



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

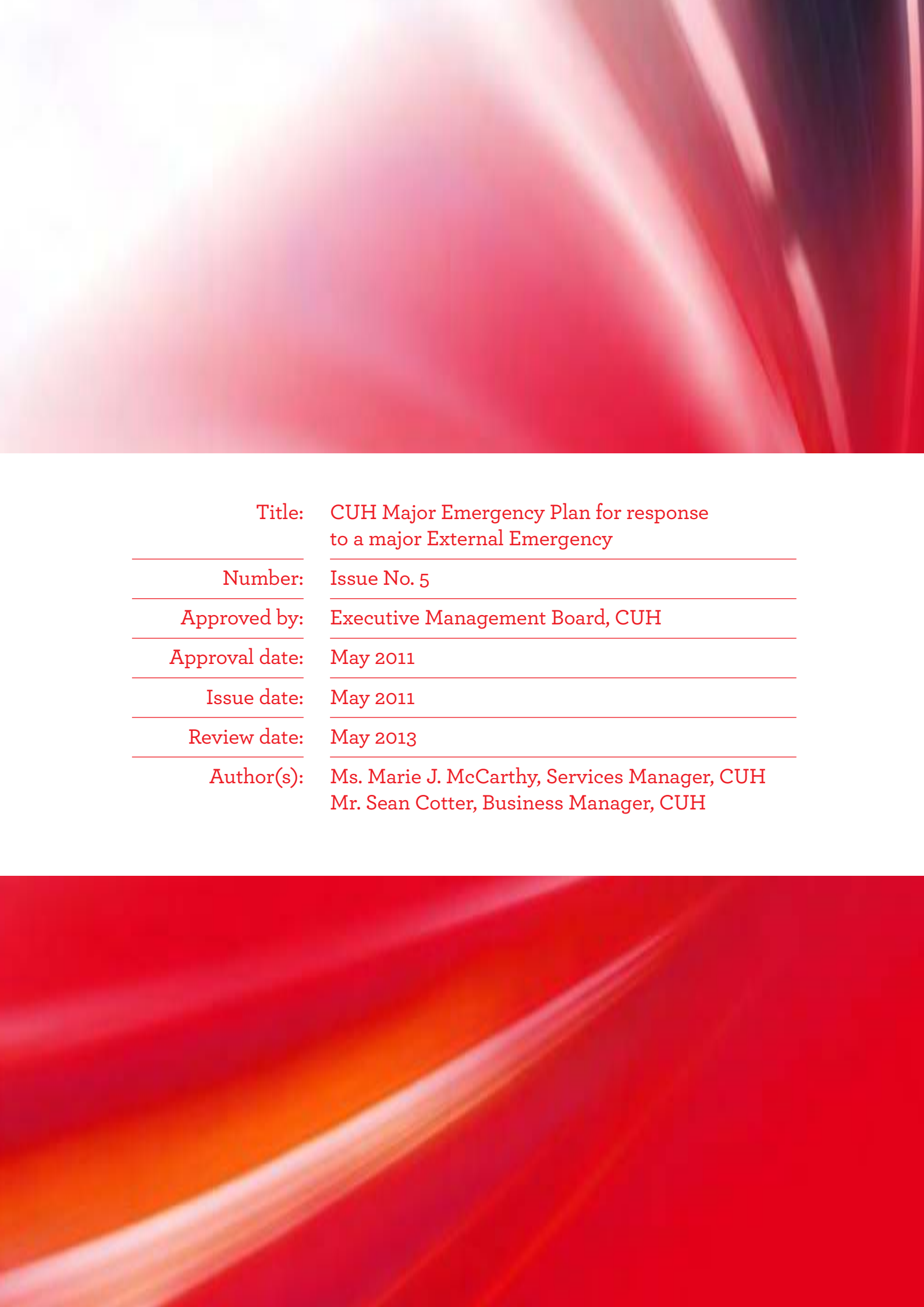


Ospidéal Ollscoile Chorcaí  
Cork University Hospital



# MAJOR EMERGENCY PLAN

Cork University Hospital



Title:	CUH Major Emergency Plan for response to a major External Emergency
Number:	Issue No. 5
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Author(s):	Ms. Marie J. McCarthy, Services Manager, CUH Mr. Sean Cotter, Business Manager, CUH

## 1.0 Amendment Record

Plan holders should carry out amendments correctly and note the action taken on the record below.

Review date is **May 2013**

Any suggestions/amendments to this document prior to May 2013 should be addressed to:

Chief Executive Officer  
Cork University Hospital  
Wilton  
Cork

Issue No. 1	July 1985
Issue No. 2	July 1998
Issue No. 3	November 2004
Issue No. 4	March 2007
Issue No. 5	May 2011

# Amendment Record

Amendment No.

\_\_\_\_\_

*Amended by:*

Date:

[illegible]

NB: A complete new edition may be published periodically at which time the previous copy must be destroyed and the new edition may be inserted into the Major Emergency Plan Folder.

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## 2.0 Distribution List

### 2.1 CUH Major Emergency Plan Document

- Chief Executive Officer
- Clinical Director
- Operations Manager
- CUH – Executive Management Board
- Services Manager
- Finance Manager
- IT Manager
- Head of Human Resources
- Medical Manpower Manager
- Director of Nursing (CUH)
- Director of Midwifery (CUMH)
- Nurse Service Managers
- Business Managers
- Department Heads
- Clinical Nurse Managers
- Garda Liaison Officer
- Consultant Staff
- Clinical Governance Manager
- Integrated Services Manager
- Network 2 – Hospital Managers
- Ambulance Service
- Regional Director of Operations
- General Practice Unit HSE – Southern Area
- Cork Blood Transfusion Service
- Cork City Fire Brigade
- Cork County Fire Brigade
- Garda Síochána
- Cork City Council
- Cork County Council
- UCC Dental Hospital
- Army
- Services Department (Hard Copy)
- Emergency Department (Hard Copy)
- Hospital Emergency Control Centre (Hard Copy)

## 2.2 Action Cards:

### 2.2.1 Full Set of Action Cards (Red Folders)

- **Emergency Department (ED)** (Major Emergency Store)
- **Services Department** (Hospital Emergency Control Centre Major Emergency Store)
- **Head Porters Office**

### 2.2.2 Individual Action Cards

Card Number.	Card Name.	Location.
Action Card 1	ED – Declaring a Major Emergency	Nurses Station (ED)
Action Card 2	Emergency Dept. Consultant in charge	Nurses Station (ED)
Action Card 3	Site Medical Team	Nurses Station (ED)
Action Card 4	Emergency Dept. - Triage Team	Nurses Station (ED)
Action Card 5	ED – Red Treatment Area	Nurses Station (ED)
Action Card 6	ED – Yellow Treatment Area	Nurses Station (ED)
Action Card 7	Registration	Nurses Station (ED)
Action Card 8	Garda Liaison Officer	Nurses Station (ED)
Action Card 9	ED – Health Care Assistant	Nurses Station (ED)
Action Card 10	Switchboard	Switchboard
Action Card 11	Hospital Emergency Control Centre	CEO's Boardroom
Action Card 12	Clinical Director	Consultants Coffee Room.
Action Card 13	Surgical Triage Officer	Consultants Coffee Room.
Action Card 14	Medical Triage Officer	Consultants Coffee Room.
Action Card 15	Director of Nursing	DON Office
Action Card 16	Bed Manager	Bed Manager's Office
Action Card 17	Out Patient Department	CNM 2 – Ward Sister's Office
Action Card 18	All Wards	CNM 2 – Ward Sister's Office
Action Card 19	Theatres	Theatre Reception
Action Card 20	General/Cardiac ICU	CNM 3 – ICU

*listing continued overleaf*

Card Number.	Card Name.	Location.
Action Card 21	Burns Unit - Ward 2D	CNM 2 – Ward Sister's Office
Action Card 22	Radiology Department	X-ray Reception
Action Card 23	Pathology Department	Pathology Reception
Action Card 24	Bio-Medical Engineering Department	High Street House
Action Card 25	Portering Department	Head Porter's Office
Action Card 26	Security Department	Security Office
Action Card 27	Cork University Maternity Hosp	Director of Midwifery Office
Action Card 28	Occupational Health Department	Occ. Health Department
Action Card 29	Relatives Area	Radiotherapy Department
Action Card 30	Relatives Co-Ordinator	Risk Office
Action Card 31	Social Work Department	Social Work Office
Action Card 32	Medical Liaison Officer for Relatives	Radiotherapy Department
Action Card 33	Communications Officer	CEO's Boardroom
Action Card 34	Health Records Department	Health Records Department
Action Card 35	Mortuary	Mortician's Office
Action Card 36	Gardai	CEO's Boardroom
Action Card 37	Volunteers	CEO's Boardroom
Action Card 38	V.I.P's/Area	CEO's Boardroom
Action Card 39	Head of Human Resources	CEO's Boardroom



## 3.0 Outline of Major Emergency Plan

### 3.1 Aim

To establish the framework of response as per the document 'A Framework for Major Emergency Management' (DOH 2006) in the event of a major emergency involving Cork University Hospital.

### 3.2 Definition of a Major Emergency

For the purpose of this plan, a major emergency is any event which, usually with little or no warning, causes or threatens death or injury, serious disruption of essential services or damage to property, the environment or infrastructure beyond the normal capabilities of the principal emergency services in the area in which the event occurs, and requires the activation of specific additional procedures and the mobilisation of additional resources to ensure effective, co-ordinated response.

### 3.3 Responsibilities of Manager's/Staff

#### 3.3.1 General

It is the Responsibility of the **Chief Executive Officer**, Cork University Hospital to ensure that this plan is ready to be implemented and that it is exercised and tested on a regular basis.

On appointment and periodically thereafter it is the responsibility of **staff** to familiarise themselves with the general outline of this plan as set out herein. Staff must be aware of the location to which they should report, their role and responsibilities as laid out in the relevant **Action Card** (department sub-plan if applicable) when a major emergency has been declared.

**Line Managers** are responsible for carrying out periodic checks, at no more than six monthly intervals, that their staff are aware of individual emergency roles and that they are conversant with the responsibilities they may be required to assume.

Each ward or department must hold...

- A copy of this document (Major Emergency Plan for CUH)
- A laminated Action Card if applicable
- Details of staff contact numbers
- A copy of the ward/department sub plan

...in a suitable location, readily available in the event of a Major Emergency.

Individual members of staff are responsible for reporting any changes of their home address or telephone number to their Line Manager, (or in the case of medical staff, to medical manpower), to enable out-of-hours contact lists to be maintained.

Line Managers should have a written department procedure (sub-plan) with action cards for individuals within each department. This should be regularly updated (every year).

### *3.3.2 Activation of Plan*

The Hospital Emergency Control Team has full responsibility for the response to a Major Emergency.

In the event of the Major Emergency Plan being activated all personnel will work in conjunction with the recommendations of the Hospital Emergency Control Team.

Staff with specific responsibilities will receive instructions on individual action cards and will receive appropriate training in advance. All other staff will receive instructions from their individual department /ward sub plan. It is the responsibility of the senior staff to ensure that junior staff are aware of their responsibilities.

Designated staff (action card holders) must ensure that in their absence their deputy or some other nominated person is briefed and available to perform their duties.

Staff are not to come on duty at the time of the incident until the commencement of their shift unless specially requested by their Line Manager.

All staff must wear Cork University Hospital security identification badges. (Access will be denied to the hospital to those members of staff who are unable to produce the required I.D.)

Staff parking will be provided in Highfield Rugby Football Club car parking facility and a Taxi service will be provided by Sun Cabs when required to ferry staff directly to CUH.

The senior staff member on duty in each ward/ department is responsible for nominating a member of staff whose responsibility is to call in additional staff. The Manager of each ward/ department is responsible for the maintenance of an up to date list of their staff home and work telephone numbers for use in a designated Major Emergency only.

All Action Card holders alerted must remain at their posts until 'stand down' orders are received from the Hospital Emergency Control Team.

### *3.3.3 Stand Down/Recovery*

The decision to stand down will be taken in consultation with HSE Crisis Management Team representing the Principal Response Agencies (PRA). The Stand Down notification will be relayed by the Hospital Emergency Control Team via its dedicated e-mail – [cuhmep@hse.ie](mailto:cuhmep@hse.ie) – to all staff advising them of stand down in relation to their particular area/department. It should be noted that stand down will not occur simultaneously in every Department because of the impact of the major emergency on service delivery.

The manager of each ward/department is responsible for keeping a log of events and decisions made during the emergency. This should be given to a member of the Hospital Emergency Control Team following the emergency. The information collected will be forwarded to the chairperson of the Major Emergency Planning Group for compilation of a hospital report.

It is the responsibility of the Hospital Emergency Control Team to ensure a log is kept at the Hospital Emergency Control Centre and that all events and decisions are recorded. The Hospital Emergency Control Centre is responsible for ensuring that all logs and records kept by the managers are secured after the event.

This policy will be reviewed on a biannual basis, following an incident or where there are any changes in hospital policy or buildings

### 3.4 Declaration of a Major Emergency

The CUH Major Emergency Plan will be initiated by a call on the **Red Telephone** to the Emergency Department from Ambulance Control stating:

*“This is Ambulance Control, A Major Emergency has occurred (or is imminent) at \_\_\_\_\_. The Major Emergency Plan is now in operation.”*

#### Emergency Department Shift Leader receiving emergency declaration:

- Notes the time of the call and is given the following information
  - **M** Is the Major emergency on standby or declared?
  - **E** Exact location of the incident
  - **T** Type of incident (e.g. rail crash/explosion/air crash)
  - **H** Hazards (actual and potential)
  - **A** Access and egress routes
  - **N** Number of casualties (estimate/adult/Paediatrics)
  - **E** Emergency services present and required (e.g. medical team).
- Receives and confirms details with ambulance control – **Red Telephone**.
- Dial 22111 or 22444 to inform CUH Switchboard that MEP is either on standby or operational as appropriate. The Switchboard will confirm this information with ambulance control.
- Alert Medical Director of the Emergency Department.
- Activate the Hospital Major Emergency Plan, as set out in the Action Cards.

### 3.5 Standby for a Major Emergency

The Emergency Standby Procedure is designed to alert Key Personnel that something unusual has happened which may lead to a major emergency.

Only limited response from key personnel is required.

The alerting message will be prefixed by the words:

*“This is Ambulance Control, A Major Emergency is imminent at \_\_\_\_\_.”*

*The Major Emergency Plan is now in Standby Mode.”*

The following key personnel (Priority Group) are to be alerted:

- Nurse in Charge (Shift Leader) ED
- ED CNM 3
- ED Coordinator (Registrar/Consultant)
- ED Nurse Service Manager
- Switchboard Supervisor
- Chief Executive Officer
- Clinical Director
- Director of Nursing
- Operations Manager
- Services Manager
- Information Manager
- Emergency Response Rep (ED)
- Communications/Press Officer (CUH)
- Relatives Coordinator
- Bed Manager
- Security Manager
- Garda Liaison Officer

The next message will be the alerting message:

*“Major Emergency Declared- Activate Plan”*

or

*“Major Emergency cancelled”*

### 3.6 Alert Procedure:

Alert Levels in Cork University Hospital will be divided between the Emergency Department, Switchboard and then cascading of the alert through Line Managers and Departments. (See pages 18-27)

### 3.7 Action/Preparedness: (Action Cards 1-39)

#### 3.7.1 Make Ready the Emergency Department

- Prepare Site Medical Team
- Set up Red & Yellow Treatment Areas
- Set up Triage & Registration Points.

#### 3.7.2 Set up the Hospital Emergency Control Centre

This room will be located in the CEO's Boardroom in the Cardiac Renal Centre and will house the Hospital's Emergency Control Team that will direct and control the Major Emergency.

- **MEDIA ROOM:**  
Located in the Main Auditorium as a Press Information Centre.
- **RELATIVES AREA:**  
Located in the Radiotherapy Reception Area and it will provide an area for relatives of casualties to await news of their relatives.
- **GARDA CASUALTY BUREAU:**  
Located in the Meeting & Conference Room in the Cardiac Renal Centre (adjacent to the switchboard) and manned by the Gardai, who will collate casualty information.
- **INFORMATION ROOM:**  
Located in the room directly opposite the CEO's Boardroom in the Cardiac Renal Centre, it will be used to collect all information relevant to the major emergency.
- **V.I.P. AREA:**  
Located in the Meeting Room opposite the Coffee Bar on Level 1 of the Cork University Maternity Hospital.

### *3.7.3 Prepare Rest of Hospital for Major Emergency*

- Bed Management
- Ward Preparation
- Intensive Care
- Theatres
- Laboratories
- X-ray
- Out Patients Department.

## **3.8 Treatment of Casualties:**

- Incident Site
- Red and Yellow Treatment Areas in the Emergency Department.
- Green Treatment Area in the OPD
- Theatres
- Wards
- ICU.

