## Hospital Safety Index





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A method for qualitative assessment of safety risks in health infrastructure exposed to natural and human-made hazards

Risk Safety Assessment for Health Infrastructure in the Republic of Maldives, Jaime F. Argudo, Ph.D., P.E. - WHO Consultant

## OBSERVATIONS DURING FIELD TRIP TO LAAMU AND THAA ATTOLS



New Regional Hospital at Laamu Atoll - Ground Floor at Road Level

## OBSERVATIONS DURING FIELD TRIP TO LAAMU AND THAA ATTOLS





New Regional Hospital at Laamu Atoll - Fire and Emergency Lighting Systems

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## Form 1 General Information About the Health Facility



The aim is to collect basic information such as:

- Population served
- Services available
- Area of influence
- Personnel available
- Physical distribution of services and buildings
- Key architectural plans, sketches, drawings, etc.

## Form 2 Safe Hospitals Checklist

MNBC-2 Elements relating to the geographic location	010 Hazard Maps and Specs)	3
Elements related to the structural safety of the facility	(Maintonanco Engineer)	6
Elements related to non-structural safety	(Maintenance Engineer)	8
Functional capacity of the hospital	(Hospital Administrator)	)6

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# An example of Questionnaire Part 2 for Indira Gandhi Memorial Hospital (IGMH)

### Observations on Structural Safety at IGMH





IGMH - Strong columns at basement

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 $1. \, Elements \, relating \, to \, the \, GEOGRAPHIC LOCATION \, of the \, health \, facility \, \, (mark \, with \, an \, X \, where \, applicable).$ 

1.1 Hazards	Ha	Hazard Level			
Refer to hazard maps. Request the Hospital Disaster Committee to provide the map's showing safety hazards at the site of the building.	No		zard le		OBSERVATIONS
the map(s) snowing safety nazaros at the site of the building.	hazard	UW	A MODE CO	HIGH	
1.1.1 Geological phenomena					
Earthquakes Rate the hazard level of the hospital in terms of geotechnical soil analyses.		×			
Volcanic eruptions Rafer to hazard maps of the region to rate the hospital's exposure to hazard in terms of its powintly to volcanoes, volcanic activity, routes of lava flow, pyrodustic flow, and ash fall.	×				
Lands lides Rafer to hazard maps to rate the level of hazard for the hospital in terms of lands lides caused by unstable soils (among other causes).	×				Currently not considered as a threat.
Trunemis  Refer to hazard maps to rate the level of hazard for the hospital in terms of previous trunemi events caused by submarine salamic or volcanic activity.	□	×			IN 2004, THE TSUMAM'S DIRECT IMPACT WAS TO EASTERN SIDE OF MALDIVES. THIS IS THE FIRST EVENT OF SUCH NATURE RECORDED IN HISTORY OF MALDIVES.
Others (specify)  Refer to hazard maps to identify other geological phenomena not listed above.  Specify the hezard and rate the corresponding hazard level for the hospital.	×				
1.1.2 Hydro-meteorological phenomena					
Hurricanes Rafer to hazand maps to rate the hazand level of the hospital in terms of hurricanes. It is helpful to take into account the history of such events when rating the hazand level of the facility.		×			
Tomantial rains Rate the hazard level for the hospital in relation to flooding due to intensive rainfall, based on the history of such events.				X	
Storm surge or rher flooding. Rate the hospital's level of exposure to storm surge or river flooding hazards based on previous events that did or did not cause flooding in or around the hospital.			×		
Lands lides Refer to geological maps to rate the hospital's level of exposure to landslide hexards caused by saturated soll.	×				
Others (specify) . SEA SWELLING AND SEA LEVEL RISE. Safer to hazard maps to identify other hydro-meteonological hazards not listed above. Specify the hazard and rate the corresponding hazard level for the hospital.			×		KIMH GROUND FLOOR IS LOCATED AT 2 M ABOVE SEA LEVEL BUT THE BASEMENT IS AT OR BELOW BEALINGT. THE NATURAL GLOBAL PHINDMENON OF SEA LEVEL RISE IS CONSIDERED TO AGGRAVANT THE EFFECTS OF SEA SMELLING DURING STORM SURGES CAUSED BY TROPICAL CYCLONES OR LOW PRESSURE SYSTEMS.



#### MNBC-2010 COMPLIANCE DOCUMENTS Earthquake Design Parameters and Hazard Chart

**B** Stability

**B1 Structure** 

Table I.4.2 Zone Factors (Z) for Building Design in Earthquake Hazard Zones

Zone Factors ( $Z = PGA/g$ ); $g = 9.81 \text{ m/s}^2$ (gravity acceleration)										
ZONE	T = 475 years, for life safety design using IS 1893 (Part I)**	T = 50 years, for Property Loss Protection*								
1	0.10	0.02								
2	0.16	0.03								

\*Best estimate - not computed

<sup>\*\*</sup> Revised from values computed in UNDP – RMSI (2006) study for T = 475 years

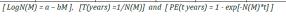
EARTHQUAKE HAZARD RISK					
HAZARD ZONE RISK LEVEL					
1	Low				
2	Moderate				

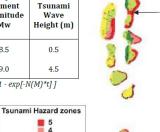
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#### UNDP – RMSI 2006 ASSESSMENT MNBC –2010 REVIEW

Table A.9 Return Periods for Maximum Tsunami Wave Height (TWH) greater than 0.5 meters in Maldives Islands by UNDP-RMSI (2006)

Earthquake Recurrence	Probability of Exceedance in 50 years PE(50)	Annual Probability of Occurrence N(M)	Return Period T (years)	Earthquake Moment Magnitude Mw	Maximum Tsunami Wave Height (m)
Rare	10%	0.00211	475	8.5	0.5
Very Rare	2%	0.000404	2475	9.0	4.5









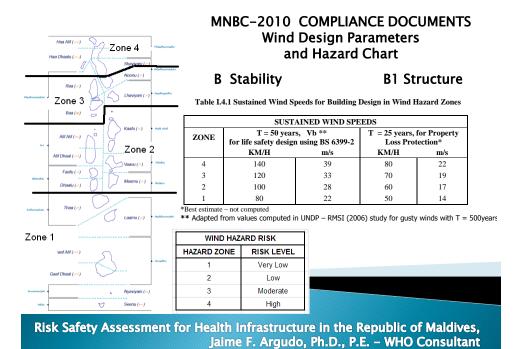
Male

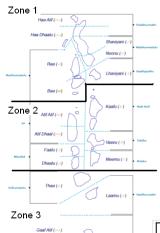
Figure A.10 The Tsunami Hazard Zones in Maldives by UNDP-RMSI (2006)

#### Site Assessment for Tsunami Hazard

The following conditions shall be considered:

- Tide elevation during previous tsunamis
- Proximity to shore
- Ground floor elevation
- Sacrificial Fences





V

#### MNBC-2010 COMPLIANCE DOCUMENTS **Rain Design Parameters** and Hazard Chart

#### **B** Stability

**B1 Structure** 

Table I.4.3 Rain Precipitation Values for Building Design in Rain Hazard Zones

Rain	Maximum Rain Precipitation (mm)										
Hazard Zone	T = 10 years, for Section E1.3.1 in MBC*	T = 50 years, for Section E1.3.2 in MBC Property Loss Protection**	T = 500 years, for Chapter B in MBC Life Safety**								
1	130	140	180								
2	180	190	240								
3	210	220	280								

\*Best estimate – not computed by the UNDP – RMSI (2006) study \*\* Computed by the UNDP – RMSI (2006) study

