



## The Study on the rate of Qazvin Hospital Preparedness in Response to Probable Earthquake in Tehran (2007-2008)

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### Background

Given that the nation's center for unpredicted disasters has determined the QAZVIN province as a definite one for Tehran in case of earthquakes to provide the required services for the damaged areas, is to answer this question if the hospital system of this determined province has provided a planned and educationally practiced program to achieve it or not?

### Methods

This is a descriptive cross-sectional study that examines the preparedness programs of the QAZVIN hospitals. The questions of the questionnaire have been prepared according to the HEICS(HICS) programs in eight indices related to planning- coordination(score=0-45), communication-media(score=0-21), decontamination system (score= 0-6), equipment- resource(score= 0-24), triage-reception(score= 0-36), security system(score= 0-15), mental health support(score= 0-9), education-training(score= 0-12) and trigger point of Qazvin hospital surge capacity(500 or more). The active places in the immediate phase has been considered among the four existing time.



### Results

Six hospitals were included in the survey. In 33/33% of cases, hospital preparedness was poor (score =0-56), 50% intermediate (score=57-112), 16/6% good (score=113-168)

### Conclusion

There is no unified and comprehensive program, practically and educationally done to encounter the disasters, in the studied hospitals in the region. The existing programs are based on the each hospital management's opinion and the presented check list by the Nations center for the unpredicted disasters. There isn't enough coordination among the existing programs. For example some private hospitals in the province do not have any programs or any committees to encounter the crisis; just the hospital of the Social Security Organization has plan based on a standard and practical one (HICS) with a relatively acceptable framework (119point out of 168)

Given to the surge capacity estimate in the QAZVIN province and the achieved figure (TP=412/23), if the number of the wounded precedes the limit (500 or more), one has to use alternative care sites to serve the wounded people.

Key words:

Disaster, hospital preparedness, HEICS