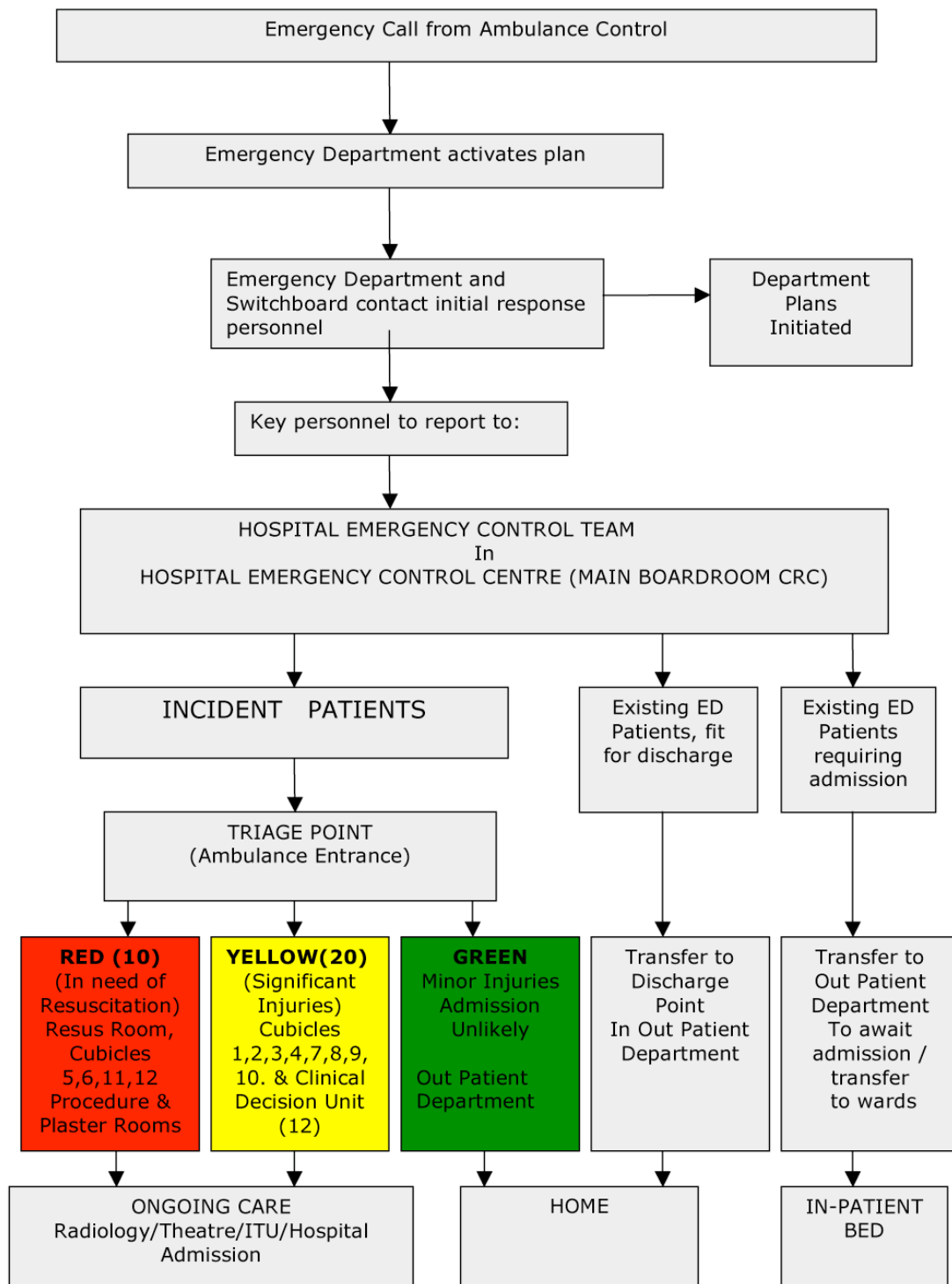
## **3.9 Stand Down:**

The decision to stand down will be taken in consultation with HSE Crisis Management Team representing the Principal Response Agencies (PRA). The Stand Down notification will be relayed by the Hospital Emergency Control Team via its dedicated e-mail – [cuhmep@hse.ie](mailto:cuhmep@hse.ie) – to all staff advising them of stand down in relation to their particular area/department. It should be noted that stand down will not occur simultaneously in every department because of the impact of the Major Emergency on service delivery.

### 3.10 Debriefing:

An initial debrief should be arranged for all staff that are involved in responding to a Major Emergency as soon as possible after stand-down has occurred. More formal debriefings and discussions may be held in the days and weeks following the major emergency.

### 3.11 Major Emergency Flow Chart:



### 3.12 Other Relevant Information:

#### 3.12.1 General Practitioners

- The GP may be the first professional response at the scene, prior to the arrival of ambulance and acute hospital response.
- Doctors living in the immediate vicinity of the incident or within a reasonable distance thereof, may go to the scene, either on their own initiative, or at the request of the emergency services. At the site, the doctor may assume the role of the Site Medical Officer. This role will be handed over to the designated Site Medical Officer on his/her arrival at the scene.
- At the scene, doctors should make themselves known to the Site Medical Officer, and the Site Ambulance Officer, and act in co-operation with these officers.
- Doctors not living in the immediate vicinity of the incident or within a reasonable distance thereof should not go to the site, except when requested to do so by the HSE Controller of Operations.
- In certain situations, where the incident is remote from the designated hospital, doctors may be requested to staff field hospitals or casualty clearing stations. The HSE Controller of Operations will make such decisions.

#### 3.12.2 Off Duty Staff

All off duty staff who are due to attend the next shift/night duty should not go to CUH until their planned start time unless explicitly requested to do so by their Line Manager. In advance of a Major Emergency being declared a text alert may also be issued to priority staff in the ED and CUH (this list is retained in the Emergency Department). See also section 4.5 below.

#### 3.12.3 Psychiatric (Psychological Medicine) Services

It is essential that psychiatric effects of major incidents are recognised and dealt with promptly. The Health Service Executive catchment area Mental Health Teams, consisting of doctors, nurses, and psychologists, with well established relationships with hospital colleagues, will provide a properly integrated service in the immediate aftermath of a major incident, to victims, relatives, and other affected persons.

Provision will be made to allow for debriefing of the emergency service workers, during the incident, to help prevent their becoming traumatised.

To avoid inappropriate intervention, only volunteers, previously accredited by the catchment area mental health teams will be utilised.

### 3.12.4 Fatalities

Temporary mortuary accommodation for those who die in hospital will be available in the Emergency Department Eye Casualty Room. Before agreeing to take any deceased casualties from the Major Emergency, approval must be sought in advance from the Hospital Emergency Control Team. However depending on the numbers involved external mortuary accommodation may be required. The Gardai will arrange this with the Coroner and Cork University Hospital Management and the Local Authorities. The Consultant Histopathologist's at Cork University Hospital will co-operate with the Coroner and the Gardai in arranging and co-ordinating the appropriate forensic and other expert medical assistance required.

### 3.12.5 Casualty Labelling System

Labeling at Incident Site:

At the incident site, all casualties will be issued with a Cruciform Casualty Form (number 1 to number xxx). All available relevant data is recorded on this form, which accompanies the patient to the designated hospital.

The purpose of labeling is:

- To avoid casualties being re-examined at the scene.
- To indicate to the Ambulance Service priorities for conveyance to hospital.
- To record any treatment or drugs given to casualties at the site.
- To record details of fatalities.

The following labels are carried in the Mobile Control Vehicle:

<b>RED LABEL</b>	<b>– Immediate</b>	<b>– FIRST PRIORITY</b>
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<b>YELLOW LABEL</b>	<b>– Urgent</b>	<b>– SECOND PRIORITY</b>
---------------------	-----------------	--------------------------

<b>GREEN LABEL</b>	<b>– Delayed</b>	<b>– THIRD PRIORITY</b>
--------------------	------------------	-------------------------

<b>WHITE LABEL</b>	<b>– DEAD</b>
--------------------	---------------



**CASUALTY LABELS**

**IMMEDIATE  
FIRST PRIORITY**

**Destination:**

**Label No. 1 Front**

**URGENT  
SECOND PRIORITY**

**Destination:**

**Label No. 2 Front**

**DELAYED  
THIRD PRIORITY**

**Destination:**

**Label No. 3 Front**

**DEAD**

**Label No. 4 Front**

<b>CASUALTY ASSESSMENT</b>			
Name		Age	M/F
AIRWAY		OBSERVATIONS	
Chest Aspirated Intubated Ventilated		Pulse BP	
OTHER INJURIES		CONCIOUSNESS	
TREATMENT			
Sign			

**Label No. 1,2,3 Back**

**DEAD**

Date Death Confirmed  
Time Confirmed  
Location Of Body  
Garda Ref  
Name Of Doctor  
Confirming  
Photo Taken Y/N

### *3.12.6 Garda Documentation Team*

A Garda Documentation Team will be deployed to Cork University Hospital to collate all the relevant detail in respect of casualties, which will be required by the Garda Casualty Information Service and the Coroner. A room will be allocated in the Meeting & Conference Room in the Cardiac Renal Centre (adjacent to the switchboard) for the Garda Casualty Bureau.

The Consultant Pathologists will co-operate with the Gardai in arranging and co-coordinating the appropriate forensic and other medical assistance to facilitate the identification of victims.

### *3.12.7 Dispersal of casualties from the Emergency Department:*

Live casualties will be dispersed to the following locations only:

- ITU/CITU/Theatres
- The designated receiving wards
- The designated back up receiving wards
- The designated area for discharge patients awaiting transport / pick up.

A member of the team that assessed and treated them in the Emergency Department to affect adequate handover must accompany all patients being admitted.

### *3.12.8 Foreign Language Interpreters:*

A list of available interpretation services is available from Switchboard.

### *3.12.9 Picture Archive Communication System – PACS:*

All Radiology Images will be available on PACS via the Emergency MRN number. Electronic Requesting will cease in the event of a Major Emergency.

## 4.0 Alert Procedure

### DAY & NIGHT

Alert Levels in Cork University Hospital will be divided between the Emergency Department, Switchboard and then cascading of the alert through Line Managers and Departments.

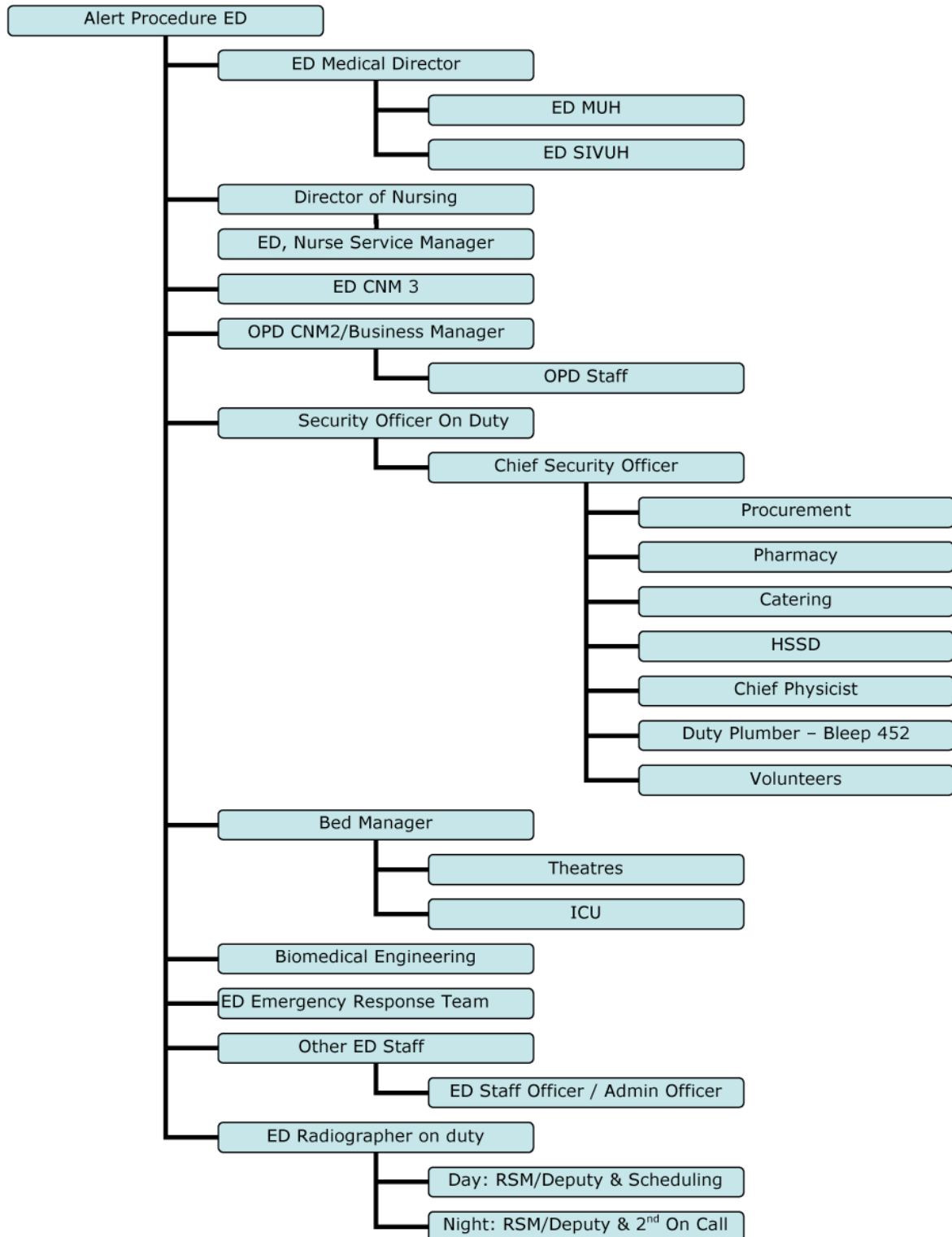
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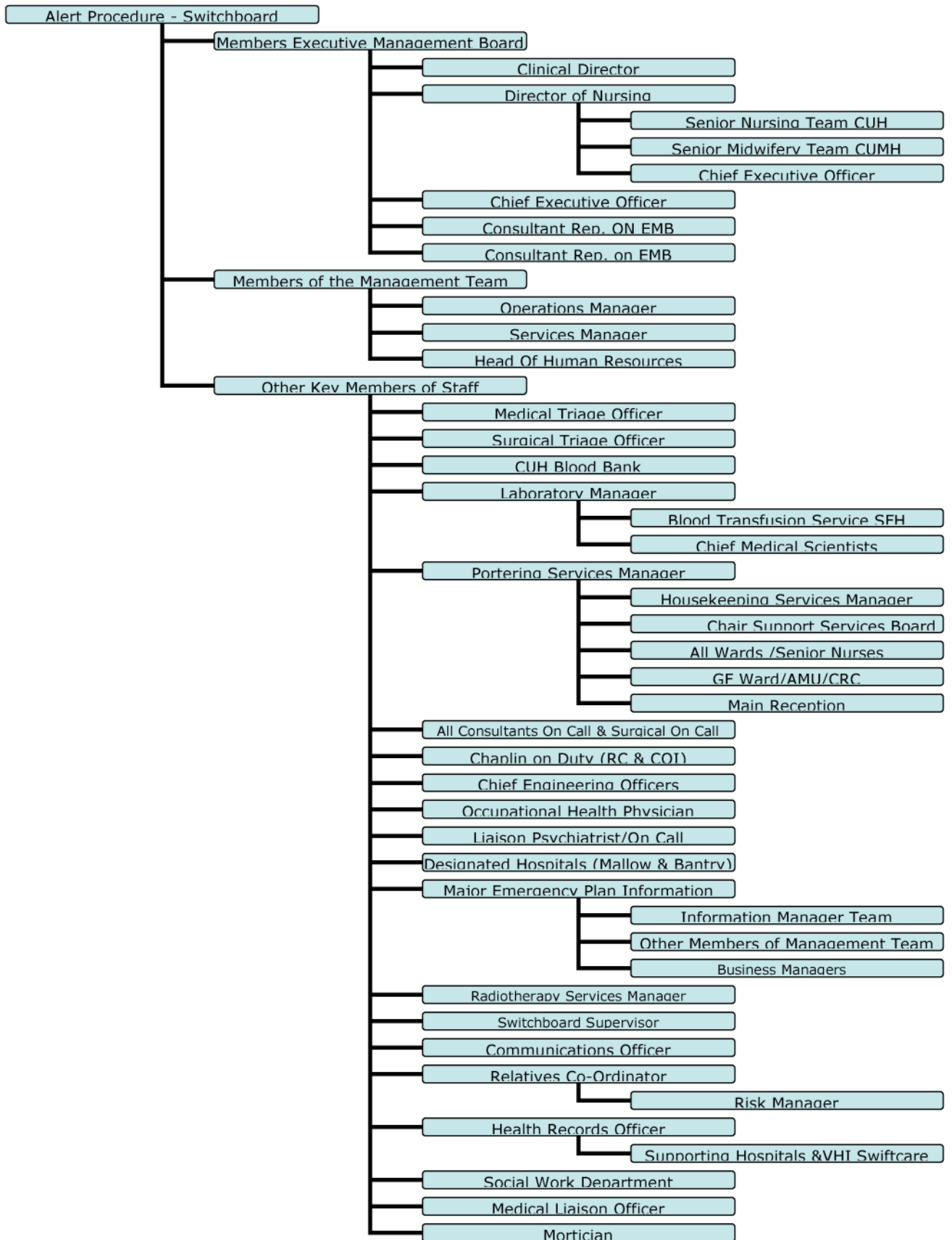
*“This is Ambulance Control, A Major Emergency has occurred (or is imminent) at \_\_\_\_\_. The Major Emergency Plan is now in operation.”*

#### Emergency Department Shift Leader receiving emergency declaration:

1. Notes the time of the call and is given the following information
  - **M** Is the Major emergency on standby or declared?
  - **E** Exact location of the incident
  - **T** Type of incident (e.g. rail crash/explosion/air crash)
  - **H** Hazards (actual and potential)
  - **A** Access and egress routes
  - **N** Number of casualties (estimate/adult/Paediatrics)
  - **E** Emergency services present and required (e.g. medical team).
2. Receives and confirms details with ambulance control – **Red Telephone**.
3. Dial 22111 or 22444 to inform CUH Switchboard that MEP is either in standby or operational as appropriate. The Switchboard will confirm this information with ambulance control.
4. Alert Medical Director of the Emergency Department.
5. Activate the Hospital Major Emergency Plan, as set out in the Action Cards.