RAIN HAZARD RISK					
HAZARD ZONE RISK LEVEL					
1	Moderate				
2	High				
3	Very High				

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1.1.3 Social phenomena				
Population gatherings Rate the hospital's exposure to hazard in relation to the type of population it serves, its proximity to population gatherings and prior events that have affected the hospital.	$\times$			
Displaced populations Rate the hospital's exposure to hazard in terms of people who have been displaced as a result of war, socio-political circumstances, or due to immigra- tion and emigration.	$\boxtimes$			
Others (specify) SEA LEVEL RISE MIGRATION  If other social phenomena affect the safety of the hospital, specify them and rate the level of hazard for the hospital accordingly.			X	AN EXPECTED TREND DUE TO 80% LAND IN MALDIVES BELOW 1 M. CONSIDERING MALE ELEVATION BETWEEN 1.5 M AND 2 M IS WELL ABOVE AVERAGE
1.1.4 Environmental phenomena				
Epidemics With reference to any past incidents at the hospital and specific pathogens, rate the hospital's exposure to hazards related to epidemics.			X	EXPOSURE TO EPIDEMICS IS EQUAL OR HIGHER THAN TO NATURAL HAZARDS DUE TO LACK OF SAFE WASTE MANAGEMENT SYSTEMS
Contamination (systems) With reference to any past incidents involving contamination, rate the hospital's exposure to hazards from contamination of its systems.			×	WATER SANITATION AND WASTE DISPOSAL DOES NOT MEET MINIMUM SAFETY STANDARDS
Infestations With reference to the location and past incidents at the hospital, rate the hospital's exposure to hazards from infestations (files, fleas, rodents, etc.).		×		WATER SANITATION AND WASTE DISPOSAL DOES NOT MEET MINIMUM SAFETY STANDARDS AND ALSO FACILITY IS TOO CLOSE TO MALE UNTREATED LIQUID DISCHARGE TO OCEAN AND SOLID WASTE TRANSIT AND CABOTAGE AT VILLINGILI FERRI PORT
Others (specify) With reference to any past incidents at the hospital, specify any other environmental phenomena not included above that might compromise the level of safety of the hospital.				
1.1.5 Chemical and/or technological phenomena				
Explosions With reference to the hospital's surroundings, rate the hospital's exposure to explosion hazards.		×		island has the storage of Patrol and Diesel located from 300 to 400 metres Gouth, If an explosion occurs, it might bring an indirect impact to IGMH.  A Gas Station is located 10 meters. South
Fires With reference to the exterior of the hospital building, rate the hospital's exposure to external fires.			×	Gas station 10 metres away might out the hospital in jeopardy in case of a fire incident.
Hazardous material spills With reference to the hospital's surroundings, rate the hospital's exposure to hazardous material spills.	$\boxtimes$			
Others (specify) INTERNAL FIRE Specify and rate other chemical or technological hazards in the area where the hospital is located.			×	A 4,000 liter diesel tank is stored between Ground Floor and Basement and the hospital's Fire Water System is not operational. Basement also hosts a significant amount of flammable and combustible materials and poor electrical wiring mixed with water piping.

1.2 Geotechnical properties of soils								
Liquefaction With reference to the geotechnical soil analysis at the hospital site, rate the level of the facility's exposure to hazards from saturated and loose subsoil.	×							
Clay soils With reference to soil maps, rate the hospital's exposure to hazards from clay soil.	×							
Unstable slopes Refer to geological maps and specify the hospital's exposure to hazards from the presence of slopes.	×							
and products as suppose								
Comments on the results of Form 2, Module 1. The evaluator should use the space	ce below to co	ommer	t on th	ne resu	its of this module (1), and provide his/her name and signature.			
Hospital Liquid Waste System - No treatment is discharge to Sea close to hospital premises (< 3				ste.	s.discharged.to.Island.Sewage.System, which			

Hospital uses Potable Water from Male Desalination Water Plant – Desalinated water is collected through a bore hole 40

Water from a well is used for toilets and non-potable usage.

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2. Elements related to the structural safety of the building Columns, beams, walls, floor slabs, etc., are structural elements that form part of the load-bearing system of the building. These elements should be evaluated by structural engineers

2.1 Prior events affecting hospital safety		Safety level		OBSERVATIONS
2.1 Prior events affecting nospital safety	LOW	AVERAGE	HMH	OBSERVATIONS
Has there been prior structural damage to the hospital as a result of natural phenomena?     Determine whether structural reports indicate that the level of safety has been compromised. If SUCH AN EVENT HAS NOT OCCURRED INTHE WCINITY OF THE HOSPITAL, LEAVE BOXES BLANK.     Low - Might damage Average = Moderate damage, High = Milror damage.			×	LEAVE THIS BOX BLANK (REMOVE MARK FROM BOX)
Was the hospital built and/or repaired using current safety standards?  Verify whether the building has been repaired, the date of repairs, and whether repairs were carried out using standards for safe building.  Low = Current safety standards and applied, Neuroge = Current safety standards partially applied;  High = Current safety standards Ally applied.	×			Currently working on a programme to determine the risk of a fire event within the hospital, and taking measures to reduce this.
3. Has remodelling or modification affected structural behavior of the facility? Verify whether modifications were carried our using standards for safe buildings. Law - Migis remodelling or modifications have been carried out; Average - Moderate remodelling and/or modifications; High = Minor remodelling and/or modifications or no modifications were carried out;			×	MODIFICATIONS HAVE NOT SIGNIFICANTLY AFFECTED STRUCTURAL SAFETY
2.2 Safety of the structural system and type of materials used in the building	—	fety le		OBSERVATIONS
Condition of the building     Low = Deterioration caused by weathering; cracks on the first floor and irregular height of buildings, Average = Deterioration caused only by weathering; High = Good; no deterioration or cracks observed.		×		
Construction materials used     Low = Rust with floking; cracks larger than 3mm; Average = Cracks between 1 and 3 mm or rust pawder present; High = Cracks less than 1 mm; no rust.		×		
Interaction of non-structural elements with the structure     Low = Separation of less than 0.5% of the height of the partition/joint, Average = Separation     bet ween 0.5 and 1.5% of the height of the partition/joint, Fligh = Separation above 1.5% of the     partition/joint.			$\boxtimes$	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
<ol> <li>Proximity of buildings (hazards of pounding, wind tunnel effects, fires, etc.)         Low = Separation is less than 0.5% of the height of the shorter of two adjacent buildings; Average         Separation is between 0.5% and 1.5% of the height of the shorter of two adjacent buildings;         High = Separation is more than 1.5% of the height of the shorter of two adjacent buildings.</li> </ol>			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
Structural redundancy     Low = Fewer than three lines of resistance in each direction; Average = Three lines of resistance in each direction or his without orthogonal orientation; High = More than three lines of resistance in each orthogonal direction of the building.				LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE

Structural detailing, including connections     Low = Built before 1970; Average = Built between 1970 and 1990; High = Built after 1990 and according to standards.		X	
10. Safety of foundations  Low = Information is locking or foundation depth is less than 1.5 m; Average = Plans and soil stud- less are locking but foundation depth is more than 1.5 m; High = Plans, soil studies are available and foundation depth is more than 1.5 m.		×	SOIL CONDITIONS ARE KNOWN FOR MALE ISLAND
11. Irregularities in the plan (rigidity, mass, and resistance) Low = Shopes are irregular and structure is not uniform; Average = Shopes are irregular but struc- ture is uniform; High = Shopes are regular, structure has uniform plan, and there are no elements  that would cause to sion.		$\boxtimes$	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
12. Irregularities in height (rigidity, mass, and resistance) Low = Height of stores differs by more than 20% and there are significant discontinuous or irregular elements, Newger = Stores; have similar heights they differ by less than 20% but more than 5% and there are few docontinuous or irregular elements; High = Storeys of similar height (they differ by less than 5%), there are no ideocrationuous crimingular elements.		×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
13. Structural resilience to various phenomena (meteorological, geological, among others)  Estimate structural behavior in response to different hazards or dangers, other than earth-quakes.  Low = Low structural resilience to natural hazards present at the site of the hospital; Average = Sattofactory structural resilience, High = Excellent structural resilience.		×	A CONCERN COULD BE RAISED ON THE DURABILITY OF REINFORCEMENT DUE TO CORROSION ACTIVITY. NOT YET SIGNIFICANT CORROSION ACTIVITY IS OBSERVED AFTER 15 YEARS OF SERVICE

Comments on the results of Form 2, Module 2:

MANY QUESTIONS MAY BE ANSWERED AS FOLLOWS: "LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE!"

