continuity.

Agreement

1. In an event posing a risk to business continuity, the Parties agree to support each other, where possible, with the provision of facilities and/or equipment.
2. The Parties will pay each other for this support at reasonable rates. Due to the urgency of the situation, it may be necessary to negotiate payment after support has been provided.
3. Support may be provided without charge.
4. Agreement to use each other's services/facilities will be between Managers of the facilities named or respective Incident Controllers during an event.
5. The Parties will treat each other's facilities and equipment with the care and respect and to a standard reasonably expected in the circumstances.
6. The Parties will comply with all relevant law and professional standards when using the other's facilities and equipment.
7. In the event of a declared Civil Defence emergency, ***Name of Organisation*** will become part of the Operations Section of the DHB's Coordinated Incident Management structure to ensure an effective health response across the district.
8. Hawke's Bay District Health Board will manage information provision across the district during the event.
9. Hawke's Bay District Health Board will provide assistance to ***Name of Organisation*** in their emergency planning and preparedness.

Signed _____ Signed _____

Manager Manager

Date _____ Date _____

<table>
<tr><td>  </td><td><h1>SITUATION REPORT</h1></td></tr>
<tr><td><u>Incident:</u></td><td rowspan="8">Assessment (note any critical issues and assumptions made. Attach map or drawing of incident):</td></tr>
<tr><td><u>Report No.:</u></td></tr>
<tr><td><u>Date</u>: / / (DD/MM/YY <u>Time:</u> : (24hr):</td></tr>
<tr><td>Prepared by: (Name/Title):</td></tr>
<tr><td>Site Controller:</td></tr>
<tr><td>Contact Details (EOC or alternative):</td></tr>
<tr><td>Next Report Expected at: (date/time):</td></tr>
<tr><td colspan="2">Action Taken:</td></tr>
<tr><td>Resources: (in place):</td><td>Resources: (that may be required):</td></tr>
<tr><td colspan="2">Factors: (weather and other factors or limitations should be noted):</td></tr>
<tr><td colspan="2">Predicted incident development: (note how this situation is anticipated to evolve, including patient numbers):</td></tr>
<tr><td colspan="2">Planned Actions: (How do you plan to respond to the predicted incident development)</td></tr>
</table>

EMERGENCY COMMUNICATION LOG

Log No.	Date	Time	Caller	Request	Destination

Plan developed by:

Sandra Bee
Leigh White
Rachel Hammond
Nikki Prendeville
Lisa Whakataka
Lesley Rosvall

In consultation with:

Sarah Mulcahy, HBPHO
Laureen Sutherland, Residential Care Executive

2010