## 4.1 Alert Organisational Charts





## 4.2 Alert Level 1

### 4.2.1 Emergency Department Day/Night

Once the Major Emergency has been declared and confirmed the following staff will be alerted immediately by **telephone/runner** from the Emergency Department.

Emergency Department Medical Director

**Dr Gerry McCarthy** & Consultant On-Call (Action Card 2)

Emergency Department Nurse Service Manager

**Siobhan Scanlon** (Action Cards 1-9) who will in turn alert the Director of Nursing

Emergency Department CNM 3

**Norma O'Sullivan** (Action Cards 1-9)

Out Patient Department CNM2 and Business Manager

**Margaret McSweeney**, CNM2 (By day – Runner) (Action Card 17)

**Breda Chandler**, Business Manager

Security Officer on duty in the Emergency Department who will in turn alert the Chief Security Officer. **Jim Griffin** (Action Card 26)

Bed Manager: **Anne Keating** (Action Card 16)

Alert Bio-Medical Engineering Department

**Ger Flynn**

**Bernard Murphy** (Action Card 24)

ED Emergency Response Team: (Action Cards 1-9)

**Mr Sean Cotter** (Business Manager/Information Manager)

**Ms Nora Twomey** (ED Clinical Facilitator)

**Ms Catherine O'Mahony** (ED, GP Liaison Nurse)

Other ED Staff on duty – Health Care Assistant on Duty who will in turn alert

ED staff in the Department – **Reception/Portering/Housekeeping/HealthCare Assistants & Paramedical Staff.**

Emergency Department Radiographer on duty who will in turn alert:

**Day:** Radiography Services Manager **Catherine O'Neill**/Deputy and the Scheduling Radiographer (Action Card 22)

**Night:** Radiography Services Manager **Catherine O'Neill**/Deputy and the 2nd On-Call Radiographer (Action Card 22).

### 4.2.2 Switchboard Day/Night

Once the Major Emergency has been declared and confirmed the following staff will be alerted immediately by telephone from the Hospital Switchboard.

#### 4.2.2.1 Members of Executive Management Board

- Hospital Coordinator/Clinical Director **Professor Richard Greene** (Action Card 12)
- Chief Executive Officer **Tony McNamara** (Action Card 11)
- Director of Nursing, **Mary Boyd**/Night Superintendent (Action Card 15)
- Consultant Representative on EMB, **Dr Mike Henry**, EMB
- Consultant Representative on EMB, **Dr Michael Clarkson**, EMB.

#### 4.2.2.2 Members of the Management Team (on the Hospital Emergency Control Team)

- Operations Manager, **Jason Kenny** (Action Card 11)
- Services Manager **Marie J. McCarthy** (Action Card 11)
- Acting HR Manager **Nuala Lynch** (Action Card 39).

#### 4.2.2.3 Other Key Members of Staff

- Medical Triage Officer and Surgical Triage Officer (action Cards 13 & 14)
  - **Consultant Surgeon On-Call/ Surgical Registrar On-Call**
  - **Consultant Physician On-Call /Medical Registrar On-Call**
- CUH Blood Bank – **Stephen McGrath** (Action Card 23)
- Laboratory Manager – **Tadgh Hurley** (Action Card 23)
- Portering Services Manager – **Frank Power** (Action Card 25)
- All Other Consultants on Call and then the Surgical On-Call Registrars
- Chaplain on Duty (Roman Catholic & Church of Ireland)
- Chief Engineering Officers **John McDermott/Daniel Clifford**
- Occupational Health Physician **Dr John Gallagher** (Action Card 28)
- Liaison Psychiatrist/On Call –Clinical Director Department of Psychiatry
- Designated Hospitals (Mallow & Bantry Appendix B)
- Major Emergency Plan Information Managers (Action Card 11)
  - **Sean Cotter**
  - **Martina Hutchinson**
- Radiotherapy Services Manager/Deputy **Derry Little** (Action Card 29)
- Acting Switchboard Supervisor **Eamonn Forrest** (Action Card 10)
- Communications Officer **Ber Baker** (Action Cards 33 & 38)

- Relatives Co-Ordinator **Celia Cronin** (Action Card 30)
- Health Records Department **Ena O'Driscoll** (Action Card 34)
- Social Work Department **Mary Casey** (Action Card 31)
- Medical Liaison Officer for Relatives **Mike O'Connor** (Action Card 32)
- Mortician **Dan Collins** (Action Card 35).

#### 4.3 Alert Level 2 – Action Cards

Once the Major Emergency has been declared and confirmed the following cascading telephone calls will be made by staff who will already have been alerted at Level 1 – Details of these alerts are contained in individual action cards as outlined below.

##### **Emergency Department Consultant in CUH (Action Card 2) *notifies:***

Emergency Departments of the Mercy University Hospital & South Infirmary Victoria University Hospital.

##### **Emergency Department Reception Staff (Action Card 7) *notifies:***

Emergency Department Staff Officer/Administrative Officers.

##### **Director of Nursing, CUH (Action Card 15) *notifies:***

Senior Nursing and Midwifery Team for CUH Campus, EDNSM **Siobhán Scanlon**  
Nurse Service Managers CUH  
Chief Executive Officer.

##### **Bed Manager (Action Card 16) *notifies:***

Theatre Superintendant  
ITU/CITU CNM's.

##### **Out Patient Department CNM 2/Business Manager (Action Card 17) *notifies:***

Out Patient Department Staff.

##### **Portering Department (Action Card 25) *notifies:***

Housekeeping Services Manager/Deputies  
Chair Support Services Board  
Portering Deputy Managers  
All Wards/Senior Nurses  
GF  
Main Reception  
Acute Medical Unit  
Cardiac Renal Centre.



**Security Department (Action Card 26) *notifies:***

Procurement Department- Sarsfield Road  
 Pharmacy  
 Catering  
 HSSD  
 Chief Physicist  
 Duty Plumber – Bleep 452  
 Volunteers (inc. Friends of the Hospital, Sun Cabs, Manager of Wilton Shopping Centre).

**Radiography Services Manager/Deputy (Action Card 22) *notifies:******DAY:***

Director of Radiology  
 CNM 2  
 Radiographers On Duty  
 PACS Clinical Specialist  
 RIS Administrator  
 Off Duty Radiographers

***NIGHT & ON-CALL:***

Director of Radiology  
 Clinical Specialist (Trauma)  
 CNM 2  
 PACS Clinical Specialist  
 RIS Administrator  
 Off Duty Radiographers  
 Clerical Supervisor  
 General Staff (via paging system).

**Scheduling Radiographer (Action Card 22) *notifies:***

Departmental Portering & Housekeeping Staff.

**2nd On-Call Radiographer (Action Card 22) *notifies:***

All Radiographers On-Call (Night & On-Call).

**Relatives Co-Ordinator (Action Card 30) *notifies:***

Risk Manager.

**Health Records Department (Action Card 34) *notifies:***

CEO or Senior Managers in Supporting Hospitals  
 VHI SwiftCare Clinic, City Gate, Mahon, Cork.

## 4.4 Alert Level 3 – Others

Once the Major Emergency has been declared and confirmed the following cascading **telephone calls will be made immediately** by the Information Management Team who will already have been alerted at Alert Level 1.

### OTHER MANAGEMENT TEAM MEMBERS

- **Annemarie Byrne**
- **Terry Kiely**
- **Mike O'Regan**

### BUSINESS MANAGERS

- **Martine Delaney**
- **Damian McGovern**
- **Geraldine Barry Murphy**
- **Michael Murphy**

### INFORMATION MANAGEMENT TEAM

- **Martina Hutchinson**  
*Who will in turn alert the Information Manager Team:*
- **Elaine Cronin**
- **Carmel Nixon**
- **Mairead Goggin**
- **Carole Croke**
- **Margaret Twohig**

## 4.5 Text Messaging Alert System

The Text Messaging Alert System is activated from the Shift Leaders Mobile Phone in the Emergency Department. It will be used to supplement the Phone alert system as detailed above. Text messages can be sent to Emergency Department staff and a priority list of hospital staff giving them information on the Major Emergency. Local radio will also be used and staff may be asked to listen in to news bulletins on local radio in the event of a major emergency. (See also section 3.12.2 above).

### Text Messaging Alert System

Activation Phone (**ED Shift Leaders Phone**)

## 5.0 Action Cards

### 5.1 Aim:

Action Cards provide detailed instructions and information concerning major emergency procedures to be implemented in the hospital.

### 5.2 Types:

Action cards cover functional roles and responsibilities pertinent to a specific post holder or more generally to hospital departments.

### 5.3 Issue to Post Holders/Departments:

Action cards will be issued on an individual basis to specific post holders/deputy or a specific department and will be located in a safe and accessible place so that in the event of a major emergency the card is available immediately. A full set of action cards will be available in the Emergency Department, the Hospital Emergency Control Centre (Major Emergency Store) and the Head Porters Office.

### 5.4 Location/Action Cards:

Each area should designate a location (see pages 5-6) for holding a copy of the **Major Emergency Plan** for CUH, the relevant **Action Card** and any other information pertinent to the smooth operation of the plan in that area to be available in the event of a Major Emergency to the person delegated to perform the duties identified in the action card.

**It shall be accepted that the person initially delegated to perform major incident duties covered by an action card may be relieved on arrival of a more senior or experienced member of staff.**

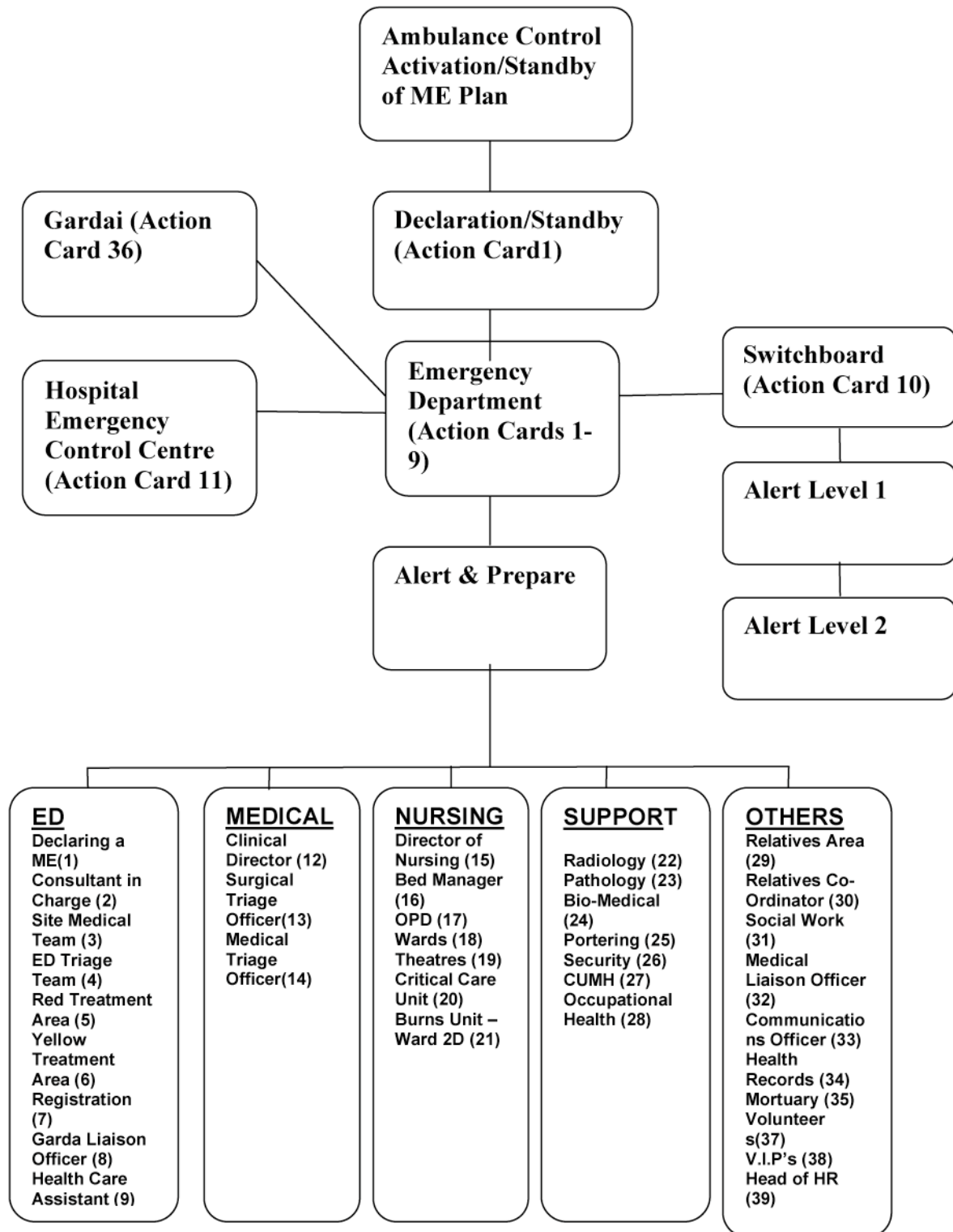
### 5.5 Exercises:

To test communication and the implementation of this Major Emergency Plan exercises may be held without the prior notification of staff. To distinguish an exercise from actual implementation all messages will be prefixed “**EXERCISE**”.

### 5.6 Contact Numbers:

Each Individual Action Card will contain the relevant contact number of the individual named in the card. However these contact numbers will not appear in the CUH Major Emergency Plan Document.

## 5.7 Action Card Chart



## Emergency Department – Declaring a Major Emergency

CLINICAL NURSE MANAGER/NURSE IN CHARGE  
& REGISTRAR/MEDIC IN CHARGE

### FUNCTION/ROLE: To:

- Take the initial Declaration/Standby (METHANE Message) and inform Switchboard
- Commence the ED Alert Procedure
- Prepare the ED to accept casualties.

### ACTIVATION PROCEDURE:

- You will be informed by Ambulance Control.

#### 1. Notes the time of the call and is given the following Information:

- **M** Is the Major emergency on standby or declared?
- **E** Exact location of the incident
- **T** Type of incident (e.g. rail crash/explosion/air crash)
- **H** Hazards (actual and potential)
- **A** Access and egress routes
- **N** Number of casualties (estimate/adult/paediatrics)
- **E** Emergency services present and required

#### 2. Activate the Major Emergency Plan by contacting Switch on **22111** or **22444** in preference to 9 (Switch). Switch will then confirm with Ambulance Control (iron triangle) and start their alert procedures.

#### 3. Commence the alert procedure as follows:

Alert the Emergency Department Medical Director  
**Dr Gerry McCarthy** & Consultant On-Call

Alert the Emergency Department Nurse Service Manager  
**Siobhan Scanlon** who will in turn alert the Director of Nursing

Alert the CNM3 in the Emergency Department  
**Norma O'Sullivan**

Alert the CNM2 and Business Manager for the OPD  
**Margaret McSweeney**, CNM2 (By day – Runner)  
**Breda Chandler**, Business Manager

Alert the Security Officer on duty in the Emergency Department who will in turn alert the Chief Security Officer **Jim Griffin**

Alert the Bed Manager:  
**Anne Keating**

## ACTION CARD

## 1

Alert Bio-Medical Engineering Department

**Ger Flynn**

**Bernard Murphy**

Alert the ED Emergency Response Team:

**Mr Sean Cotter** (Business Manager/Information Manager)

**Ms Nora Twomey** (ED Clinical Facilitator)

**Ms Catherine O'Mahony** (ED, GP Liaison Nurse)

Alert Other ED Staff on Duty (Health Care Assistant on Duty alerts other ED staff in the Department **Reception/Portering/Housekeeping/HealthCare Assistants & Paramedical Staff**).

Alert Emergency Department Radiographer on duty *who will in turn alert*:

DAY: Radiography Services Manager **Catherine O'Neill**/Deputy and the Scheduling Radiographer

NIGHT: Radiography Services Manager **Catherine O'Neill**/Deputy and the 2nd On-Call Radiographer.

4. Ensure there is an Emergency Medical Co-ordinating Officer to assume control in the ED. This person may be the Emergency Department Consultant on call or senior registrar.
5. Nominate and assemble site medical team for dispatch to scene (if required) (**Action Card 3**).
6. Allocate staff to set up and prepare to receive casualties in the following Areas: (**Action Cards 5 & 6**).
  - (a) Red Treatment Area – Resus, Plaster Room, Procedure Room, Cubicles 5, 6, 11, 12
  - (b) Yellow Treatment Area – Remaining 8 cubicles and C.D.U. (12 Beds)
  - (c) Green area – Out Patients Department
  - (d) Triage Area (Ambulance Entrance, ED)
7. Liaise with Bed Management Team to transfer existing patients from ED to either AMU or In-patient Wards.
8. Delegate calling in of Off-Duty Staff to Health Care Assistant or Nurse if no Health Care Assistant is available. Use the Text Messaging Alert System if required (Activation Phone, Shift Leader in the ED)
9. Arrange for Major Emergency Store to be opened, signage erected and Tabards distributed.
10. Additional staff should be directed to the foyer outside the Emergency Department to await allocation.
11. Ensure that the Emergency Department is secured by Security.