THE STRUCTURE IS EXPOSED TO THE EFFECTS OF SERVICE GRAVITY LOADS, FLOODS AND FIRES, THUS SOME OF THE QUESTIONS COULD BE ANSWERED ACCORDINGLY (LOW, MODERATE OR HIGH) DEPENDING ON

HOW THE VULNERABILITY FACTOR UNDER CONSIDERATION COULD AFFECTED STRUCTURE STABILITY AND DURABILITY TO SERVICE GRAVITY LOADS AND THE PREVAILING NATURAL AND MAN-MADE HAZARDS.

EXCEPTIONS: HOSPITALS IN THE UPMOST NORTH ATOLLS ARE EXPOSED TO HIGH WIND HAZARD AND IN THE UPMOST SOUTH ARE EXPOSED TO MODERATE SEISMIC EVENTS, SEE HAZARD MAPS FROM THE MALDIVIAN BUILDING CODE REVIEW PROJECT 2010 (UNDP-MHTE PROJECT).

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#### Observations on Non-Structural Safety at IGMH





IGMH - Narrow Corridors, Fire System need rehab and Inadequate Means of Egress (No signs and open doors)

3. Elements related to not	n-structural sa	fet
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Substructural elements do not form part of the load-bearing system of the building. They include architectural components, equipment, and systems that are necessary for the operation of the building.

arem I .	Sa	fety le	vel	
3.1 Critical systems	LOW	AVERAGE	HIGH	OBSERVATIONS
3.1.1 Electrical system				
14. Generator has capacity to meet 100% of demand Verify that the generator begins to operate within seconds of the hospital losing power, covering power demands for the entire hospital, particularly in the emergency department, intensive care unit, sterilization unit, operating theatres, etc. Low = Generator can only be started manually or cover 3-03% of demand; Average = Generator starts automatically in more than 10 seconds or covers 3146—10% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 718—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High = Generator starts automatically in less than 10 seconds and covers 318—100% of demand; High	×			Generator capacity is of 1MegaKV, which can provide 5% of the requirement of the hospital.
15. Regular tests of generator performance are carried out in critical areas Determine the frequency of generator performance tests that have satisfactory results. Low = Tested every 3 months or more, Average = Tested every 1 to 3 months; High = Tested at least monthly.	$\boxtimes$			Tested every week.
Generator protected from damage due to natural phenomena     Low = No; Average = Partially; High = Yes.	×			3 GENERATORS - 2 GENERATORS NOT OPERATIONAL (leaking from the diesel connections)
17. Safety of electrical equipment, cables, and cable ducts Low = No; Average = Partially; High = Yes.	×			electrical wiring and water piping at basement are running together and the fire water system is broken
18. Redundant system for local electric power supply Low = No; Average = Partially; High = Yes.		X		
Protection for control panel, overload breaker switch, and cables     Check the accessibility as well as condition and operation of the central electrical control panel     Low = No; Average = Partially; High = Yes.		×		
Lighting system for critical areas of the hospital Review lighting for emergency unit, intensive care unit, operating theatres, etc., testing the level of lighting in rooms and function of lighting fixtures.  Low = No; Average = Partially; High = Ves.		$\times$		Checked only when a problem is encountered.
21. Estemal electrical systems installed on hospital grounds. Verify the existence and capacity of external substations that provide power to the hospital. Low = No electrical substations statilled on hospital grounds, Average = Substations installed but do not provide enough power to hospital, High = Electrical substations installed and provide enough power to the hospital.		×		Provided by Electrical Company of Male' (STELCO) Not a reliable supply

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3.1.2 Telecommunications system			
22. Condition of antennas and antenna bracing Verify the condition of antennas and their bracing/supports. Low = Poor or does not exist; Average = Satisfactory; High = Good.		$\times$	
23. Condition of low-voltage systems (Internet and telephone connections/cables)  Verify that cables are properly connected in strategic areas to avoid system overload.  Low = Poor or does not exist, Average = Satisfactory, High = Good.		×	
24. Condition of alternative communications systems Verify the condition of other communications systems: radio communications, satellite telephone, Internet, etc. Low = Poor or does not exist; Average = Satisfactory; High = Good.		X	
<ol> <li>Condition of anchors and braces for telecommunications equipment and cables Verify that telecommunications equipment (radios, satellite telephone, wideo conferencing system, etc.) is anchorsed for increased security.</li> <li>IF THE SYSTEMDOES TO INEED ANCHORS OR BRACING, LEAVE BOXES BLANK.</li> <li>Low = Poor, Avenge = Statisticstry; High = Good.</li> </ol>		X	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
26. Condition of external telecommunications systems installed on hospital grounds Verify that external telecommunications systems do not interfere with communications of the hospital. Low – bitemal telecommunication systems cause major interference with hospital communications, whereaps – bitemal telecommunications systems cause moderate interference with hospital communications; High – bitemal communications cause no interference with hospital communications.		×	
Site has adequate conditions for telecommunications systems     Low = Poor or does not exist; Average = Satisfactory; High = Good.		×	BUT IN CASE OF A SYSTEM FAILURE: NO OTHER METHOD OF COMMUNICATION.
28. Safety of internal communications systems Verify the condition of loudspeakers, public address system, speaker systems, etc. Low = Poor or does not exist; Average = Satisfactory; High = Good.		×	
3.1.3 Water supply system			
29. Water tank has permanent reserve that is sufficient to provide at least 300 liters daily per bed, for 72 hours Verify that water storage is sufficient to satisfy user demand for three days. Low = Sufficient for 24 hours or less, Average = Sufficient for more than 24 hours but less than 72 hours; Righ = Garanteed to cove or less 17 hours.	×		WATER TANK  "I GALT WATER I FRESH WATER (USED FOR TOILET FLUSHING)  "I TANKO - 550 M = 65,000LTRE0) - RAIN WATER (ONLY FOR WASHING PUPOSES)  "A TANKO - 550 M = 65,000LTRE0.  Currently no water reserve.
30. Water storage tanks are protected and in secure locations  Wast the water tanks to determine the safety of the Installations and of the site.  Low = The site is susceptible to structural or non-structural faulter, leverage = Failure would not cause collaree frank-likel = Low-possibility of furnional faulter.	×		LEAKING IN 1 TANK. MAITAINANCE FOR THE OTHER THREE TANKS TO WORK.

