Are Health Care Facilities Ready Enough to Appropriately Respond to Emergencies Due to Unpredictable Events?

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Crisis is a socio-psychological stress which breaks through the conventional notions of life and social reactions resulting in death, financial harms, threats, dangers and new needs. It can be managed based on careful observation and analysis of previous crises to reduce the negative consequences of the situation. The emergency management system includes three stages of: 1- pre-occurrence measures as a prevention plan; 2- measures during occurrence as a countermeasure plan; and 3- post-occurrence measures as a recovery plan. Proper implementation of this system reduces deaths and financial/biological consequences while evolving a quick recovery of emergencies.

After the crises, the main needs are transfer services as well as diagnosis and treatment, especially in hospitals. All hospital staff in general and hospital crisis staff in particular are highly responsible, especially in the early hours after the unwanted accidents. To play an effective and efficient role after the crisis, it is necessary to ensure the preparedness of the hospitals in terms of facilities, equipment, and staff.

Due to the lack of sufficient resources in the provision of medical facilities, hospital managers generally pay the most attention to performing daily tasks. Hospital staffs change over time making periodic maneuvers a necessity to become sure about their readiness to respond to accidents appropriately. Doing such maneuvers on preparedness for emergencies including fires, lifeguards, plane crashes, and boat sweating is a quite common strategy.

As demand for medical services has always exceeded the capacity of hospitals and financial resources have become a constant limitation, implementation of the preparedness programs is often neglected. This editorial was written to especially draw the attention of the medical center managers and physicians involved in emergencies to the article entitled: “Plan Development and Experimental Implementation of It on Confronting with an Imaginary Chemical Attack in Loghman-Hakim Hospital in Tehran, Iran: Civil defense”.

It is expected to increase the sensitivity to the issue of preparedness for critical situations after unintended major accidents. Hospitals will not only improve staff readiness by conducting periodic maneuvers, but also will need to provide the necessary facilities and equipment.
آیا بیمارستان‌ها به اندازه کافی آمادگی پاسخ به بحران‌های ناشی از حوادث ناخواسته غیر مترقبه را دارند?

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ارزانی که نفاذی درمان پزشکی همواره بیش از ظرفیت بیمارستان‌ها می‌باشد و معاون مالی یک محدودیت دایمی شده است. اگری برند یا آمادگی مورد غفلت قرار می‌گیرد، این نشانه با هدف توجیه خواننده‌ها مجله به خصوص مدیران مرکز درمانی به پزشکان درگیر در موارد اورژانس به مقاله با عنوان "دنوی برند و اجرای آزمایشی نحوه مقابله با یک حادثه" یا "حمایتی فرضی در بیمارستان‌ها" بحران حکم شده. این شده است. انتظار می‌رود مطالعه آن مقاله یک بادبین سزای بیمارستان‌ها با اطمینان از آمادگی کارکنان را ارائه دهد. بنابراین، این موضوع باید به شرایط بحرانی بعد از وقوع حوادث ناخواسته بزرگ‌شه و بیمارستان‌ها با انجام مانور‌های دوره ای نه تنها آمادگی کارکنان را ارائه دهنده بشد.