## Emergency Department – Consultant in Charge

EMERGENCY DEPT. MEDIC, DIRECTOR/CONSULTANT ON-CALL/  
REGISTRAR/MEDIC IN CHARGE

### FUNCTION/ROLE: To:

- Provide medical direction in the ED
- Work with the Nurse in Charge in preparing the ED for Casualties
- Liaise with all the ME stakeholders within and outside the hospital.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in charge
- Alert level 1.

1. Provide medical direction in the Emergency Department.
  - a. Ensure Emergency Department preparedness.
  - b. Liaise with Nurse Service Manager for the ED.
  - c. Designate/allocate medical and nursing staff within Emergency Department to treatment teams.
  - d. Liaise with dispatched Site Medical Officer and Site Medical Teams.
  - e. Liaise with Hospital Emergency Control Centre.
  - f. Notify Emergency Department in Mercy University Hospital.
  - g. Notify Emergency Department in South Infirmary Victoria University Hospital.
2. Confirm identity and notification of Surgical Triage Officer through switchboard.
3. Confirm identity and notification of Medical Triage Officer through switchboard.

## Site Medical Team

NOMINATED EXPERIENCED DOCTOR AND NURSE FROM THE ED

### FUNCTION/ROLE: To:

- Prepare to respond to a request from the scene of the emergency
- Ensure that you are fully equipped to undertake the task in hand.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in charge
- Alert level 1.

**Be prepared to respond to a request from the HSE Crisis Management Team to provide (a) Site Medical officer and (b) Site Medical Team to go to the scene of an incident.**

**Another team that may be requested from CUH is the Site Surgical Team.**

A **Site Surgical Team** consists of:

An Anesthetic SHO, a surgical SHO and ED Nurse.

A **Site Medical Team** consists of:

One Senior ED Nurse

ED Consultant or senior ED Registrar.

1. Assemble in Emergency Department.
2. Put on Personal Protective Equipment (PPE) – hard hat, eye protection, high visibility suit, and steel toed boots.
3. Take M.I.M.M.S. folder from Major Emergency Store room in ED
4. Take disaster bags and drugs.

THIS TEAM SHOULD BE READY TO DEPART WITHIN 10 MINUTES OF A CALL AMBULANCE OR SECURITY TRANSPORT TO THE SCENE OF THE INCIDENT. (See Appendix F)

Assembly of **subsequent site medical teams** will be determined as required depending on the major incident needs at the site.

Such teams may require to be selected from the hospital network 2 and would be determined in consultation with the Emergency Department Consultant.



**ACTION CARD****3**

5. On arrival at the scene the Site Medical Team should report to the **Site Medical Officer** at the Ambulance Control Point and take direction from him.

**Priority at the scene: Do the most for the most.**

6. Treat casualties along **A**irway, **B**reathing, **C**irculation, **D**isability (**ABCD**) priorities.
7. Do a rapid primary survey on each patient as they arrive at the Casualty Clearing Station.
8. Decide on the priority for treatment and label appropriately with a coloured triage label. Use **TRIAGE SIEVE** to prioritise patients when casualty flow is high. Use **TRIAGE SORT** to prioritise patients when time and resources allow.
9. Ensure each patient is labelled.

**Immediate – red**

**Urgent – yellow**

**Minor – green**

**Expectant – green (endorsed) or blue**

**Dead – white**

10. Your label may not have the “Expectant” category: use the “Delayed” (green) Category and endorse the card expectant, but keep these casualties separate from those with minor injuries.
11. Keep a log and note the time, number and priority of each patient.
12. On completion of specific tasks personnel should report to the Site Medical Officer through the appropriate chain of command for redeployment.

## Emergency Department – Triage Team

NOMINATED EXPERIENCED DOCTOR AND NURSE FROM THE ED

### FUNCTION/ROLE: To:

- Ensure that all casualties are triaged on entering the emergency department
- Ensure appropriate Cruciform is provided for each casualty.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in charge
- Alert level 1.

### Triage Team (1 doctor, 1 nurse)

Triage patients on arrival into appropriate category

RED

Critical-need resuscitation

YELLOW

Serious

GREEN

Minor injuries

WHITE

D.O.A.

1. Apply a numbered wrist bracelet to each patient.
2. Appropriate documentation on major emergency cards.
3. Major emergency stationary to be used in all documentation, e.g. specimen labels, X-Rays, etc.
4. Send patient to appropriate area.
5. Notes, property, etc. to stay with patient.

## Emergency Department – Red Treatment Area

NURSE & DOCTOR TEAMS

### FUNCTION/ROLE: To:

- Prepare your area for the treatment of casualties.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in Charge
- Alert level 1.

### RED AREA

= RESUSCITATION ROOM,  
CUBICLES 5, 6, 11, 12,  
PLASTER, PROCEDURE ROOM  
TOTAL OF 10 RED AREAS

1. Your patients will be critical and need resuscitation.
2. Observe standard precautions (gloves, gowns, goggles etc.)
3. Check resuscitation room equipment and prepare all other red areas.
4. Get 'red area packs' from Major Emergency Store Room to prepare cubicles 5, 6, 11, 12, plaster and procedure rooms.
5. Wait for patients to arrive and attend as required.
6. Ensure Airway, Breathing and Circulation.
7. Ensure labelling and documentation of treatment.
8. If further help is required contact CNM and doctor in charge in Emergency Department.

## Emergency Department – Yellow Treatment Area

NURSE & DOCTOR TEAMS

### **FUNCTION/ROLE:** To:

- Prepare your area for the treatment of casualties.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Emergency Department Nurse/Medic in Charge
- Alert level 1.

**YELLOW AREA** = CUBICLES 1, 2, 3, 4, 7, 8, 9, 10  
CLINICAL DECISIONS UNIT (CDU)  
TOTAL OF 20 IN YELLOW AREA

1. Ensure trolleys are in place.
2. Observe standard precautions (gloves, gowns, goggles etc.)
3. Check general equipment – N.B. Suction, O2
4. Set up drips (Hartmann's etc.)
5. Wait for patients to arrive and attend as required.
6. Ensure Airway, Breathing and Circulation.
7. Ensure labelling and documentation of treatment.
8. If further help is required contact CNM and doctor in charge of Emergency Department.
9. If patients deteriorate contact CNM and doctor in charge of Emergency Department and transfer to red area.

## ACTION CARD

7

## Registration

ADMINISTRATIVE STAFF

### FUNCTION/ROLE: To:

- Ensure that all casualties of a ME are registered on arrival in the emergency department
- Ensure that all information on casualties is collected and proper tracking is put in place.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in Charge
- Alert level 1.

### Action 1:

1. Contact the Grade V Staff Officer **Helen McLoughlin** and Administrative Officers **Don O'Driscoll, Marie Smiddy, Tracy Sorenson**
2. Call in off-duty administrative staff **if required:**
  - All current contact numbers on chart in Major Emergency Folder
  - Do not call in staff due to come in on the next shift.
3. Allocate the following personnel:
  - Triage Point at the Main Ambulance Entrance Red & Yellow patients (Admin # 2)
  - Triage Point Out Patient Department Green Patients (Admin #1)
  - Man the Reception Desk (Admin # 1)
  - Man the Admissions Desk (Admin # 1)

### Action 2:

1. Obtain Major Emergency **Registration Packs** from the Major Incident Store
2. Set up registration points at the Interview Room (ambulance entrance) and OPD
3. Allocate **Registration Pack** to each casualty on entry (this pack must remain with the casualty throughout their stay in the hospital)
4. In order to track casualties of the Major Emergency compile list of Patient details as per the tracking form provided.

### Action 3:

1. Continue provision of Admission & Reception duties at Nurses Station & Main ED Registration Desk.
2. At some stage all patient details will be input to the PIMS system from the manual records that have been collected- a template will be available on PIMS to notify relevant groups - This stage must be agreed with all stakeholders before commencing.

## ACTION CARD 7

### A Major Emergency REGISTRATION PACK will contain the following:

**Medical Records Number (MRN)**, name (denoted by a country i.e. Africa, Africa) DOB (Unknown), Blank ED Chart, 2 identification Bracelets, Radiology Request Cards, Pathology Request documents, Personal Property Envelope (small items) and Personal Property Bag (larger Items, clothes etc).

### CASUALTY DOCUMENTATION AT EMERGENCY DEPT TRIAGE

#### 1. Outline:

To cope with an influx of casualties, and with the possibility of problems in the initial acquisition of personal details, a major emergency manual system of documentation will be invoked using designated MRN's (the Patient Information Management System will not be used in the event of the declaration of a major emergency).

#### 2. Procedure:

At the Emergency Department triage location (ambulance entrance) a numbered wrist bracelet bearing the hospital MRN (Medical Registration Number) will be put on each casualty, and a Registration Pack all bearing the same number will be provided for each casualty. The receptionist will attempt to ascertain additional details but this process will not be to the detriment of the clinical assessment by the Triage Officer and the onward movement of the casualty to the treatment area. The notes, property and any X-ray films must remain with the patient at all times. In order to track casualties of the Major Emergency a list will be compiled of Patient details as per the tracking form provided

#### 3. Supplementary Identification Detail:

It will be accepted as expedient that the unique casualty number will suffice for all identification procedures, pending the acquisition of further personal detail. At successive stages in the process of treatment, staff will check the state of completion of the personal details and attempt to fill in any gaps, reporting all information gained to the Hospital Emergency Control Centre.

The MRN will be used on all documentation and particularly on specimens and request forms for blood transfusion and diagnostic procedures. The MRN **must** be used on forms and specimens as if it were a name and entered in the appropriate space.

#### 4. Routine Emergency Dept. Attendance:

During the time the Hospital Major Emergency Plan is in operation, all casualties received at the hospital whether from the emergency site or not will use the same documentation procedure.

If possible the triage receptionist will annotate the casualty checklist with an indication of any routine admission so that normal documentation procedures can be implemented post-emergency.

## Garda Liaison Officer

GP LIAISON NURSE OR DEPUTY

### FUNCTION/ROLE: To:

- Collect, collate and provide all the necessary information in relation to the casualties
- Liaise directly with the Garda Casualty Bureau and the assigned Guard in the ED.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in charge
- Alert level 1.

1. Collect Garda Liaison Officer tabard and forms from Major Emergency Store Room.
  2. Facilitate in conjunction with the Chief Security Officer the setting up of the Garda Casualty Bureau.
  3. Collect GP Liaison Nurse mobile phone from GP Liaison Nurse's office (top drawer of desk). The Garda Casualty Bureau will communicate with you via this number.
  4. Start information gathering and form filling as soon as casualties arrive. Red, Yellow and Green casualties need to be dealt with giving priority to the red area.
  5. Wait for call from the Garda Casualty Bureau to confirm their arrival. Confirm that the phone and fax numbers given to you are correct and operational.
  6. Transfer information forms to the Garda Casualty Bureau via fax using the secretary's office in the ED as a base and the Fax Machine that is based there.
  7. Regularly liaise with Garda Casualty Bureau- via phone/fax/in person.
  8. Debrief with Garda Casualty Bureau after Major Emergency is stood down.
- **Garda Casualty Bureau will be located in the Meeting & Conference Room in the Cardiac Renal Centre (adjacent to the switchboard)**

## Emergency Department – Health Care Assistant

### **FUNCTION/ROLE:** To:

- Liaise with the Nurse/Medic in charge for assignment of duties
- Inform ED staff of the declaration of the major emergency
- Call in Off Duty staff.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Emergency Department Nurse/Medic in charge
- Alert level 1.

1. Inform Emergency Department Reception/Portering/Housekeeping/Health Care Asst/Paramedical Staff of declaration of Major Emergency.
2. Open Major Emergency Store, locate Signage & Tabards and organise at Nurses station.
3. Call in Off Duty Nursing and Medical Staff and report to Shift Leader when completed.
4. Report back to CNM in charge for further duties.



## ACTION CARD 10

## Switchboard

### FUNCTION/ROLE: To:

- Confirm with Ambulance Control Declaration/Standby of the major emergency
- Activate the plan by alerting all personnel at alert level 1.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in Charge
- Alert level 1.

### STANDBY

1. On being informed by the Nurse in Charge of the ED that the CUH Major Emergency Plan has been put on Standby you will alert the following key personnel (Priority Group)

**Nurse in Charge (Shift Leader) ED**  
**ED CNM 3**  
**ED Coordinator (Registrar/Consultant)**  
**ED Nurse Service Manager**  
**Switchboard Supervisor**  
**Chief Executive Officer**  
**Clinical Director**  
**Director of Nursing**  
**Operations Manager**  
**Services Manager**  
**Information Manager**  
**Emergency Response Rep (ED)**  
**Communications/Press Officer (CUH)**  
**Relatives Coordinator**  
**Bed Manager**  
**Security Manager**  
**Garda Liaison Officer**

Using the following message:

***“This is the Switchboard at Cork University Hospital – the hospital has been put on alert”***

and given the following details if available.

- Type of Emergency
- Place of Emergency
- Estimated number of casualties.

## ACTION CARD 10

### DECLARED

1. On being informed by the Nurse in Charge of the ED that the CUH Major Emergency Plan has been declared you will:
  - a. Confirm the declaration with Ambulance Control (Phone No XXXXXX)
  - b. Activate the CUH Major Emergency Alert procedure (Level 1)

Using the following message:

*“This is the Switchboard at Cork University Hospital –  
The Major Emergency plan has been activated”*

and giving the following details if available

- Type of Emergency
- Place of Emergency
- Estimated number of casualties.

### Alert Level 1

#### 4.2.2 SWITCHBOARD: DAY/NIGHT

Once the Major Emergency has been declared and confirmed the following staff will be alerted immediately by telephone from the Hospital Switchboard.

##### 4.2.2.1 Members of Executive Management Board

- Hospital Coordinator/Clinical Director **Professor Richard Greene** (Action Card 12).
- Chief Executive Officer **Tony McNamara** (Action Card 11)
- Director of Nursing, **Mary Boyd** /Night Superintendent (Action Card 15)
- Consultant Representative on EMB, **Dr Mike Henry**, EMB
- Consultant Representative on EMB, **Dr Michael Clarkson**, EMB.

##### 4.2.2.2 Members of the Management Team (on the Hospital Emergency Control Team)

- Operations Manager, **Jason Kenny** (Action Card 11)
- Services Manager **Marie J. McCarthy** (Action Card 11)
- Acting HR Manager **Nuala Lynch** (Action Card 39)

## ACTION CARD 10

## 4.2.2.3 Other Key Members of Staff

- Medical Triage Officer and Surgical Triage Officer (action Cards 13 & 14)
  - **Consultant Surgeon On-Call/Surgical Registrar On-Call**
  - **Consultant Physician On-Call/Medical Registrar On-Call**
- CUH Blood Bank – **Stephen McGrath** (Action Card 23)
- Laboratory Manager – **Tadgh Hurley** (Action Card 23)
- Portering Services Manager – **Frank Power** (Action Card 25)
- All Other Consultants on Call and then the Surgical On-Call Registrars
- Chaplain on Duty (Roman Catholic & Church of Ireland)
- Chief Engineering Officers **John McDermott/Daniel Clifford**
- Occupational Health Physician **Dr John Gallagher** (Action Card 28)
- Liaison Psychiatrist/On Call –Clinical Director Department of Psychiatry
- Designated Hospitals (Mallow & Bantry Appendix B)
- Major Emergency Plan Information Managers (Action Card 11)
  - **Sean Cotter**
  - **Martina Hutchinson**
- Radiotherapy Services Manager/Deputy **Derry Little** (Action Card 29)
- Acting Switchboard Supervisor **Eamonn Forrest** (Action Card 10)
- Communications Officer **Ber Baker** (Action Card 33)
- Relatives Co-Ordinator **Celia Cronin** (Action Card 30)
- Health Records Department **Ena O'Driscoll** (Action Card 34)
- Social Work Department **Mary Casey** (Action Card 31)
- Medical Liaison Officer **Mike O'Connor** (Action Card 32)
- Mortician **Dan Collins** (Action Card 35).

## Hospital Emergency Control Centre

HOSPITAL EMERGENCY CONTROL CENTRE/GARDA CASUALTY BUREAU/MEDIA ROOM/INFORMATION ROOM/RELATIVES AREA/V.I.P. AREA

### FUNCTION/ROLE: To:

- Act as the command and control of the hospital for the duration of the major emergency
- Manage the response of the hospital to the emergency.

### ACTIVATION PROCEDURE:

- You will be informed by the Switchboard – Alert level 1.

#### 1. Commence Alert procedure as follows:

Other Management Team Members

- **Annemarie Byrne**
- **Terry Kiely**
- **Mike O'Regan**

Business Managers

- **Martine Delaney**
- **Damian McGovern**
- **Geraldine Barry Murphy**
- **Michael Murphy**

Training Officer/Deputy Information Manager

- **Martina Hutchinson**

Who will in turn alert the Information Manager's Team

- **Elaine Cronin**
- **Carmel Nixon**
- **Mairead Goggin**
- **Carole Croke**
- **Margaret Twohig**

#### 2. Set-up the Hospital Emergency Control Centre in the CEO's Boardroom (Cardiac Renal Centre)

This room will house the Hospital Emergency Control Team that will direct and control the Major Emergency. The team should report to the Hospital Emergency Control Centre in the CEO's Boardroom in the Cardiac Renal Centre to take control of the emergency.

#### The Main Functions of the HECT are:

- To manage the response of the hospital to the emergency
- To maintain a status board of hospital activity
- To plan for recovery

ACTION CARD **11**

- To manage Business Continuity
- To liaise with and act under the strategic guidance of the HSE South Crisis Management Team including sending a senior manager to attend the CMT if requested.