31. Alternative water supply to major distribution network identify the agency or mechanism to supply or nection water service to the hospital should the public water system fail.  Low = Provides lies than 30% of demand, Average = Provides 30% to 80% of demand; High = Provides note than 80% of daily demand.	×			Water supply is through the State Water Supply Company. No other alternative at present.
32. Condition of water distribution system. Wrifty condition and proper performance of water distribution system, including storage traits, valves, pipes, and connections. Low – Less than 60% are in good operational condition, Average – Between 60% and 80% are in good condition; high – Above 80% are in good condition; high –		×		90% of pipes renovated recently.
33. Supplementary pumping system (dentify the existence and operation of the supplementary pumping system in case water supply is interrupt on the pumping and expectational capacity does not meet daily demand, Average = (A pumps are in statisticary condition, Hight = All pumps and book-up systems are operational.)	×			2 pumps, not in good condition.
3.1.4 Fuel storage (gas, gasoline, diesel)				
34. Fuel tanks have at least 5-day capacity Verify that the hospital has full storage tanks of adequate size and safety. Low = Fuel storage is not secured and with sits than 3-day fuel capacity, Average =Fuel storage has some security and has 3-5 days fuel capacity, High = Fuel storage is secure and has capacity for 5 ormore days.	×			1 FUEL TANK 4000 LITRES - DIESEL - Gives for 7 days approximately. NOT LOCATED IS A SAFE PLACE
35. Fuel tanks and/or cylinders are anchored and in a secure location  Low = There are no anchors and the tank enclosure is unsafe; Average = Anchors are inadequate;  High = Anchors are in good condition and the tank enclosure is adequate.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
36. Safe location of fuel storage Verify that the tanks containing combustible liquids are accessible but at a safe distance from the hospital. Clow = There is not failure and that tanks are not accessible, Average = Che of the two conditions have been met, High = The fuel storage tanks are occessible and they are located in a secure site.	×			4-6 FEET FROM NICU. NOT EASY to access by fire fighting means
37. Safety of the fuel distribution system (valves, hoses, and connections)  Low = Less than 60% of 9xtem is in good operational condition; Average = between 60% and 80% of 9xtem is in good operational condition; High = More than 80% of 9xtem is in good operational condition.	×			Leaking from tanks, malfunctioning valves.
3.1.5 Medical gases (oxygen, nitrogen, etc.)				
38. Sufficient medical gas storage for minimum of 15-day supply  Low = Less than 10-day supply; Average = Supply for between 10 and 15 days; High = Supply for at least 15 days.	×			"DAILY Requirement - 15-18 CYLINDERS. Delivery is every other day 25 cylinders. "Currently with no back-up.
39. Anchors for medical gas tanks, cylinders, and related equipment  Low = Anchors are lacking; Average = Quality of anchors is inadequate; High = Anchors are of good quality.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
40. Availability of alternative sources of medical gases  Low = Alternative sources are looking or are below standard, Average = Alternative sources exist and are in satisfactory condition; High = Alternative sources exist and are in good condition.	×			Currently working on a plan to verify this problem.
41. Appropriate location for storage of medical gases	X	]		NOT EASY to access by fire fighting means

42. Safety of medical gas distribution system (valves, pipes, connections) low = Less than 60% of system is in good working condition, Average = Between 60% and 80% of system is in good working condition; High = More than 80% of system is in good working condition.			$\times$	
43. Protection of medical gas tanks and/or cylinders and related equipment tow = No areas are used exclusively for this equipment and there are no qualified personnel to operate it. Average = Areas are used acclusively for this equipment but personnel are not trained to operate it. High = There are areas used exclusively for this equipment and it is operated by qualified personnel.		X		
44. Adequate safety in storage areas low = No areas are reserved for storage of medical gases, Average = Areas are reserved for storage of medical gases to safety measures are incadequate; High = There are areas reserved for storage of medical gases and the site does not present risks.		×		
3.2 Heating, ventilation, and air-conditioning (HVAC) systems in critical areas	-	Safety level		OBSERVATIONS
45. Adequate supports for ducts and review of flexibility of ducts and piping that cross expansion joints. Low = Supports are locking and connections are rigid. Average = Supports are present or connections are flexible.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
46. Condition of pipes, connections, and valves Low = Poor, Average = Satisfactory; High = Good.	X			Hospital central AC system is not working.
47. Condition of anchors for heating and/or hot water equipment Low = Poor; Average = Satisfactory; High = Good.				LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
48. Condition of anchors for air-conditioning equipment  Low = Poor, Average = Satisfactory; High = Good.			X	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
49. Location of enclosures for HVAC equipment Low = Poor, Average = Satisfactory; High = Good.		X		BASEMENT ACs - OUTLINE IS TOWARDS INSIDE THE HOSPITAL.
50. Safety of enclosures for HVAC equipment Low = Poor, Average = Satisfactory; High = Good.		X		
<ol> <li>Operating condition of HVAC equipment (boiler, air-conditioning systems, exhaust, etc.)</li> <li>Low = Poor, Average = Satisfactory; High = Good.</li> </ol>	X			4 EXHAUST - NOT WORKING.
3.3 Office and storeroom furnishings and equipment (fixed and movable) including computers, printers, etc.	-	fety le AVBAGE	=	OBSERVATIONS
52. Anchors for shelving and safety of shelf contents Verify that shelves are anchored to the walls and/or are braced and that contents are secured. (low = Shelving's not attached to walls, Average = Shelving is attached but contents are not secured-frije? = Shelving is attached and contents are secured.			$\times$	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
53. Safety of computers and printers Verify that computer tables are anchored and table wheels are locked. Low = Poor, Average = Satisfactory; High = Good or does not require anchor.			X	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE

54. Condition of office furnishings and other equipment Check anchors and/or brading on furnishings in offices. Low = Poor; Average = Satisfactory; High = Good or does not require anchor.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
3.4 Medical and laboratory equipment and supplies used for diagnosis and treatment	_	afety level		OBSERVATIONS
55. Medical equipment in operating theaters and recovery rooms	LOW	AVERAGE	HIGH	annuarin contest of stability to impost by month
Verify that lamps, equipment for anaesthesia, and surgical tables are operational and that table or cart wheels are looked. Lever The equipment is in poor condition on it is not secured. Average = The equipment is in fair condition or not properly secured, High = Equipment is in good condition and is secured.		×		answer in context of stability to impact by people
56. Condition and safety of radiology and imaging equipment Verify that the X-ray and imaging equipment is in good condition and is secured. Low = The equipment is in poor condition or it is not secured, Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
57. Condition and safety of laboratory equipment Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; high = Equipment is in good condition and is secured.		X		answer in context of stability to impact by people
S8. Condition and safety of medical equipment in emergency services unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.		X		answer in context of stability to impact by people
59. Condition and safety of medical equipment in intensive or intermediate care unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.		X		answer in context of stability to impact by people
60. Condition and safety of equipment and furnishings in the pharmacy Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.		X		answer in context of fire
61. Condition and safety of equipment in the sterilization unit Low = The equipment is in poor condition or it is not secured, Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.		X		answer in context of fire
62. Condition and safety of medical equipment for neonatal care  Low = The equipment is locking, is in poor condition, or is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.		X		answer in context of stability to impact by people
63. Condition and safety of medical equipment and supplies for burn management Low = The equipment is lacking, is in poor condition, or it is not secured, Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			X	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
64. Condition and safety of medical equipment for nuclear medicine and radiation therapy  IF THE HOSPITAL DICES NOT HAVE THESE SERVICES, LEAVE BOXES BLANK.  Low = The equipment is isolating, is in poor condition, or it is not secured, Average = The equipment as in fact condition or not properly secured; High = Explaiment is in good condition and is secured.			×	answer in context of stability to impact by people
65. Condition and safety of medical equipment in other services Low = More than 30% or apulpment is at risk of material or functional failure and/or equipment puts the entire services operation a direct or indirect risk, levelage = Between 10% and 30% of equipment is at risk of loss, High = Less than 10% of equipment is at risk of loss.		$\times$		answer in context of fire answer in context of stability to impact by people

66. Anchors for shelving and safety of medical contents tow = Shelves are anchored or shelf contents are secured in less than 20% of cases; Average = Shelves are anchored or shelf contents are secured in 20% to 80% of cases; High = More than 80% of shelves are anchored and the contents of shelves are secured for shelving and contents do not require anchors!		X		answer in context of stability to impact by people
3.5 Architectural elements	Sa LOW	fety le	_	OBSERVATIONS
67. Condition and safety of doors and entrances Low =Subject to damage and damage to elementify would impede the performance of this and other components, systems, or operations. Alexage = Subject to damage but damage to elementify would not impede function, Fligh = No or minor potential for damage that would impede the performance of this and other components; systems, or operations.	×			60% - SOME AREAS OF DAMAGE - answer in context of fire
68. Condition and safety of windows and shutters low "Subject to damage and damage to element(i) would impade the performance of this and other components, systems, or operations, Average = Subject to damage but damage to element(i) would not impade the incition, Fligh = No or minor potential for damage that would impade the performance of this and other components, systems, or operations.	X			60% - SOME AREAS OF DAMAGE - answer in context of fire
69. Condition and safety of other elements of the building envelope (outside walls, facings, etc.) Iow Subject to dormage and damage to element(s) would impede the performance of this and other components, systems, or operations, Average = Subject to dormage but damage to element(s) would not impede the performance of this and other components, systems, or operations, the impede the performance of this and other components, systems, or operations.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
70. Condition and safety of roofing law ±50/ptc to damage and damage to element(s) would impede the performance of this and other components, systems, or operations. Alexage = Subject to damage but damage to element(s) would not impede the inction; High = No or minor potential for damage that would impede the performance of this and other components, systems, or operations.		×		answer in context of fire
71. Condition and safety of parapets (wall or railing placed to prevent falls on roofs, bridges, stairs, etc.) Iow Subject to domage and damage to element(s) would impede the performance of this and other components, systems, or operations, Neuroge = Subject to damage but damage to element(s) would not impede function; High = No or minor potential for damage that would impede the performance of this and other components; systems, or operations.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
72. Condition and safety of perimeter walls and fending low—Subject to dumage and damage to element(s) would impede the performance of this and other components, systems, or operations, Average = Subject to dumage but damage to element(s) would not impede function. [High = No or minor potential for damage that would impede the performance of this and other components, systems, or operations.			×	LEAVE THIS BOX BLANK NO CONCERN ON MODERATE TO HIGH EARTHQUAKE OR WIND LOADS, THEREFORE THIS VULNERABILITY FACTOR IS NOT AN ISSUE
73. Condition and safety of other outside elements (comines, ornaments, etc.) (Low - Elements) subject to damage and diamage would impede the performance of this and other components, systems, or operations, Nervage - Elements) subject to damage but damage would not impede function; high = No or minor potential for damage that would impede the performance of this and other components systems, or operations.				NON EXISTANT.

74. Safe conditions for movement outside of building  Low = Damage to structure or nod and walkings will impade access to buildings or endanger pedestrations. Neurope = Damage do structure or nod and walkings will not impede pedestration access. but will impade which access, High = No or minor potential for slight damage which will impade pedestration or vehicle access.	×			AMBULANCE HAS THE SAME ROUTE AS THE OTHER VEHICLES - ENTRANCE SAME TO STAFF AND OTHERS. Answer in context of fire				
75. Safe conditions for movement inside the building (corridors, stairs, elevators, exit doors, etc.)  Low = Subject to damage and damage to element(s) will impede movement inside building and endurger occupants; Average = Damage to elements will not impede movement of people but will impede movement of stretches, wheeled equipment; High = No or minor potentional for slight damage which will not impede movement of people or wheeled equipment.	×			*2 ELEVATORS - PATIENTS + STAFF USE *2 ELEVATORS - VISITORS ELEVATORS - ON AND OFF - PROBLEM *EMERGENCY EXIT - LOCKED AND KEYS KEPT WITH SECURITY.				
To. Condition and safety of internal walls and partitions  Low = Bernstitly subject to durange and damage would inspet the performance of this and other  components, system or operations, very expensed in subject to durange but damage would  noting peld function; High = No or minor potential for damage that would impede the perfor-  mance of this and their components, systems, or operations.		×		answer in context of fire				
77. Condition and safety of false or suspended ceilings IF THE HOSPITAL DOES NOT HAVE FALSE OR SUSPENDED CEILINGS, LEAVE BOXES BLANK. Low- Ellement(1) subject to damage and damage vould improped the performance of this and other components, systems, or operations; Average = Bement(b) subject to damage but damage would not impede function; high = No or mixor operation for damage that would impede the performance of this and other components, systems, or operations.	×			answer in context of fire				
78. Condition and safety of internal and external lighting systems (Low = Elementis) subject to damage and damage would impede the performance of this and other components; systems, or operations; Average = Bernardis subject to damage but damage would not impede function; high = No or minor potential for damage that would impede the performance of this and other components, systems, or operations.		×		answer in context of fire				
79. Condition and safety of fire protection system Low = Element(i) subject to damage and damage would impede the performance of this and other components, systems, or operations, Awage = Dement(i) subject to damage but damage would not impede function; high = No or minor potential for damage that would impede the performance of this and other components, systems, or operations.	×			fire system is not operational				
80. Condition and safety of elevator system IF THER ARE NO ELEVATORS, LEAKE BOXES BLANK. Low - Element(s) subject to damage and damage veuald impede the performance of this and other components, systems, or operations; Average = Bement(s) subject to damage but damage would not impede function; jibb) = No orminor potential for damage that would impede the performance of this and other components, systems, or operations.		×		answer in context of fire				
81. Condition and safety of stairways core = Elementist) subject to damage and damage would impede the performance of this and other components, systems, or operations, Newage = Elemental) subject to damage but damage would not impede function; High = No or minur potential for damage that would impede the performance of this and other components, systems, or operations.	×			STAIRWAYS ARE USUALLY LOCKED.				
82. Condition and safety of floor coverings. Low = Behment(s) subject to damage and damage would impede the performance of this and other components, systems, or operations, Average = Element(s) subject to damage but damage would not impede function, High = No or minor potential for damage that would impede the performance of the and other components, systems, or operations.			×	answer in context of fire				
Hospital access routes     ** Element(s) subject to damage and damage would impede the performance of this and her components, systems, or operations, sherage = Element(s) subject to damage but damage for the components of the state o	×			7 DOORS *3 CLOSED				
uld not impede function; High = No or minor potential for damage that would impede the formance of this and other components, systems, or operations.				answer in context of fire				
Other architectural elements, including emergency signs - Elementis) subject to damage and damage would impede the performance of this and ar components, systems, or operations, Average - Elementis) subject to damage but damage dat not repede famicin; High = Noo miner operatuit for damage that would impede the formance of this and other components, systems, or operations.	×			answer in context of fire				
ANY QUESTIONS MAY BE ANSWERED AS FOLLOW EAVE THIS BOX BLANK NO CONCERN ON MODER. HIS VULNERABILITY FACTOR IS NOT AN ISSUE!" HE STRUCTURE IS EXPOSED TO THE EFFECTS OF	ATE							
DW THE VULNERABILITY FACTOR UNDER CONSID	ER	ATIO	ON (					
OURABILITY TO SERVICE GRAVITY LOADS AND THE PREVAILING NATURAL AND MAN-MADE HAZARDS.  XCEPTIONS: HOSPITALS IN THE UPMOST NORTH ATOLLS ARE EXPOSED TO HIGH WIND HAZARD AND IN THE PROST SOUTH ARE EXPOSED TO MODERATE SEISMIC EVENTS. SEE HAZARD MAPS FROM THE MALDIVIAN OUR DID TO THE MALDIVIAN OUR DID								
Risk Safety Assessment for Health I	nfr	as	tru	icture in the Republic of Maldives.				
Jaime F. Argudo, Ph.D., P.E. – WHO Consultant								