Each department is to notify the Hospital Emergency Control Centre when their Action Card is implemented. All requests for additional resources and supplies to be processed through the Hospital Emergency Control Team.

The decision to stand down will be taken in consultation with HSE Crisis Management Team representing the Principal Response Agencies (PRA). The Stand Down notification will be relayed by the Hospital Emergency Control Team via its dedicated e-mail – *cuhmep@hse.ie* – To all staff advising them of stand down in relation to their particular area/department. It should be noted that stand down will not occur simultaneously in every department because of the impact of the major emergency on service delivery.

### Hospital Emergency Control Team (HECT)

- |                           |                                 |
|---------------------------|---------------------------------|
| • Hospital Coordinator    | <b>Professor Richard Greene</b> |
| • Chief Executive Officer | <b>Tony McNamara</b>            |
| • Director of Nursing     | <b>Mary Boyd</b>                |
| • Operations Manager      | <b>Jason Kenny</b>              |
| • Services Manager        | <b>Marie J. McCarthy</b>        |
| • A/HR Manager            | <b>Nuala Lynch</b>              |
| • Communications Officer  | <b>Ber Baker</b>                |
| • Information Manager     | <b>Sean Cotter</b>              |

### Set-up Requirements:

**Telephones:** Use the permanent phone extension **021 4920847** in the CEO's Board Room and one additional phone **021 4234195** from the major emergency store that needs to be plugged into the designated socket (specific instructions on the telephone box).

**Fax Machine:** A Fax Machine **021 4234194** can be found labelled in the major emergency store that needs to be plugged into the designated socket (specific instructions on the Fax Machine Box).

**Emergency Mobile Phones:** Obtain from the Switchboard (located in the cardiac renal centre) **086 7872183 (PIN 7111)**, **086 7872184 (PIN 1849)**

**Information Manager Boards:** Boards and Easels located in the Major emergency store to be set up to assist the HECT in controlling the incident.

## ACTION CARD 11

### 3. Other Hospital Emergency Control Rooms, facilitated by designated Managers

#### RELATIVES AREA

**Radiotherapy Reception Area** will operate as the location for **Relatives** in the immediate aftermath of a major emergency.

**Facilitated by:** Radiotherapy Services Manager, Business Manager & Nurse Service Manager.

**Telephones:** 021 4922492, 021 4921329, 021 4920308  
(at Radiotherapy Reception Desk)

**Fax:** 021 4922498 (at Radiotherapy Reception Desk).

#### MEDIA ROOM

**Main Auditorium** (inside the Main entrance to the hospital) will operate as a location for the **Media** throughout the Major Emergency.

**Facilitated by:** Communications Officer and Information Management Team

**Telephone:** \* 021 4920334  
(Handset in major emergency store specific instructions on box where to plug in phone)

**Fax:** \* 021 4920335  
(Fax Machine in major emergency store, specific instructions on box where to plug in fax).

#### GARDA CASUALTY BUREAU

**Meeting & Conference Room Cardiac Renal Centre (adjacent to switchboard)** will operate as the location for the **Gardai** throughout the Major Emergency.

**Facilitated by:** Chief Security Officer/Garda Liaison Nurse in the Emergency Dept.

**Telephones:** \* 021 4234199 & 4234192 (handsets in major emergency store, specific instructions on the box where to plug in phone)

**Fax:** \* 021 4234198 (Fax Machine in major emergency store specific instructions on the box where to plug in phone).

#### INFORMATION ROOM

**Room directly opposite the CEO's Boardroom** will operate as a base for all information gathered (computer point for hospital systems).

**Facilitated by:** Communications Officer & Information Management Team

**Telephone:** \* 021 4234197 (Handset in major emergency store specific instructions on the box where to plug in phone)

**Fax:** \* 021 4234196 (Fax Machine in major emergency store specific instructions on the box where to plug in fax).

**ACTION CARD 11****V.I.P. AREA**

**Meeting Room on Level 1 of Cork University Maternity Hospital  
(opposite Coffee Bar)**

**Facilitated by:** Communications Officer

**Telephone: 021 4922112**

*\* Available in ME Store in CEO's Board Room in Cardiac Renal Centre, CUH.*

**Major Emergency Store in the CEO's Board Room**

(Key for the Major Emergency Store in Head Porters Office)

**Phone Handsets:**

Seven phone handsets are located in the major emergency store 5 allocated (Control Centre **021 4234195**, Media Room **021 4920334**, Garda Casualty Bureau **021 4234199** & **0214234192** Information Room **021 4234197**) and 2 spare handsets these need to be retrieved and plugged into the designated sockets in each control room (specific instructions on the box where to plug in phone).

**Mobile Phones:**

2 mobile phones (**086 7872183**, **086 7872184**) are located in the Switchboard.

**Radios:**

2 small pocket radios and one standard hospital radio are located in the major emergency store and can be used for listening to bulletins on national and local radio that may provide updates on the incident. (see packs of spare batteries with radios).

**Information Boards:**

4 Information Boards with Easels and markers are located in the Major Emergency Store for use in the Hospital Emergency Control Centre.

**Door Signs:**

Door Signs for Major Emergency designated rooms are located in the Major Emergency Store in the CEO's Boardroom in the Cardiac Renal Centre which are to be erected at the time of the Major Emergency.

**Fax Machines:**

Fax machines for the Hospital Emergency Control Centre **021 4234194**, The Information Room **021 4234194**, the Media Room **021 4920335**, the Garda Team Room **021 4234198** are available in the Major Emer. Store and a 24 hour Fax is available at CUH Switchboard **021 4920345**.

**Internal Telephone Directory:**

A hard copy of the current CUH Internal telephone Directory also stored in the Major Emergency store.

## Clinical Director

### **FUNCTION/ROLE:** To:

- Assume the role of the Hospital Co-Ordinator and act as part of the Hospital Emergency Control Centre.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. Attend the CEO's Boardroom in the Cardiac Renal Centre (Hospital Emergency Control Centre, CUH).
2. Liaise with the Emergency Department Medical Co-Ordinator who assumes control in the ED This person may be the Emergency Department Consultant on call or Senior Registrar.
3. Ensure smooth co-ordination of Medical and Surgical Services throughout the hospital.
4. Liaise with Bed Management on a continuous basis.



## ACTION CARD 13

### Surgical Triage Officer

CONSULTANT SURGEON ON-CALL/SURGICAL REGISTRAR ON-CALL

#### **FUNCTION/ROLE:** To:

- Ensure that surgical services in the hospital are managed appropriately during a major emergency
- Ensure that surgical in-patients in the hospital are managed appropriately during a major emergency.

#### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. Arrange to prioritise ward patients for potential discharge on all surgical wards.
2. Liaise with the Theatre CNM3.
3. Designate operating teams.
4. Appoint a Deputy to oversee activity in theatres and pre-op area. This deputy to keep Surgical Triage Officer informed on all progress.
5. Designate a treatment team if needed to the Emergency Department pre-op areas.
6. Liaise closely with the Medical Director of the ED, the Medical Triage Officer and the Hospital Co-ordinator.
7. Prioritise patients for theatre.

## Medical Triage Officer

CONSULTANT PHYSICIAN ON-CALL/MEDICAL REGISTRAR ON-CALL

### **FUNCTION/ROLE:** To:

- Ensure that medical services in the hospital are managed appropriately during a major emergency
- Ensure that medical in-patients in the hospital are managed appropriately during a major emergency.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. Arrange to prioritise AMU patients for potential discharge or transfer in liaison with the lead physician of the AMU.
2. Arrange to prioritise other ward patients also for potential discharge.
3. Liaise with Bed Manager, Wards and ITU.
4. Appoint a Deputy to oversee activity in medical wards and ITU. This deputy to keep Surgical Triage Officer informed on all progress.
5. Liaise closely with the Medical Director of the ED, Surgical Triage Officer and Hospital Co-ordinator.
6. Prioritise appropriate patients to medical wards and theatres.
7. Designate medical teams to see appropriate “medical” patients.

**ACTION CARD 15**

## Director of Nursing

**FUNCTION/ROLE:** To:

- Assume the role of Nursing Controller for the duration of the Major Emergency and act as part of the Hospital Emergency Control Team.

**ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. The Director of Nursing/Night Superintendant is alerted by the Main Switchboard.
2. Alert the Senior Nursing and Midwifery Team for CUH Campus:
 

<b>Geraldine Keohane</b>	<b>Monica Harrington</b>
<b>Veronica Deane</b>	<b>Betty Hickey</b>
<b>Audrey Moran</b>	<b>Deirdre O'Keeffe</b>
<b>Helen Cahalane</b>	<b>Mary O'Byrne</b>
<b>Grace Reidy</b>	<b>Mary Mills</b>
<b>Mary Flynn</b>	
3. Chief Executive Officer – **Mr Tony McNamara**
4. Mobilise all Wards\* (**Action Card 18**)
5. In respect of all wards other than surgical, CNM2's to allocate as many Nurses as possible to the Emergency Department when requested.
6. Liaise with the Bed Manager regarding all aspects of the Bed situation within the hospital and any plans for transfer of suitable patients to designated supporting hospitals. (At night the Night Superintendant/Nursing Administration will carry out the functions of the Bed Manager).
7. The Night Superintendant/Admissions Office will have the authority to arrange the immediate transfer of suitable patients to supporting hospitals
8. Each supporting hospital will facilitate the transfer by making 10 beds available.
9. All non-emergency admissions should be cancelled until the decision to stand down is taken.
10. Direct Porters/Attendants to report to Supplies Department and H.S.S.D. to distribute supplies requirements to Emergency Department Area.
11. Facilitate the organisation of the Relatives Room in the Radiotherapy Foyer in conjunction with the Radiotherapy Services Manager/Deputy.

\* **Wards will have been notified by Porter (runner) as per action card 25 Alert Level 1**

## Bed Manager

### FUNCTION/ROLE: To:

- Manage the Bed requirements in the event of a Major Emergency
- Liaise closely with the Emergency Department and other key areas.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department – Alert level 1.

### At night the Nursing Administration/Night Superintendent will carry out the functions of the Bed Manager:

1. When alerted by the Emergency Department that the Hospital Major Emergency Plan has been activated, the Bed Manager will alert:
  - **Teresa Wall** Theatre CNM3
  - **Bridget Doyle** ITU CNM 3
  - **Carol O'Mahony** ITU CNM 3 Deputy
2. If there is less than two staff in the Admissions Office, the assistance of a further staff nurse will be required.
3. Bed Manager will be kept informed by the Emergency Department Nurse Service Manager, in so far as possible, as to the number and nature of expected casualties, and thereafter hourly updates on the situation.
4. The Bed Manager will establish the following information:
  - (a) Number of empty beds
  - (b) Number of closed beds
  - (c) Number of anticipated discharges
  - (d) Numbers of prearranged admissions for that day
  - (e) Liaison with other outside hospitals

**ACTION CARD 16**

5. CNM2's will establish from medical staff which elective admissions may be deferred and convey the information to the Bed Management Unit. No elective admission may be allocated a bed without specific permission of the **Bed Manager, who will have the authority to cancel non-urgent electives**, including those that may have already arrived in the Hospital or due to admission in the days immediately following the operation of the Major Emergency Plan.
6. **Bed Manager will establish from each supporting Network Hospital – (see appendix B):**
  - **Number of beds available**
  - **Number of beds to become available that day**
7. All information will be shared with the Director of Nursing, ED Nurse Service Manager and the Hospital Emergency Control Centre.
8. The Bed Manager will arrange, if necessary, the transfer of suitable patients to the designated supporting hospitals and maintain frequent contact with these hospitals as the situation unfolds.
9. When advised by the Hospital Emergency Control Centre the Bed Manager will advise Theatre CNM3, ITU CNM2's and the Health Records Manager.

## Out Patients Department

CLINICAL NURSE MANAGER/BUSINESS MANAGER

### FUNCTION/ROLE: To:

- Prepare the department for Green casualties (walking wounded) from the major emergency
- Prepare the department to house patients transferred out of ED and awaiting a bed up the hospital.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in charge– Alert level 1.

1. Alert all Consultants, Medical and Nursing Staff in the Outpatient Department (if during scheduled clinics).
2. Cancel all Clinics.
3. Liaise with Clerical Supervisor

<b>LEE SUITE</b>	<b>Minor Injuries</b>
<b>DRESSING SUITE</b>	<b>Minor Injuries</b>
<b>BANDON SUITE</b>	<b>Transfers from Emergency Dept</b>

### Evacuate patients via Phlebotomy exit door.

4. Prepare Lee Suite and Dressing Clinic for Minor Injuries:
  - Resuscitation Trolley
  - Portable Oxygen
  - I/V Fluids
  - Dressing Packs
  - Obtain Analgesia from Emergency Department Pharmacy as appropriate.
5. Prepare for transfer of Patients from The Clinical Decision Unit (CDU) in the Emergency Department to in-patient beds on consultation with the Admission Office.
6. Continue to liaise with Emergency Dept.
7. Extra Medical and nursing staff to wait outside Lee Suite for further instructions.

## ACTION CARD 18

## All Wards

CLINICAL NURSE MANAGER/DEPUTY

**FUNCTION/ROLE:** To:

- Identify potential patients for transfer/discharge
- Prepare to receive patients from the Emergency Department
- Arrange transfer of patients to other wards.

**ACTIVATION PROCEDURE:**

- You will be informed by the Portering Department (via Runner) – Alert level 1.

This action plan is devised to establish the framework of response from Wards to a major emergency involving CUH. It is a local extension of the Cork University Hospital Major Emergency Plan. It is the responsibility of staff to familiarise themselves with the general outline of the main plan and framework.

**The Nurse in charge on duty will be informed of the Major Emergency Plan by a Portering Runner.**

The number of staff required within a Ward, during a Major Emergency is, as follows:

- Nurse in Charge
- Deputy Nurse in Charge
- Ward/Care Assistant
- 7 Staff Nurses

**Four Action Cards** are available to provide detailed instructions, covering functional roles and responsibilities pertinent to a specific person, within each Ward. The Action Cards apply to:

1. Nurse in Charge
2. Deputy Nurse in Charge
3. Ward/Care Assistants
4. Relatives/Public Evacuation

**ACTION CARD 1 – NURSE IN CHARGE**

- Liaise with the Consultant/Registrar on-call regarding the number of patients suitable for discharge.
- Inform the Bed Manager of the potential number of available beds, ensuring that the patient in Theatre/Endoscopy/Angio/X-Ray/Radiotherapy/under going elective surgery is accommodated.
- Continue the necessary communication with the Bed Management Unit regarding admissions and discharges.

**ACTION CARD 18**

- Inform all staff on-duty of the current situation and keep them updated.
- Organise staff to transfer all discharged patients promptly, ensuring that the patient is aware of the current situation.
- Direct the Ward Assistant to follow Action Card 3.
- Review all roles as events occur and make the necessary changes.
- Advise the Nurse Service Manager of the number of nurses available to be relocated to other departments in the hospital.

**ACTION CARD 2 – DEPUTY NURSE IN CHARGE**

- Liaise and cooperate fully with the Nurse in Charge.
- Contact CNM2 and Nurse Service Manager.
- Contact off duty Nursing Staff and establish availability for duty. Exclude staff on the next shift.
- Inform Housekeeping staff and Supervisor of the potential number of bed spaces that require cleaning.
- Check with Pharmacy and Controlled Drugs Supplies, and restock as appropriate.
- Inform 1B Reception Staff to transfer/discharge patients on the computer.

**ACTION CARD 3 – WARD/CARE ASSISTANT**

- Liaise with the Nurse in Charge regarding the number of potential admissions.
- Set up the required number of admission trolleys.
- Check the linen and stores supplies and restock as necessary.
- Assist with the dismantling and setting up of beds.
- Restock generally.
- Source equipment/supplies as required.
- Maintain a safe and tidy environment.

**ACTION CARD 4 –RELATIVES/PUBLIC EVACUATION**

- Visitors & Relatives notified by the CNM in charge about the Major Emergency Plan
- Ask Visitors/Relatives to leave via front door (main entrance) using the stairwell where feasible and exiting same at level 1 on the Main Concourse.
- Proceed as normal to Car Park and exit via the Main Entrance (avoiding the Emergency Department).
- Inform Visitors/Relatives that Lifts are prioritised for Patient Transfer.
- In the event of patients being discharged immediately it may be prudent to ask relatives to wait in order to accompany the patient home.



**ACTION CARD 19**

## Theatres

THEATRE SUPERINTENDANT/THEATRE NURSE SERVICE MANAGER

### **FUNCTION/ROLE:** To:

- Ensure that surgery in progress is completed
- Ensure theatre surgical services in the hospital are managed appropriately during a major emergency.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Bed Manager – Alert level 1.

- The Consultant Surgeon On Call or Consultant/Medic in charge in the Emergency Department must keep the Theatre Superintendent/Nurse Service Manager informed of the possible and likely Theatre requirements.
- Access Theatre capacity
- Calling in of Off Duty Staff
- Prepare Theatres for Emergency work
- Routine operating lists should cease as soon as possible to accommodate emergencies.
- Surgeons to be kept informed by the Theatre Superintendent/Nurse Service Manager

## Critical Care Unit

CLINICAL NURSE MANAGER 3/DEPUTY

### FUNCTION/ROLE: To:

- Ensure Intensive Therapy (ITU) services in the hospital are managed appropriately during a major emergency.

### ACTIVATION PROCEDURE:

- You will be informed by the Bed Manager – Alert level 2.

Each ITU/CITU will hold their own specific Action Card to meet the specific requirements of each area in the event of a major emergency.