#### **OBSERVATIONS DURING SITE VISIT TO INDIRA GANDHI MEMORIAL HOSPITAL AT MALE**





IGMH - Fire system inoperative and Storage Areas at Basement

Risk Safety Assessment for Health Infrastructure in the Republic of Maldives, Jaime F. Argudo, Ph.D., P.E. - WHO Consultant

4. Safety based on functional capacity of hospital
The level of preparechess of hospital staff for major emergencies and disasters as well as the level of implementation of the hospital disaster plan.

4.1 Organization of the Hospital Disaster Committee and the Emergency Operations Center. Assess the level of organization achieved by	org	Level o Janizat	ion	OBSERVATIONS
the Hospital Disaster Committee.	LOW	AVERAGE	HIGH	
85. Committee has been formally established to respond to major emergencies or disasters Obtain a copy of the Committee's terms of reference and verify that the list of members corresponds to current personnel. Low – Committee acts and functioning. Committee eachs and functioning.	×			
86. Committee membership is multi-disciplinary Verify that the positions on the Committee are coupled by personnel from diverse disciplines for example, hospital cirector, chief of nursing, maintenance engineer, head of emergency services, medical director, chief of surgery, chief of laboratory and support services, among others). Low = 0-3 disciplines represented. Average = 4-5 disciplines represented; High = 6 or more disciplines represented.	$\boxtimes$			
87. Each member is aware of his/her specific responsibilities Verify that members' assigned responsibilities are in writing, describing their specific roles. Low-a Responsibilities not assigned; Average = Responsibilities howe been officially assigned; High = All members know and comply with their responsibilities.	$\boxtimes$			
<ol> <li>Space is designated for the hospital Emergency Operations Centre (EOC) Verify that a room has been designated for operational command and that all means of communication are present (telephone, fax, Internet, etc.).</li> <li>Low = Ninenistent, Average = Space has been officially assigned; High = EOC exists and is functional.</li> </ol>		X		
89. The EOCs is n a protected and safe location Take into account account accessibility, safety, and protection when checking the room used for the EOC. Low = The room for the EOC is not n a safe incontion, Average = The EOC is n a safe location but it is not assily accessible; High = The EOC is n a safe protected and easily accessible location.		×		
90. The EOC has a computer system and computers  Verify that the EOC has Internet and Intranet connections.  Low = No; Average = Incomplete; High = The BOC has all computer system requirements		×		No Committee See Question 85
91. Both Internal and external communications systems in the BOT function properly Determine whether the switchboard fielephone central for ne-routing calls) has a paging or a public address system and the operators know the emergency codes and how to use them. Low – Deer not function or is non-existent, Average = Partly functional, "High = Complete and functional.		X		
92. The EOC has an alternative communications system Determine whether, besides the switchboard, there is an alternative communications system (e.g. cellular, two-wayradic, etc.). Low = Nonesistent; Average = Incomplete; Fligh = Yes.		×		
93. The EOC has adequate equipment and furnishings Verify that there are desks, chairs, power outlets, lighting, water supply, and drainage. Low = No; Average = Incomplete; High = Yes.		×		No Committee See Question 85

94. An up-to-date telephone directory is available in the EOC Confirm that the directory includes all support services needed in an emergency (randomly check telephone numbers). Low = Ne; Average = Directory exists but is not up-to-date; High = Available and current.	×			
95. "Action Cards" available for all personnel Verify that action cards describe the assigned duties of each hospital staff member in case of an internal or external disaster. Low = No, Aveoge = Insufficient (numbers and quality); High = All staff members have cards.	×			
4.2 Operational plan for internal or external disasters		Level o ement	ation	OBSERVATIONS
96. Strengthen essential hospital services The plan specifies actions to be taken before, during, and after a disaster in the hospital's essential services (emergency room, intensive care unit, sterilization unit, operating theatie, among others). Low = Plan does not exist or exists only as a document, Average = Plan exists and personnel hove been trained; High = Plan exists, personnel hove been trained, and resources are in place to carry out the plan.		×		PEOPLE TRAINED - PARTICIPATED IN WORKSHOP STAFF YEARLY WITH HIGH TURN OVER.
97. Procedures to activate and deactivate the plan  Verity that there are procedures for how, when, and by whom the plan is activated/ deactivated.  Low = Plan does not exist or exists only as a document, exerage = Plan exists and personnel have been trained, High = Plan exists, personnel have been trained, and resources are in place to carry out the procedures.		X		PLAN EXISTS RESOURCE : POOR
98. Special administrative procedures for disasters  Verify that the plan includes procedures for contracting personnel and for procurements in case of disaster.  Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained, Fligh = Plan exist, personnel have been trained, and resources are in place to carry out the procedures.		X		RESOURCES ARE NOT ENOUGH. AVAILIBILITY OF PERSONEL MIGHT TAKE SOME TIME DURING UNOFFICIAL HOURS.
99. Financial resources for emergencies are budgeted and guaranteed Verify that the hospital has a specific budget for use in classiter situations. Low = Not budgetd, Average = Funds will cover less than 72 hours; High = Funds are guaranteed for 72 hours or more.		×		FUND OF 90,000 RUFIYAA - FOR EMERGENCY SITUATIONS. (NOT SPECIFIC TO DESASTERS)
100. Procedures for expanding usable space, including the availability of extra beds The plan identifies physical spaces that can be equipped to treat mass causalties. Low = Space for expansion has not been identified, Avenage = Space has been identified and personnel have been trained of a carry out the apparature, High = Procedures exist, personnel have been trained and resources are in place to carry out expansion of space.		X		DURING TSUNAMI - THAJUDHEEN SCHOOL HALL WAS USED AS AN INPATIENTCARE AREA BUT AS FOR A PROTOCOL:THIS DOES NOT EXIST.
101. Procedures for admission to the emergency department The plan specifies the places and personnel responsible for carrying out triage. Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained High = Procedures exist, personnel have been trained, and resources are in place to implement them.		X		EMERGENCY STOCK OF MEDICATIONS- NON EXISTANT.

102. Procedures to expand emergency department and other critical services. The plan should indicate actions needed to expand hospital services for example, drinking water supply, power, wastewater, low = Procedures do not east or exist only in a document, Average = Procedures exist and personnel have been trained, Fligh = Procedures exist, personnel have been trained, and resources are in place to Implement them.	×			
103. Procedures to protect patients' medical records. The plan indicates how medical and other critical patient records can be safely moved. Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel how been trained; diagle =Procedures exist, personnel how been trained; and resources are in place to implement them.	X			INPATIENT AND OUT PATIENT RECORDS CANNOT BE EASILY TRACED.
104. Regular safety inspections are conducted by the appropriate authority. Note the expiration and/or refill dates of fine extinguishers and of flow tests for fire hydrants. Examine logboots that record equipment tests and dates of inspections by divid defence personnel. Low = inspections do not occur, Average = incomplete or outdated inspection; High = inspections are complete and up-to-date.	×			
105. Procedures for hospital epidemiological surveillance Verify that the hospital's Epidemiological buvellance Committee has specific procedures for disaster incidents or treatment of mass casualties. Law = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been tronned, High = Procedures exist, personnel have been trained, and resources are in place to Implement them.			×	COMITTEE EPIDEODEMIC SURVEILLANCE - EOC - IS INITIATED ONLY IN CASE OF DISASTER (ACTIVATED)
106. Procedures for preparing sites for temporary placement of dead bodies and for forensic medicine. Welfly that the plan includes specific arrangements for pathology and a site for the placement of multiple cadavers.  Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained; high = Procedures exist, personnel have been trained, and resources are in place to implement them.	×			
107. Procedures for triage, resuscitation, stabilization, and treatment Low = Procedures do not exist or exist only in a document, Awrage = Procedures exist and person- nel have been trained, High = Procedures exist, personnel have been trained, and resources are in place to Implement them.		×		
108. Transport and logistics support Confirm that the hospital has ambulances and other official vehicles. Low = Ambulances and vehicles for logistic support are not available, Average = There are insufficient vehicle; high = Appropriate vehicles in sufficient numbers are available.		×		VEHICLES ARE INSUFFICIENT, MNDF / POLICE SERVICES / PUBLIC VEHICLES CAN BE USED BE USED OR MADE AVAILABLE.
109. Food rations for hospital staff during the emergency The plan specifies actions for supplying food during the emergency and funds for these supplies are included in the budget. Law = Noneitztent, Average = Covers less than 72 hours, High = Guaranteed for at least 72 hours.	×			NO PLAN SPECIFIED
110. Duties assigned for additional personnel mobilized during the emergency Low = Assignments do not exist or exist only in a document, Average = Duties are assigned and personnel have been trained, High = Duties are assigned, personnel have been trained, and resources are in place to mobilize the personnel.		×		

111. Measures to ensure the well-being of additional personnel mobilized during the emergency The plan identifies where emergency personnel can rest, drink, and eat.  Low = Nonexistent, Average = Measures cover less than 72 hours, High = Measures are ensured for at least 72 hours.	×			
112. Cooperative arrangements with local emergency plan There are written airangements regarding cooperation between the hospital and community authorities. Low = No arrangement exit, Average = Arrangements exist but are not operational; High = Ar- nagements exit and are operational.			X	COOPERATION WITH THE FOLLOWING DEPARTMENTS:  * PORT HEALTH MEDICAL SERVICES  * MALDIVES NATIONAL DEFENCE FORCE  * CONCERNED AIRLINE (ISLAND AVIATION)
113. Mechanism to prepare a census of admitted patients and those referred to other hospitals. The plan has specific forms that facilitate the Isting of patients during emergencies.  Low = Mechanism does not exist or exists only as a obcurrent, Newage = Mechanism exists and personnel have been trained; High = Mechanism exists, personnel have been trained; and resources are in place to carry out the census.		×		
114. System for referral and counter-referral of patients:  Low = System does not exist or exist only as a document; Average = System exists and personnel have been trained; High = System exists, personnel have been trained, and resources are in place to carry out the plan.		$\boxtimes$		
115. Procedures for communicating with the public and media. The hospital disaster plan specifies who stepportsleft for comminicating with the public and media in case of disaster (generally the highest person in the chain of command at the time of the event.  Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained. High = Procedures exist, personnel have been trained, and resources are in place to implement the series.		×		TRAININGS ARE CARRIED OUT THROUGH YEARLY DRILLS.
116. Procedures for response during evening, weekend, and holiday shifts Low = Procedures do not exist or exist only in a document, Average = Procedures exist and person- nel have been trained, High = Procedures exist, personnel have been trained, and resources are in place to implement them.		×		
117. Procedures for the evacuation of the facility Verify procedures to evacuate patients, visitors, and staff. Low =Procedures do not exist or exist only in a document, Average = Procedures exist and person- nal nove been trained; high =Procedures exist, personnel have been trained, and resources are in place to implement them.	×			EVACUATION OF PATIENTS FROM HOSPITAL WAS PRACTICED ONCE. ONLY AS A FIREDRILL. PROTOCOL FOR COMPLETE EVACUATION OF THE HOSPITAL - NOT WRITTEN.
118. Emergency and other exit routes are accessible Verify that exit routes are clearly marked and fire of obstacles. Low = 6xt motes are not clearly marked and many are blocked, Average = Some exit routes are marked and most one clear of obstacles; High = All exit moutes are deathy marked and five of obstacles.	×			7 EXIT GATES - 3 OF THEM CLOSED AND LOCKED.
119. Simulation exercises and drills The plan is tested negularly through simulations and drills, which are evaluated and modified as appropriate. (on w = Plans or entested, Average = Plans are tested, but not each year, High = Plans are tested annually and updated according to the results of the exercises.)		×		AS SUCH ONLY PROTOCOL FOR AN AIRPORT EMERGENCY HAS BEEN WRITTEN DOWN.

4.3 Contingency plans for medical treatment in disasters	Le Impler			OBSERVATIONS
	LOW	WERAGE	HIGH	
120. Earthquakes, tsunamis, volcanoes, and landslides IF THESE HAZARDS DO NOT EXIST WHERE THE HOSPITAL IS LOCATED, LEAVE THE BOXES BILANK. Low = Plan does not exist or exists only as a document, Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			* EXTRA-ORDINARY INCIDENTS - TSUNAMI 2004 * EARTHQUAKES - LOW INTENSITY MMI = V-VI * FOR MAJOR FIRE AND TSUNAMI- NOT PREPARED.
121. Social conflict and terrorism B=Low=Plan does not exist or exists only as a document, Average = Plan exists and personnel have been trained-[Hgh = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	X			
122. Floods and hurricanes IF THESE HAZARDS DO NOTE XIST WHERE THE HOSPITAL IS LOCATED, LEAVE THE BOXES BILANK. Low = Plan does not exist or exists only as a document, Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			FLOODS * DUE TO RAIN / TIDAL WAVE. * BARRIER PROTECTION FOR TIDAL WAVES SINCE 2008. HOSPITAL IS 2M HEIGHT FROM SEA LEVEL. PLAN OF ACTION FOR SUCH AN INCIDENT DOES NOT EXIST.
123. Fires and explosions.  Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained, High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			Lack of preparedness for fires within premises or fire events elsewhere requiring emergency response from hospital
124. Chemical accidents OR exposure to ionizing radiation  Low = Plan does not exist or exists only as a document, Average = Plan exists and personnel have been trained, High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			
125. Pathogens with epidemic potential  Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			
126. Psycho-social treatment for patients, families, and health workers  Low = Plan does not exist or exists only as a document, Average = Plan exists and personnel have been trained, High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.	×			AS PER PERSON - PLAN DOES NOT EXIST BUT EXPERIENCE SHOWS THAT, PSYCHO-SOCIAL FACTORS ARE TAKEN CARE OF, BY VARIOUS GROUPS IN THE TSUNAMI INCIDENT.
127. Control of hospital-acquired infections Request the corresponding hospital manual and verify whether control procedures are in- force.  Low = Manual does not exist or exists only as a document, Average = Manual exists and personnel have been trained; High = Manual exists, personnel have been trained, and resources are available to intollerant measures.		×		See responses to questions in Section 1 in regard to Epidemics and Infections