### INTENSIVE THERAPY UNIT

#### ACTION CARD – NURSE IN CHARGE (OPERATIONAL FOCUS)

- Receives calls from Bed Manager/Night Superintendent.
- Allocate and delegate appropriate action card as an Aide de Memoir.
- Maintain as safe an environment as possible.
- Liaise with Consultant Anaesthetist on-call regarding the number of patients suitable for discharge.
- Inform Bed Management of the potential number of available beds.
- Continue the necessary communication with Bed Management Unit regarding admissions and discharge.
- Inform all staff on duty of the current situation and keep them updated of any changes.
- Delegate nursing staff appropriately, following detailed assessment of patients needs.
- Allocate 1 extra staff nurse to every 2 patients, and direct them to follow Action Card... Extra Staff Nurse
- Organise staff to transfer all discharged patients promptly (Deputy Nurse will communicate with relatives/carers/next of kin, ensuring that the patient is aware of the current situation, and communicate with relatives/next of kin).
- Liaise with Nurse in Charge of respective wards receiving patients, and coordinate transfers.
- Direct Health Care Assistants to Action Card...

**ACTION CARD 20****INTENSIVE THERAPY UNIT****ACTION CARD – DEPUTY NURSE IN CHARGE (CLINICAL FOCUS)**

- Maintain a safe environment.
- Liaise and cooperate with CNM/Nurse in charge.
- Liaise with relatives/next of kin through telephone or direct contact.
- Ask all visitors, and personnel not attached to General ITU to vacate the Unit
- Contact Security Staff to open CNM 3 Office to access direct dial facility.
- Contact Off-Duty Nursing Staff to establish availability for duty. Exclude staff on next shift. Inform them that the Emergency Plan has been activated.
- Contact all staff on the Daily on-call board. Inform them that the Emergency Plan has been activated.
- Inform Housekeeping staff and Supervisor of the potential number of bed spaces that require cleaning.
- Inform Portering and Catering Departments.
- Check with Pharmacy and Controlled Drugs Supplies, and restock as appropriate.

**ACTION CARD – EXTRA STAFF NURSE**

- Maintain a safe environment.
- Liaise and cooperate with CNM/Nurse in charge and Deputy Nurse for assistance and instruction on current situation.
- Assist the allocated staff nurse in preparing the transfer and admission of patients.
- Ensure patient has an identity band secure on wrist/hand.
- Prepare the required drug infusions, manometer sets, drainage sets, CVVHF etc.
- Prepare dressing trays for insertion of CVP, Arterial lines, +/- PICCO, Vascath, Urinary Catheter, +/- Chest Drains, and other lines as advised by Anaesthetists/ Medical Staff.
- Prepare Emergency Intubation Tray, and recheck stock. Liaise with CNM/Nurse in Charge or Deputy re stock shortages.

**ACTION CARD – HEALTH CARE ASSISTANT**

- Maintain a safe environment.
- Check familiarity of unit and assistance required with CNM/Nurse in Charge.
- Liaise with CNM/Nurse in Charge regarding the number of transfers in and out of the Unit.
- Set up bed spaces for admission as appropriate.
- Check Linen store supplies and restock
- Check all supplies and restock. Liaise with CNM/Nurse in Charge
- Update PIMS, and print addressographs as patients are admitted and discharged.
- Update admission book.
- Source equipment/supplies as required.

## Burns Unit Ward 2D

### FUNCTION/ROLE: To:

- Identify potential patients for transfer/discharge
- Prepare to receive patients from the Emergency Department
- Arrange transfer of patients to other wards.

### ACTIVATION PROCEDURE:

- You will be informed by Switchboard – Alert level 1.

2D ward will hold their own specific Action Card to meet the specific requirements of this ward in the event of a major emergency.

### ACTION CARD 1- NURSE IN CHARGE (OPERATIONAL FOCUS)

- Receives calls from switchboard/ Nurse Service Manager/ Evening Superintendent.
- Allocate and delegate appropriate action card as an *Aide de Memoir*.
- Liaise with Haematology and Plastics consultant **on call** regarding the number of patients suitable for discharge.
- Inform Bed Management of the potential number of available beds.
- Continue the necessary communication with Bed Management Department regarding Admissions and Discharges.
- Inform all staff on duty of the current situation and keep them updated of any changes.
- Delegate nursing staff appropriately following detailed assessment of patients' needs.
- Allocate 1 nurse per patient and an extra staff nurse/ care assistant to every 2 patients, and direct them to follow Action Card 3.
- Organise staff to transfer all discharged patients promptly (Deputy Nurse will communicate with relatives/next of kin, ensuring that the patient is aware of current situation, and communicate this with relatives/next of kin.)
- Liaise with Nurse in charge of respective wards receiving patients and coordinate transfers.
- Direct Health Care Assistant to Action Card 4.

**ACTION CARD 21****ACTION CARE 2- DEPUTY NURSE IN CHARGE (CLINICAL FOCUS)**

- Maintain a safe environment.
- Liaise and co-operate with CNM/Nurse in Charge.
- Liaise with relatives/next of kin through telephone or direct contact.
- Ask all visitors and personnel staff not attached to 2D to vacate the unit.
- Contact 'off-duty' nursing staff to establish availability for duty. Exclude staff on the next shift. Inform them that the 'Major Emergency Plan' has been activated.
- Inform housekeeping staff and supervisor of the potential number of bed spaces requiring cleaning.
- Inform Portering and Caterings Departments.
- Check with Pharmacy and Controlled Drugs supplies and restock appropriately.
- Check dressing supplies and contact the H.S.S.D and relevant stores for extra supplies.

**ACTION CARD 3 – EXTRA STAFF NURSE**

- Maintain a safe environment.
- Liaise closely with CNM/ Nurse in charge and Deputy Nurse for assistance and instruction on current situation.
- Assist the allocated staff nurse in preparing the transfer and admission of patients.
- Ensure the patient has an identity band secure on wrist/hand/foot.
- Prepare the required drug and fluid infusions, IV sets, Drainage Sets etc.
- Prepare dressing trays for insertion of CVP, urinary catheter, chest drains and other lines as advised by Anaesthetist/medical staff.
- Prepare Emergency Trolley and recheck stock. Liaise with CNM/Nurse in charge or Deputy Nurse re shortages.

**ACTION CARD 4 – HEALTH CARE ASSISTANT**

- Maintain a safe environment.
- Check familiarity of the unit and assistance required with the CNM/Nurse in charge.
- Liaise with the CNM/Nurse in charge regarding the number of transfers in and out of the unit.
- Set up bed space for admission as appropriate.
- Check linen stores and supplies and restock.
- Check all supplies and restock and liaise with CNM/Nurse in charge.
- Update PIMS, and print addressographs as patients are admitted and discharged.
- Update admission book.
- Source equipment/supplies as required.

## Radiology Department

RADIOGRAPHY SERVICES MANAGER/DEPUTY

### **FUNCTION/ROLE:** To:

- Ensure imaging requests are actioned as efficiently and effectively as possible.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Emergency Department (Health Care Assistant via Radiography Unit in the ED) – Alert level 1.

### **09.00 hours – 17.00 hours (Monday- Friday)**

ED Radiographer alerts:

1. Radiography Service Manager
2. Deputy Radiography Service Manager
3. Scheduling Radiographer.

#### **1. Radiographer Service Manager/Deputy Radiography Service Manager alerts:**

- Director of Radiology
- CNM2
- Off Duty Radiographers
- PACS Clinical Specialist
- RIS Administrator
- Clerical Supervisor.

#### **2. Scheduling Radiographer on being alerted will alert -**

- Radiographers on duty
- Departmental Portering/Housekeeping staff

#### **3. Director of Radiology on being alerted will alert -**

- Consultant Radiologists and Radiology Registrars.

#### **Radiography Service Manager / Deputy -**

- To co-ordinate the evacuation of patients and the deployment of Radiographers.
- Examinations in progress will be completed.
- In-patients will be returned to wards.
- GP referrals to re-arrange appointments, telephoning the department the following day.
- Outpatients to contact the department next day.

#### **Scheduling Radiographer -**

- Assemble X-Ray porters for the evacuation of patients.

#### **Director of Radiology -**

- Will act as Radiology Staff co-ordinator.

## ACTION CARD 22

**Receptionists –**

- All patients to be identified by the number designated by Emergency department.
- Any remaining specialist list to be cancelled and re-arranged.

**Clerical Supervisor –**

- Contact Health Records Manager for back up staff if required.

**Housekeeping Attendant –**

- To ensure adequate stocks of disposable supplies in each x-ray room.
- To top up supplies when necessary.
- To remain in the department and clean floors/x-ray rooms when necessary.

**Porters –**

- To assemble at reception desk.
- To return patients to wards on the instructions of Scheduling Radiographer.
- To remain in the Department and assist with patient transport and lifting, when inpatient evacuation is complete.

**Radiology Support Technician –**

- To arrange top up requirements with stores when necessary.
- Assist Radiographers with Laser Printers as required.

**RADIOLOGY DEPARTMENT****17:00 – 09:00 hours – (NIGHT & ON-CALL)****Radiographer on call for Emergency Department will contact:**

- Radiography Service Manager
- Deputy Radiography Service Manager
- 2nd On-Call Radiographer

**(a) The Radiography Service Manager on being alerted by ED Radiographer will contact the following:**

- Director of Radiology
- Clinical Specialist (Trauma)
- CNM2
- Clinical Specialist PACS
- RIS Administrator
- Clerical Supervisor
- Radiology Support Technicians.

**(b) The Deputy Radiography Service Manager on being alerted by ED Radiographer will contact the following:**

- Superintendent Radiographers x2.
- Clinical Specialist Radiographers & Radiation Safety Officer
- Off duty Radiographers

**(c) 2nd On-Call Radiographer on being alerted by ED Radiographer will contact:**

- All On-Call Radiographers

**(d) Director of Radiology on being alerted by RSM will contact:**

- On-call Consultant Radiologists and On-call Specialist Registrars
- Off Duty Radiologist Consultants & Specialist Registrars.

**(e) PACS Clinical Specialist on being alerted by RSM will contact:**

- PACS Team.

## Pathology Departments

BLOOD BANK/HAEMATOLOGY/BIOCHEMISTRY/MICROBIOLOGY/HISTOPATHOLOGY

### **FUNCTION/ROLE:** To:

- Ensure laboratory requests are actioned as efficiently and effectively as possible.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

## DAY & NIGHT

**On being advised that the CUH Major Emergency Plan is in operation the CUH Blood Bank Medical Scientist will:**

1. Inform the Blood Transfusion Service located at St. Finbarr's Hospital
2. Arrange the immediate delivery of additional blood stock

**On being advised of that the CUH major Emergency Plan is in operation Laboratory Manager Tadgh Hurley or Stephen McGrath or appropriate deputy will:**

1. Alert and cascade the Chief Medical Scientists and appropriate Medical & Scientific Staff.
2. Defer all routine and non emergency work until stand down is declared (if appropriate).
3. Prepare the department as set out in Standard Operating Procedure (MI – C – PAT – EMERPLA & LP – C – BTR – MAJACC).



**ACTION CARD 24**

## Biomedical Engineering Department

**FUNCTION/ROLE:** To:

- Provide whatever assistance is required in the supply of equipment needed in the event of a Major Emergency.

**ACTIVATION PROCEDURE:**

- You will be informed by the Emergency Department – Alert level 1.

1. The following equipment must be sourced for the Emergency Department

- Ventilators
- Syringe Drivers
- Infusion Pumps.

In the event of activation of the Major Emergency Plan the available number of each device listed above may vary. This will be monitored by the Biomedical Engineering Department on a regular basis.

2. The equipment will be set up in the Red Treatment Areas (10 treatment areas) as identified in the Major Emergency Plan (action Card No. 5) as follows:

- Resuscitation Room (4)
- Plaster Room (1)
- Procedure Room (1)
- Cubicle 5 (1)
- Cubicle 6 (1)
- Cubicle 11 (1)
- Cubicle 12 (1).

3. Once all available equipment has been set up in the Emergency Department the Biomedical Engineering department will inform the CNM3 of the equipment that has been set up (See List of Equipment in Appendix J).

4. Provide assistance with the provision of equipment to other areas of the hospital during the emergency as requested.

## Portering Department

PORTERING SERVICES MANAGER/DEPUTY

### FUNCTION/ROLE: To:

- Assist with the movement of patients as required
- Ensure that all portering issues are appropriately managed.

### ACTIVATION PROCEDURE:

- You will be informed by the Switchboard – Alert level 1.

#### 08.00 hours – 20.00 hours

1. Arrange additional Portering Services for:
  - (1) Emergency Department
  - (2) X-Ray Department
  - (3) Theatre
  - (4) Wards.
2. Runner to alert Senior Nurses on Ward Block, GF, Acute Medical Unit, CRC and Main Reception. (Provide Porter Runner with a written message prepared by Switchboard).
3. Alert Housekeeping Services Manager: **Patricia Lee Kiely**
4. Alert Chair of Support Services Board: **Ms. Tricia Diamond**

#### NIGHT PORTER AT MAIN RECEPTION

##### 20.00 hours – 08.00 hours

1. Contact Deputy Portering Service Managers:  
**Eamonn Murphy**  
**John Cahill**  
**Tom Browne**
2. Allocate Portering Services staff as follows:
  - a. Porter on cleaning duties to Theatre – Bleep 586
  - b. Porter on cleaning duties as runner to Ward Block, GF, Acute Medical Unit, CRC, Main Reception
  - c. Porters on ward duties to Emergency Department – Bleep 588, 585, 587
  - d. Porter on (Bleep 599) to X-Ray Dept.
3. Contact Housekeeping Services Manager:  
**Ms. Patricia Lee Kiely**  
**Ms. Ger Creedon**  
**Ms. Breda Kelly**
4. Alert Chair of the Support Services Board: **Ms. Tricia Diamond**

## ACTION CARD 26

## Security Department

CHIEF SECURITY OFFICER / DEPUTY

### FUNCTION/ROLE: To:

- Ensure that access to the hospital is controlled
- Ensure that the hospital is accessible to Emergency vehicles
- Maintain order and provide assistance where necessary.

### ACTIVATION PROCEDURE:

- You will be informed by the Emergency Department Nurse/Medic in Charge
- Alert level 1.

### 08.00 hours – 17.00 hours

On being informed that the CUH Major Emergency Plan has been put into operation the Chief Security Officer/Deputy will:

1. Position and direct Security Officers on-duty to:
  - a. Officer on inside duties to continue on bleep
  - b. 1 Officer to Main Gate (Traffic Control)
  - c. 1 Officer to Main Door/Entrance – direct press, relatives, visitors etc.
  - d. 3 Officers to the ED for crowd/traffic control
  - e. 1 Officer to the Radiotherapy Foyer for relative's control
  - f. 1 Officer on mobile patrols to assist where required
  - g. Other Officers to assist where required.
2. Facilitate in conjunction with the Garda Liaison Nurse, and the Gardai the setting up of the Garda Casualty Bureau.
3. Alert Procurement Department: Manager/Deputies  
**Stephen Lynch**  
**Brian Coughlan**  
**Anthony O' Leary**  
**Louise Hannon (CUH)**
4. Alert Pharmacy Department:  
**Deirdre Lynch** Principal Pharmacist
5. Alert Catering Department:  
**Michael McCarthy** Head of Catering

## ACTION CARD 26

6. Alert HSSD  
**Sheila Leopold** HSSD Manager  
**Carmel Kavanagh** Deputy HSSD Manager.
7. Alert Chief Physicist **Fintan Bradley**
8. Contact and inform the Duty Plumber on **Bleep 452**
9. Direct Security and register Volunteers at main reception (see action card 37)  
Ensure a list of volunteers is retained for the HECT.
10. Ensure staff are transported from Highfield Car Park in conjunction with Sun Cabs if required.
11. Alert Friends of the Hospital Group – **Margaret Canning**
12. Alert Sun Cabs- **Brendan Luddy**
13. Alert Manager Wilton Shopping Centre – **Ambrose Guilfoyle**
14. Liaise with local Gardai on traffic arrangements.
15. Arrange transport of Site Medical Incident Officer and Mobile Medical Team to incident site by Security Transport if Ambulance unavailable – (see appendix F).

### CHIEF SECURITY OFFICER/DEPUTY

17.00 hours – 08.00 hours

1. Instruct that all available officers be contacted and requested to report for duty.
2. One Security Officer to go to help Switchboard in calling in staff, especially Consultants/Registrars. Open Deputy Radiography Service Manager's office.
3. Contact Supplies Officer:  
**Stephen Lynch**  
**Brian Coughlan**  
**Anthony O'Leary**  
**Louise Hannon (CUH)**
4. Alert Pharmacy Department:  
**Deirdre Lynch** Principal Pharmacist.
5. Alert Catering Department:  
**Michael McCarthy** Head of Catering.

## ACTION CARD 26

6. **Alert HSSD Manager**  
**Sheila Leopold** HSSD Manager  
**Carmel Kavanagh** Deputy HSSD Manager.
7. Alert Chief Physicist **Fintan Bradley**
8. Contact and inform the Duty Plumber on **Bleep 452**
9. Direct Security and register Volunteers at main reception (see action card 37)  
 Ensure a list of volunteers is retained for the SEO
10. Ensure staff are transported from Highfield Car Park in conjunction with Sun Cabs if required.
11. Alert Friends of the Hospital Group – **Margaret Canning**
12. Alert Sun Cabs- **Brendan Luddy**
13. Alert Manager Wilton Shopping Centre – **Ambrose Guilfoyle**
14. Liaise with Gardai on traffic and crowd control.