4.4 Plans for the operation, preventive maintenance, and restoration of critical services	Level of availability			ORSERVATIONS
Measure the level of availability, accessibility, and relevance of documents that are es- sential when responding to an emergency.	LOW	AVERAGE	HIGH	OBSERVATIONS
128. Electric power supply and back-up generators The maintenance dividin should provide the operations manual for the back-up electric generator as well as preventive maintenance records. Low = Procedures do not exist or exist only in a document, hierage = Procedures exist and personnel have been trouved. High = Procedures exist, personnel have been trouved, and resources are in place to implement them.	×			
129. Drinking water supply The maintenance division should provide the operations manual for the water supply system as well as records on preventive maintenance and water quality control. Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained. High = Procedures exist, personnel have been trained, and resources are in place to implement them.	$\boxtimes$			
130. Fuel reserves  The maintenance division should provide the operations manual for fuel supplies, as well as preventive maintenance records.  Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained. High = Procedures exist, personnel have been trained, and resources are in place to implement them.	$\boxtimes$			
131. Medical gases The maintenance division should provide the operations manual for medical gases supply, as well as preventive maintenance records. Low = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained. High = Procedures exist, personnel have been trained. And resources are in place to implement them.	$\boxtimes$			
132. Standard and back-up communications systems Low = Procedures do not exist or exist only in a discurrent, Average = Procedures exist and personnel have been through either = Procedures exist, personnel have been trained, and resources are in place to implement them.		$\boxtimes$		
133. Wastewater systems The maintenance division should ensure that hospital wastewater drains into the public sewage system and does not contaminate drinking water. Low = Procedures do not exist or exist only in a document Average = Procedures exist and personnel have been trouved. High = Procedures exist, personnel have been trouved, and resources are in place to implement them.		$\boxtimes$		See responses to questions in Section 1 related to wastewater management system
134. Solid waste management The maintenance division should provide the operations manual for solid waste management, as well as records showing waste collection and subsequent disposal. Low = Procedures do not exist or exist only in a document. Average = Procedures exist and person- mel have been trained. High = Procedures exist, personnel have been trained, and resources are in place to implement them.		$\boxtimes$		See responses to questions in Section 1 related to solid waste management system

135. Maintenance of the fire protection system The maintenance distinct should provide the operations manual for the fire protection systems, as well as records showing preventive maintenance on fire extinguishers and fire hydrains.  Town = Procedures do not exist or exist only in a document, Average = Procedures exist and personnel have been trained, firigh = Procedures exist, personnel have been trained, and resources are in place to implement them.	X			CURRENTLY BEING EVALUATED, AND IN FUTURE PROTOCOL AND RESOURCES WILL BE PUT IN. FIRE HAZARD IS THE NUMBER ONE RISK IN HOSPITAL
4.5 Availability of medicines, supplies, instruments, and other equipment for use in emergency	Level of availabilit			OBSERVATIONS
Verify the availability of essential supplies in the event of an emergency.	LOW	AVER- AGE	нин	
136. Medicines Check the availability of emergency medicines. The WHO list of essential drugs can be used as a reference. Low = Novenistant, Average = Supply covers less than 72 hours, Fligh = Supply is guaranteed for or least 72 hours.			X	EXISTING STOCK OF THE HOSPITAL - PROVIDES MEDICATIONS FOR 4 MONTHS APROXIMATELY. AND CAN BE MADE AVAILABLE IN LESS THAN 24 HOURS.
137. Items for treatment and other supplies Check that the sterilization unit has a supply of sterilized materials for use in an emergency check the supply prepared for the following day). Low = Normalstart, Average = Supply covers less than 72 hours, High = Supply guaranteed for at least 72 hours.		X		
138. Instruments  Verify the existence and maintenance of specific instruments used in emergencies.  Cow = Nonesistent, Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.		$\times$		
139. Medical gases Verify the phone numbers and addresses of medical gas supplier and ensure availability in an emergency from the supplier. Low = Nonesistent, Average = Supply covers less than 72 hours, High = Supply guaranteed for at- least 72 hours.		X		AT PRESENT OUR SUPPLIES HAVE RUN DOWN - LAST 15 DAYS DUE TO FIANACIAL ISSUES. CURRENTLY ON A PROSPECT TO PROVIDE 02 OF OWN (5 DAYS STOCK - 150 LARGE CYLINDERS.)
14.0. Mechanical volume ventilators The Hospital Disaster Committee should provide documentation on quantity and conditions of use of this equipment. Low = Noneisterit, Average = Supply covers less than 72 hours, High = Supply guaranteed for at- least 72 hours.	X			* 0 VENTILATORES * 2 PORTABLE VENTILATORS ALMOST ALWAYS IN USE. HULHUMALE* HOPSITAL - 0 VENTILATORS (CAN BE MADE AVAILABLE)
14.1. Electro-medical equipment The Hospital Disaster Committee should provide documentation on quantity and conditions of use of this equipment. Low = Normistert, Average = Supply covers less than 72 hours, High = Supply guaranteed for at- least 72 hours.		$\boxtimes$		
142. Life-support equipment Low = Nonevistent; Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.	X			
143. Personal protection equipment for epidemics (disposable) Verify the hospital's stocks of personal protection equipment for staff working in areas of initial corniact and treatment. Low = Normalisterit, Average = Supply covers less than 72 hours, High = Supply guaranteed for at least 72 hours.		X		GLOVES AND MASK - 5 MONTHS DISSPOSABLE GOWNS - AND EYE WEAR - <72 HOURS

144. Crash cart for cardiopulmonary arrest The Hospital Disaster Committee should provide documentation on quantity, conditions of use, and locations of crash carts for treatment of cardiopulmonary arrest. Low = Nonexistent, Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.			×	CRASH CART FOR CARDIO PULMANORY ARREST EXISTS IN ALL WARDS. MEDICATIONS AND INSTRUMENTS CHECKED SYSTEMETICALLY.		
145. Triage tags and other supplies for managing mass casualties The enregency-objectment cluthouts and uses timple tags in case of mass casualties. Evaluate the supply in terms of the maximum capacity of the hospital. Low = Konesisent, Average = Supply covers less than 72 hours, High = Supply guaranteed for at least 72 hours.		X		ONLY A FEW TRIAGE TAGS AVAILBLE. CURRENTLY UNDER LOCK AND KEY.		
Comments on the results of Form 2, Module 4  BLOOOD BANK - 84 PNTS AVAILABLE (OF DIFFERENT BOOLD GROUPS)  PROTOCOL FOR MAINTAINING BLOOD SUPPLY - NON EXISTING.  INSTRUMENTS FOR STORAGE - NOT AVAILABLE.						
FOR AN EMERGENCY - 3 PNTS AVAILABLE - LIST IN LAB - TO CALL DONERS.						
EXISTING PROTOCOL IS TO CALL THE LIST OF DONORS FOR BLOOD DONATION. BLOOD CAN BE MADE AVAILABLE IN 2 HOURS TIME.						
Name/signature of evaluator						

Risk Safety Assessment for Health Infrastructure in the Republic of Maldives, Jaime F. Argudo, Ph.D., P.E. - WHO Consultant

# The Safe Index Assessment will provide the technical background to:

- Identify prevailing safety risks on the built infrastructure, environment, personnel and general public
- Identify actions to reduce risks against natural and human-made hazards
- Develop guidelines and tools for Sustainable Development Planning of Health Infrastructure and Services
- Develop Health Care Infrastructure and Service Standards for the Republic of Maldives
- Prioritize future investments on Health Infrastructure and Services in the Republic of Maldives