**TRAFFIC CONTROL PLAN:**

1. Only Emergency vehicles will be allowed to turn right towards ED on entering the main gate. Roadway to the ED to be kept clear at all times.
2. Deliveries of Urgent supplies will be allowed turn right at main entrance but will exit from the west.
3. All other vehicles will be directed towards the Main Western car park.
4. All vehicles leaving the complex will do via western side.
5. Cars leaving the North East car park from the (cancelled) OPD Clinics will be directed left on exit towards the Ring Road emerging at the main gate from the west. The Back exit gate may also be used to accommodate and alleviate traffic.

**CROWD CONTROL PLAN:**

1. Only patients will be allowed enter the Emergency Department, all visitors will be directed away from the area.
2. Patients relatives will be accommodated in the Radiotherapy Reception Area.

## ACTION CARD 26

3. The Garda Team will set up a control room located in the Meeting & Conference Room in the Cardiac Renal Centre (adjacent to the switchboard).
4. The CEO's Boardroom in the Cardiac Renal Centre will be reserved for the Hospital Emergency Control Team and an 'Information Room' will be accommodated in the room directly opposite the CEO's Boardroom in the Cardiac Renal Centre.
5. Press/Media will be located in the Main Auditorium.
6. Security Department to provide a manned desk at the Main Hospital Entrance an appropriate signage relating to the Major Emergency.

### SECURITY OFFICERS ON DUTY

**17.00 hours – 08.00 hours and at weekends**

1. Contact Deputy Chief Security Officer:  
**Donal McCarthy**
2. Direct outside Security Officer to Main Gate for traffic control duties.
3. Direct 1 Officer to Emergency Department straight away
4. Alert HSSD staff on duty

HSSD 24 hour service Monday – Friday

Saturday 8am – 8pm

Sunday 8am – 8pm

5. Contact and inform the Duty Plumber on **Bleep 452**.

## ACTION CARD 27

### Cork University Maternity Hospital

DIRECTOR OF MIDWIFERY CUMH/DEPUTY

#### FUNCTION/ROLE: To:

- Ensure that the agreed bed capacity is made available in the event of a major emergency.

#### ACTIVATION PROCEDURE:

- You will be informed by the Director of Nursing – Alert level 2.

- Contact made from CUH to Clinical Midwifery Manager on duty.
- Clinical Midwifery Manager on duty to contact the chair of Division/Directorate.
- Elective work on 4 South to be cancelled.
- 20 bed capacity in 4 South to be freed up in the event of the major emergency plan being activated (10 beds in SFH & 10 beds EH previously).
- Midwifery Manager on duty to contact necessary heads of department i.e. Portering, housekeeping, Noonan's to assist in the freeing up of beds.
- All maternity work will continue as normal.
- Liaise with bed management or Director of Nursing to transfer existing patients from ED to 4 South.
- Additional staff if required to be called in by Clinical Midwifery Manager or team.
- Should women and babies need to be discharged home they will be accommodated in the lounge areas until fathers come to collect them.
- Security can be contacted to be informed of the names of mothers being discharged or taxis called to drive the mother and baby home.

## Occupational Health Department

OCCUPATIONAL HEALTH PHYSICIANS/EMPLOYEE ASSISTANT OFFICERS

### **FUNCTION/ROLE:** To:

- Ensure that the appropriate occupational health and advice is available for staff
- Ensure that staff welfare is paramount.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

This department has established procedures in relation to critical incident stress management for staff, both at the incident site and subsequent debriefing sessions, if indicated.

In the event of a major emergency occurring in the HSE – Southern Area, the following outlines the role of the EAP Service:

1. The Director of EAP or the Senior Employee Assistance Officer (EAO) on duty is informed in the event of a major emergency. In turn the Director of Employment Assistance Programme (EAP) or the senior EAO will contact and inform the other EAOs.
2. The Director will liaise with the Hospital Emergency Control Centre
3. The Director or the Senior EAO will take responsibility for contacting the Critical Incident Stress Management Team (CISM)
4. Depending on the situation, the Director will dispatch team members to designated sites, e.g. – Neutral area near the emergency site if necessary and areas directed by the site officers, i.e. changing rooms, rest rooms or canteen.
5. The EAO's will stay in contact with the Director through mobile phone in relation to the site situation/needs etc.
6. Depending on the emergency, other teams members will be dispatched to:
  - Emergency Department
  - Ambulance Bay
  - X-Ray Department
  - Operating Theatre
  - ITU
  - Canteen.



**ACTION CARD 28****DEFUSING:**

Defusing is a small group discussion about traumatic event

- A Fairly immediate intervention designed to offer support and stabilisation, so those individual trauma workers can cope in the short term.
- Defusing can take place on change of shifts or when indicated. If necessary, defusing teams can rotate to the same site at alternative shifts (team's familiar to staff).

**DEBRIEFING:**

Debriefing is a group meeting/discussion about the traumatic event

- A managed venting of feelings and reactions to a critical incident by those involved. Best practice advises that debriefing is best conducted after a period of 'watchful waiting' (typically 3-4 weeks) if deemed necessary by the Employee Assistance Professionals.
- Typically a specifically trained professional in Critical Incident Stress Management will lead these in a secure and confidential setting.

The EAO's will arrange the following:

- Location (quiet)
- Time (duration approx 2 – 2 ½ hours)
- Group (max 10 per group)
- Communicate to managers.

**The EAO will decide on debriefing with a ripple effect to staff involved in the incident:**

- Ambulance Staff
- Site Medical Team
- Emergency Department Staff
- X-Ray Staff
- Operating Theatre Staff

Critical Incident:

- Any incident / accident which lies outside the normal pattern of human experience, and which would cause a powerful raw emotional response in anyone.

## Relatives Area

RADIOTHERAPY SERVICES MANAGER/BUSINESS MANAGER

### FUNCTION/ROLE: To:

- Provide appropriate accommodation for relatives of the casualties
- Ensure that the relatives of casualties are supported.

### ACTIVATION PROCEDURE:

- You will be informed by Switchboard – Alert level 1.

Use of Radiotherapy Department as the Relatives Area in the event of a Major Incident.

### DAY TIME PLAN (i.e. during core working hours).

1. Contact made with the Radiotherapy Service Manager (RTSM)
  - RTSM to contact other Managers (i.e. Business Manager, CNM 2, Chief Physicist).
2. Each Manager to inform members of their respective teams.
3. Lock Down the Department
  - Contact Security to provide Security Officers for internal & external doors.
4. Close All OPD Clinics and direct patients out of the hospital.
5. Decision to continue with radiotherapy treatment will be made at time of incident
  - If continuing with treatment patients will be directed to the LA3 & LA4 waiting area and will exit through the fire exit door.
  - If treatment is cancelled patients will be directed out of the building.
6. Additional Chairs will be sourced in the conference room, Staff Room and Canteen
7. Relatives will be queued at reception and directed to one of the clinic rooms for details to be taken.
8. Clinic Rooms will be set up as interview rooms to take details from relatives
  - Clinic rooms will be numbered 1-12/13.
  - Template for taking details will be used to collate information (relatives name, patient name, mobile number etc).

**ACTION CARD 29**

9. Direct link with Communications Room and Emergency Room will be established by one of the Managers and a specific contact person should be identified in each area.
10. Contact the Catering Department and Friends of the Hospital to provide Tea & Coffee from the Coffee Bar in the Radiotherapy Outpatient Area.
11. Each Manager take responsibility for one specific area.
12. In the event of the Major Emergency being prolonged there may be a requirement to decant the Relatives Area to another suitable location within the Radiotherapy Department (Conference Room upstairs) or elsewhere on the campus in order for the Radiotherapy service to continue uninterrupted due to the nature of the service that is provided.

**NIGHT TIME PLAN** (i.e. Outside Core working hours).

1. RTSM to contact other Managers (i.e. Business Manager, CNM 2, Chief Physicist).
2. Each Manager to inform members of their respective teams.

Go to Point 3 of Day Time Plan.

## Relatives Co-ordinator

CLINICAL GOVERNANCE MANAGER

### FUNCTION/ROLE: To:

- Ensure that family members are received within the Radiotherapy Reception Area
- Ensure that Family members are supported
- Ensure that communication lines between the hospital and family members are maintained
- Ensure that any queries from family members are addressed in a timely fashion.

### ACTIVATION PROCEDURE:

- You will be informed by Switchboard – Alert level 1.

1. Report to Hospital Emergency Control Centre (main Boardroom) and collect action card No 30.
2. Alert Risk Manager **Deirdre Carey**.
3. Proceed to the Radiotherapy Reception Area and liaise with the Radiotherapy Services Manager and the Business Manager to ensure all preparations are underway for the reception of relatives.
4. Assign a Patient Liaison Officer to the Emergency Department.
5. Ensure all relatives have completed the Relatives inquiry form.
6. Ensure Chaplaincy staff and the Medical Social Work staff are present.
7. Allocate an individual Chaplain/Social Worker to individual relatives.
8. Collate names and enquiries from relatives. Cross reference these with the Garda Liaison Officer and the emergency department tracking lists.
9. Ensure staff and volunteers working in this area have regular breaks.
10. Maintain a log of all persons entering or leaving the area.
11. Monitor all issues relating to relatives.

**ACTION CARD 31**

## Social Work Department

HEAD MEDICAL SOCIAL WORKER

**FUNCTION/ROLE:** To:

- Co-ordinate support and counseling services to relatives
- Assist in discharge planning of casualties with the Emergency Department Team
- Offer support to relatives during process of identification in liaison with Gardai.

**ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

**ACTION**

1. Report to Hospital Emergency Control Centre on activation of the Major Emergency Plan.
2. Instigate Social Work response as per Action Card 30.
3. Call in staff as per in-house sub plan.
4. Assign Social Worker to liaise with Gardai in Relatives Area.
5. Additional Community resources will be sought from the community if required, by the Social Work department.
6. Allocate Social Workers to the following areas:
  - Relatives Area in Radiotherapy
  - To work with discharge teams from the Emergency Department and Discharge Ward
  - To ensure a Medical Social Worker is available to relatives of the deceased who attend the hospital
  - To the switchboard to help in dealing with distressed telephone calls
  - To accompany relatives to the Mortuary
  - To assess and respond to needs of children who present as part of the Major Emergency
  - To assess need for additional Social Work resources and recruit accordingly.

Establish Links with

- Co-ordinator of Volunteers
- Head of Clinical Services
- Discharge Co-Ordinator
- Gardai.

## Medical Liaison Person For Relatives

### **FUNCTION/ROLE:** To:

- Provide medical information and advice to relatives of casualties.

### **ACTIVATION PROCEDURE:**

- You will be informed by Switchboard – Alert level 1.

1. To form part of the team that is designated for looking after the relatives of casualties.
2. Your role will involve talking to the relatives of casualties and providing them with information of a clinical nature in relation to their family members who have been involved in the major emergency.
3. Liaise with the Garda Liaison Nurse and Gardai stationed in the ED.
4. Liaise closely with the Relatives Co-ordinator, the Social Work Team and the Radiotherapy Reception Area team to ensure all relatives are supported in a proper and dignified manner.

**ACTION CARD 33**

## Communications Officer

**FUNCTION/ROLE:** To:

- Ensure all hospital communication tools are in place and functioning
- Ensure in collaboration with the communications department that all media issues are managed during and after a Major Emergency.

**ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. Report to the Hospital Emergency Control Centre and collect action card No. 33 and appropriate tabard.
2. Prepare Press statement as appropriate in conjunction with HECT.
3. Ensure that the Information Room (directly opposite the Boardroom) is set up and ready for functioning.
4. Ensure that the Media Room (Main Auditorium) is set up and ready for functioning and that the media are met and briefed as regards the process in place for dealing with the media.
5. Brief the Switchboard/Information Room and Medical Records on response to the major emergency.
6. Make sure contact is established with the HSE Communications Department.
7. Commence collating as much information as possible regarding the situation/emergency.
8. Arrange in conjunction with the HSE Communications department any press conferences or media briefings.
9. Responsibility for all VIP's that may request to visit the hospital (see also action card 38).
10. Cancel all bookings for rooms used for the Hospital Emergency Control Centre for the next 48 hours.

## Health Records Department

HEALTH RECORDS MANAGER/DEPUTY

### FUNCTION/ROLE: To:

- Manage all incoming calls in relation to the Major Emergency
- Manage all internal calls in relation to patient activity within the hospital.

### ACTIVATION PROCEDURE:

- You will be informed by the Switchboard – Alert level 1.

Health Records and Admissions Staff will deal with all telephone queries from the general public in relation to the casualties and will also undertake internal communications by receiving details of admissions from the Admissions Officer and the Emergency Department.

### The following designated phone numbers will be used in the event of a Major Emergency

021 4922420 - Incoming calls in relation to the ME  
021 4922538 - Incoming calls in relation to the ME  
021 4922871 - Internal Calls in relation to patient activity in the hospital  
021 4922486 - Internal Calls in relation to patient activity in the hospital  
021 4922865 - Spare Phone Line  
021 4920257 - Spare Phone Line

All press enquiries will be dealt with by the Communications Officer, or other designated person.

1. Coordinate all patient data ensuring up to date reports from the Emergency Department.
2. Supervise/liase with Security regarding Volunteers.
3. Alert Senior Managers in Supporting Hospitals:



**ACTION CARD 34**

**Supporting:** The listed hospitals nominated to support the designated hospitals in dealing with casualties from a major accident. Each hospital will make 10 beds available:

St. Mary's Orthopaedic Hospital	Tel: 021 4303264	Fax: 021 4303527
Mercy University Hospital	Tel: 021 4271971	Fax: 021 4276341
South Infirmary/Victoria Hospital	Tel: 021 4926100	Fax: 021 4310153
Military Hill Hospital, Cork	Tel: 021 4514000	Fax: 021 4502666
Cork University Maternity Hospital	Tel: 021 4920500	Fax: 021 4920746
Bons Secours Hospital Cork	Tel: 021 4542807	Fax: 021 4801668
Kerry General Hospital	Tel: 066 7126222	Fax: 066 7126241

**4. Alert VHI SwiftCare Clinic, City Gate, Mahon, Cork. 01 6477758**

VHI SwiftCare Clinic have agreed to take patients (20-30) with Minor injuries that will be in the waiting room of the emergency department at CUH when a major emergency occurs.

Please note that the Clinic Opening hours are from 8 am – 10 pm Monday to Sunday. Also even though the number above is a Dublin number you will be connected straight through to the Cork Clinic.

## Mortuary

### **FUNCTION/ROLE:** To:

- Ensure the process relating to the care of deceased patients from a major emergency is managed appropriately
- Forensic evidence is preserved where appropriate.

### **ACTIVATION PROCEDURE:**

- You will be informed by the Switchboard – Alert level 1.

1. Report to the Hospital emergency Control Centre when you have arrived at the Mortuary. Action Card 35 will be available in the mortuary.
2. Before agreeing to take any deceased casualties from the Major Emergency, approval must be sought in advance from the Hospital Emergency Control Team.
3. Make contact with the HECT /Gardai to identify how many deceased patients are likely to arrive at the Mortuary.
4. With the information provided in 3 above make the necessary arrangement to receive the dead casualties in the Mortuary.
5. Liaise with the Radiology & Pathology Departments as regards the requirements for Forensics work that may be required for each casualty.
6. Establish links with the Coroner's Office to inform them of the situation.
7. Communicate with the Chaplaincy service in the hospital regarding their requirements in relation to the dead casualties.
8. Liaise with the Gardai as regards identification of the Dead casualties.
9. Liaise with the Communications/Press Officer in the hospital as regards media queries relating to the dead casualties.

**ACTION CARD 36**

## Gardai

### GARDA CASUALTY BUREAU

**FUNCTION/ROLE:** To:

- Liaise between the Gardai and the Hospital Emergency Control Centre
- Collate details of all patients arriving as a result of the Major Emergency
- Assist hospital security to monitor access to the site
- Identification of casualties and preservation of forensic Evidence.

**ACTIVATION PROCEDURE:**

- You will be informed by Garda Síochána.

1. Report to Hospital Emergency Control Centre (Main Boardroom) and collect action card No 36.
2. Proceed to the Gardai Casualty Bureau (located in the Meeting & Conference Room in the Cardiac Renal Centre) The ED tutorial room may also be made available to the Gardai if required.
3. Ensure that the Bureau is adequately supplied with Phones, Fax & Copying machine and administrative facilities.
4. The room adjoining to the Garda Casualty Bureau may also be used if required.
5. Ensure the appropriate Garda Documentation is available.
6. Liaise with the Hospital Emergency Control Centre as regards information received from the Incident site, the Emergency Department, and any other medium on the casualties and relatives.
7. Allocate a Garda to the Emergency Department to assist with security and to ensure only casualties are admitted through the Ambulance/Triage entrance (the Psychiatric Waiting Room in the ED at the ambulance entrance will be used as a base for the Gardai while stationed in the ED).
8. Work closely with the Garda Liaison Officer in the ED on all matters relating to the identification of casualties and information gathered on the casualties.
9. Assist security with the control of persons seeking admission to the Hospital.
10. Work closely with the Mortuary in the identification of bodies and the preservation of evidence.
11. Complete documentation as per Gardai requirements.

## Volunteers

### **FUNCTION/ROLE:** To:

- Provide whatever help may be required as delegated by the Hospital Emergency Control Team.

### **ACTIVATION PROCEDURE:**

- You will be informed by Security – Alert level 2.

1. When a Major Emergency has been declared, a Reception Desk at the Main Hospital Entrance will be established by:
  - a. the Duty Security Officer at the hospital main entrance during working hours
  - b. member of reception staff detailed by the Hospital Emergency Control Centre outside working hours.

(For all volunteers offering their services to the hospital: such callers will be thanked for their attendance and advised that only volunteers currently registered with the hospital's Service Department will be brought in, should the need arise i.e. Friends of the Hospital).

2. Volunteer groups will be alerted by security staff and will present themselves to the Main Reception Area where they will be registered by the on-duty security personnel or reception staff at the main desk.
3. Only volunteers currently registered with the hospital's Services department will be called in should the need arise
4. As a matter of routine the Hospital Emergency Control Team will be advised of the availability of volunteers registered with the hospital.
5. If there should be a need for voluntary services, individuals will receive badges (as per the current system for visitors/contractors) with basic details of their name, potential role and wait in the main reception area until the Hospital Emergency Control Centre requires their services.
6. As directed by the Hospital Emergency Control Team the security Officer/receptionist(s) will detail registered volunteers to emergency tasks directing the volunteer to the location in the hospital where they are required. A record will be maintained of volunteers allocated to specific roles.
7. When advised that the hospital is to stand down, the Security Officer/Receptionist(s) will tell any waiting volunteers of the situation and thank them for their attendance.

## ACTION CARD 38

### V.I.P's/Area

COMMUNICATIONS OFFICER

#### FUNCTION/ROLE: To:

– Ensure that V.I.P's including dignatories, politicians, high profile relatives are accorded proper access and privacy as would befit their position.

#### ACTIVATION PROCEDURE:

– You will be informed by the Switchboard – Alert level 1.

1. The Communications/Press Officer for Cork University Hospital will look after everything in relation to V.I.P's.
2. V.I.P's will enter the Hospital via the entrance to the Cork University Maternity Hospital and will be met by the Communications/Press Officer who will facilitate any requests they may have in relation to casualties or staff.
3. A dedicated area for VIP's will be located in the Meeting Room on Level 1 (opposite the Coffee Bar) in the Cork University Maternity Hospital.

## Head of Human Resources

### **FUNCTION/ROLE:** To:

- Keep the Hospital Control Unit informed on all human resources issues.
- Ensure that the most appropriate allocation of staff is made when deployment is requested.
- Ensure that staff welfare is paramount.
- Ensure that debrief, follow up and counseling services information is available for staff.

### **ACTIVATION PROCEDURE:**

- You will be informed by Switchboard that a Major Incident has occurred.

1. Report to Hospital Control Centre.
2. Approve additional Human Resource requirements where needed.
3. Support Line Managers in the replacement of additional staff and where necessary redeployment/reassignment of existing staff.
4. Maintain record of any decisions you have to make.
5. Maintain links with the Hospital Control Centre and the Line Managers re: staffing issues for the duration of the incident.
6. Ensure provision of EAP, Occupational Health and Critical Incident Stress Management Services post the incident.

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

**APPENDIX A****GENERAL INFORMATION ACTION CARD****Applicable to all action card holders and all staff involved in the ME****Function / Role****To:**

- Inform Line Managers and staff of their requirement to fulfill certain duties in the event of a major emergency

**Activation Procedure:**

- This action card should be kept with the Main Department/Area Action Card (see Footer Emergency Plan Document)

**1. Reporting to the Hospital Emergency Control Team**

It is the responsibility of all action card holders to make a status report of their area activities in relation to their area of responsibility. These reports should be made on an hourly basis to the Senior Manager/Information manager in the Emergency Control Centre. If at any time during the plan activation an incident arises which could impede the fulfillment of these functions contact should be made with the Hospital Emergency Control Centre to resolve the issue.

**2. Stand Down**

The decision to stand down will be taken in consultation with HSE Crisis Management Team representing the Principal Response Agencies (PRA). The Stand Down notification will be relayed by the Hospital Emergency Control Team via its dedicated e-mail – [cuhmep@hse.ie](mailto:cuhmep@hse.ie) - to all staff advising them of stand down in relation to their particular area/department. It should be noted that stand down will not occur simultaneously in every Department because of the impact of the major emergency on service delivery.

Co-ordinate stand Down in your area of responsibility only, this should include

- Inform all staff in your area of responsibility
- Thank Staff
- Get up to date information about staffing levels
- Give information on debrief and follow up
- Collect lists of staff on duty for the duration of the incident

**CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN**

It should be noted that activation of Stand Down will not always indicate that the work of the service is complete. In conjunction with your colleagues ensure that there is sufficient staff to manage the expected workload and Stand Down the remaining staff. It may be necessary to leave some staff on duty for a prolonged period. Arrange a shift cycle to ensure that members of staff are not left on duty for an excessive period

### 3. Health & Safety

Standard precautions and Health and Safety standards must be adhered to at all times

### 4. Reporting

Please ensure all actions taken during a Major Emergency are documented, including dates, times, and signatures of staff

Prepare a report and send to the Chairperson (Marie J. McCarthy) of the Major Emergency Planning team for collation within 5 days of the incident

### 5. Employee Assistance (EAP)

This service is available to staff if required during a Major Emergency and the service should be contacted immediately when required.

**Defusing:**

Defusing is a small group discussion about traumatic event

- A Fairly immediate intervention designed to offer support and stabilisation, so those individual trauma workers can cope in the short term
- Defusing can take place on change of shifts or when indicated. If necessary, defusing teams can rotate to the same site at alternative shifts (team's familiar to staff)



## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

## APPENDIX B

## DESIGNATED AND SUPPORTING HOSPITALS

Hospitals are classified into two groups: i.e. Designated and Supporting Hospitals.

**Designated:** Hospitals listed by the Health Services Executive – Southern Area as adequately equipped to receive casualties on a 24-hour basis, able to provide when required, a Site Incident Medical Officer and a Mobile Medical Team, namely:

Cork University Hospital	Tel: 021 4546400 or 4922000 Fax: 021 4920345
Bantry General Hospital	Tel: 027 50133 Fax: 027 51209 (daytime only)
Mallow General Hospital	Tel: 022 21251 Fax: 0211 43110

**Supporting:** The listed hospitals nominated to support the designated hospitals in dealing with casualties from a major accident. Each hospital will make 10 beds available:

St. Mary's Orthopaedic Hospital	Tel: 021 4303264	Fax: 021 4303527
Mercy University Hospital	Tel: 021 4271971	Fax: 021 4276341
South Infirmary/Victoria Hospital	Tel: 021 4926100	Fax: 021 4310153
Military Hill Hospital, Cork	Tel: 021 4514000	Fax: 021 4502666
Cork University Maternity Hospital	Tel: 021 4920500	Fax: 021 4920746
Bons Secours Hospital Cork	Tel: 021 4542807	Fax: 021 4801668
Kerry General Hospital	Tel: 066 7184000	Fax: 066 7126241

**VHI SwiftCare Clinic, City Gate, Mahon, Cork: 01 6477758**

VHI SwiftCare Clinic have agreed to take patients (20-30) with Minor injuries that will be in the waiting room of the emergency department at CUH when a major emergency occurs.

Please note that the Clinic Opening hours are from 8 am – 10 pm Monday to Sunday. Also even though the number above is a Dublin number you will be connected straight through to the Cork Clinic

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

### APPENDIX C

#### COMMUNICATIONS

**The following communications systems are available for priority use during a major emergency:**

- Ambulance Service Radio System linking accident site, ambulances and hospitals.
- Garda Radio System
- Fire Brigade Radio System
- Amateur Radio Emergency Network (AREN)
- Private telephone lines giving direct links between:

**(A)** Garda Headquarters, Anglesea Street, Cork and:

Cork Auto Manual Exchange  
Ambulance Control Centre, Cork  
Emergency Department, Cork University Hospital  
Fire Brigade Headquarters, Cork City  
Army, Southern Command

**(B)** Ambulance Control Centre

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

**APPENDIX D****COMMAND AND CONTROL OF OPERATIONS AT EMERGENCY SITE**

**A Controller of operations shall represent each of the agencies at the emergency site. The overall commence and control of the activities of an organisation shall be vested in that organisations Controller of Operations.**

Normally the controllers of operations at a particular site will be the following individuals:

<b>Garda Siochana:</b>	The Senior Garda at the site
<b>Health Service Executive:</b>	The Senior Ambulance Officer at the Site The Site Medical Incident Officer
<b>Local Authority:</b>	The Senior Fire Brigade Officer at the Site

The Controllers of Operations at the emergency site may agree among themselves on the nomination of one of them to act as a Convenor for co-ordination purposes having regard to the nature and stage of the emergency.

**Identification of key personnel at the scene**

It is essential at the scene of any accident that key personnel and organisations will be easily identifiable to each other. Specific identification should be provided.

Controller of Operations, **An Garda Siochana:** Chequered blue & white over garment labelled

**SITE GARDA CONTROLLER**

Controller of Operations, **HSE South:** Chequered green & white over garment labeled

**SITE AMBULANCE CONTROLLER**

Controller of Operations, **Local Authority:** Chequered Red & White over garment labeled

**SITE FIRE CONTROLLER**

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

**APPENDIX E****FUNCTIONS OF THE HEALTH SERVICES EXECUTIVE SOUTH**

Established voluntary emergency services such as St. John's Ambulance, Red Cross, Order of Malta, and the casualty elements of the Civil Defence will be under the control of the HSE Controller of Operations or HSE CMT. If they are required at the hospital they should be requested by HECT from CMT.

All Health Service Executive – Southern Area services shall carry out their services in accordance with the provisions of the plan. In addition, they shall operate in accordance with their own operations instructions.

**The following functions specifically apply:**

1. Activation of the Plan.
2. Provision of all health services.
3. Provision of medical advice and assistance.
4. Assessment of casualties and determination of priorities for their evacuation.
5. Casualty evacuation and ambulance transport.
6. Certification of the dead and provision of forensic support for the Gardai.
7. Provision of first aid, together with basic life support and treatment at the scene, if required.
8. Provision of hospital treatment.
9. Provision of community, medical and welfare services.
10. Participation in the Co-ordinating Group.
11. Provision of Psychiatric services. In addition to physical injury, many major emergencies can give rise to severe mental health problems among the groups involved, i.e. the casualties, rescue workers and relatives.
12. Major Emergencies and their aftermath may involve many aspects of the Community Welfare and Public Health services. Many people, especially the elderly and disabled, who have never required public assistance, may need help in such circumstances. Directors of Community Care should prepare procedures for their areas to cater for such situations including mobilisation of key public health and community welfare staff and organisations.

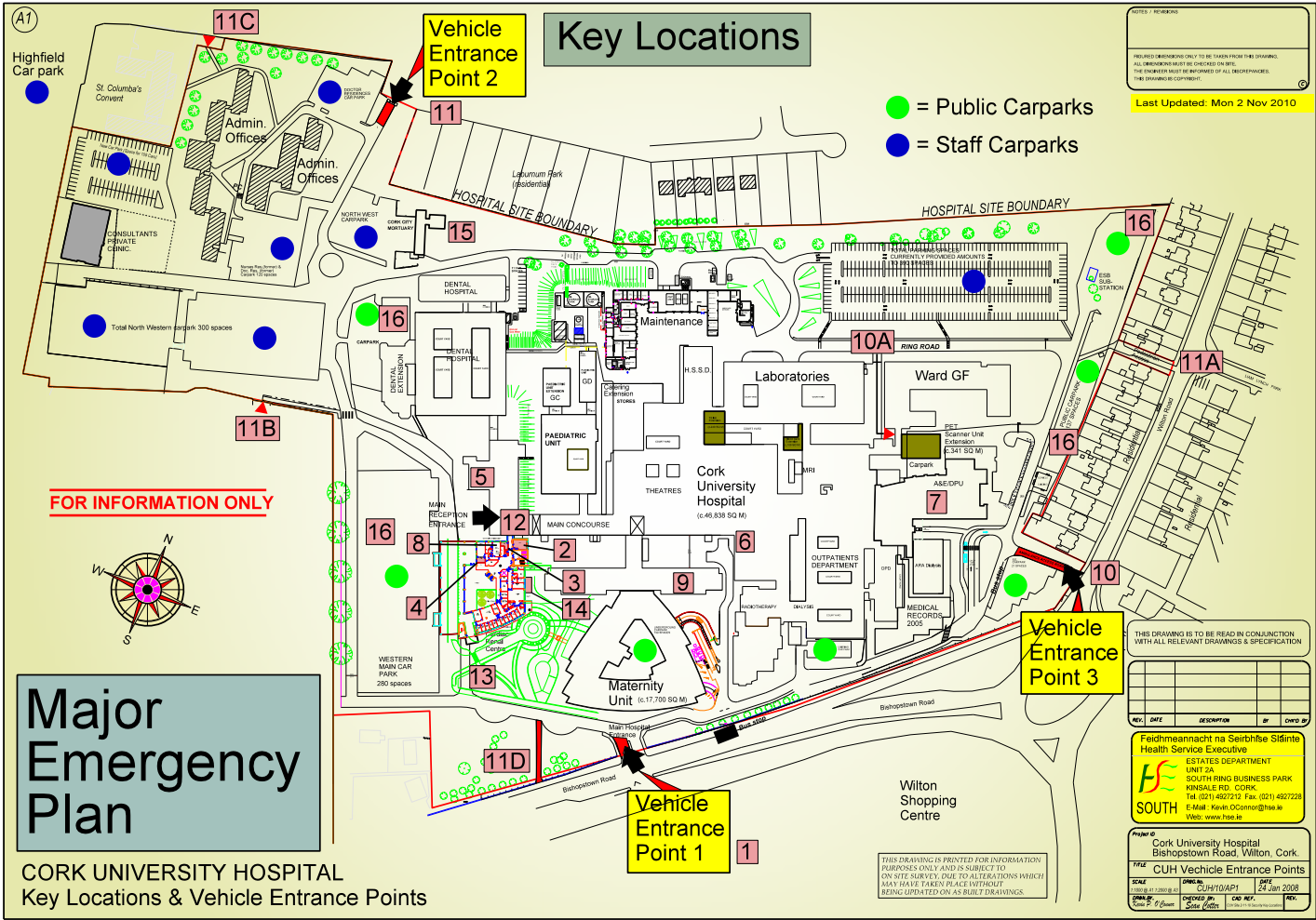
**CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN****APPENDIX F****TRANSPORTATION IN THE EVENT OF A MAJOR EMERGENCY**

- In the event of a major emergency a HSE Ambulance or CUH Security will provide transport for the Acting Site Medical Incident Officer and 1 ED Nurse to transport these staff to the scene of the accident. The Hospital Site Medical Team will also be transferred from the ED to the site of the accident via HSE Ambulance or CUH Security.
- The decision to avail of either Security transport or HSE Ambulance transport for any of the above teams rests with the Ambulance Control at the time of an incident. It will be contingent on the availability of Ambulances and/or Security Jeeps at the time of the major incident.

**The above is agreed with Ambulance Control HSE and CUH Security – March 2007**

## APPENDIX G

## MAP OF CUH – KEY LOCATIONS



## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

Numbers listed on previous page 107 represent the key locations in a Major Emergency. See corresponding locations below.

### **Key Locations CUH Major Emergency Plan**

<b>1. Main Entrance</b>	<b>- Front Gate (Vehicle Entrance Point 1)</b>
<b>2. Hospital Emergency Control Room</b>	<b>- Main Hospital Boardroom (Cardiac Renal Centre)</b>
<b>3. Hospital Emergency Information Room</b>	<b>- Room directly opposite the Main Boardroom (Cardiac Renal Centre)</b>
<b>4. Garda Casualty Bureau</b>	<b>Meeting/ Library Room (Cardiac Renal Centre)</b>
<b>5. Media Centre</b>	<b>- Main Auditorium</b>
<b>6. Relatives Area</b>	<b>- Radiotherapy Foyer</b>
<b>7. Emergency Department</b>	<b>- ED Reception - Ambulance Entrance</b>
<b>8. Switchboard</b>	<b>- Cardiac Renal Centre</b>
<b>9. Main Ward Block</b>	<b>- Ground Floor-5<sup>th</sup> Floor</b>
<b>10. Ambulance Entrance</b>	<b>- Emergency Vehicle Entrance (Vehicle Entrance Point 3)</b>
<b>10a. Ambulance Entrance</b>	<b>- Patient Transfer Entrance (GF Unit)</b>
<b>11. Other Entrance Point</b>	<b>- Back Gate (Vehicle Entrance Point 2)</b>
<b>11a. Other Entrance Point</b>	<b>- Pedestrian Access from Wilton Road</b>
<b>11b. Other Entrance Point</b>	<b>- Pedestrian Access from Bishopstown</b>
<b>11c. Other Entrance Point</b>	<b>- Pedestrian Access From Highfield</b>
<b>11d. Other Entrance Point</b>	<b>- Pedestrian Access Main Entrance</b>
<b>12. Main Reception</b>	<b>- Front Desk</b>

**CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN**

- |  |  |
|--|--|
| <b>13. Cork University Maternity Hospital</b>        | <b>- Ambulance Entrance (Ground Level)</b><br><b>- POD (Main Entrance)</b>                 |
| <b>14. Cardiac Renal Centre (Ambulance Entrance)</b> | <b>- Ground Level</b>  |
| <b>15. City Morgue</b>                               | <b>- City Morgue Car Park</b>  |
| <b>16. Car Parks</b>                                 | <b>- Public</b><br><b>- Staff</b>  |
| <b>17. V.I.P. Area</b>                               | <b>- Meeting Room First Floor (Opposite Coffee Bar) Cork University Maternity Hospital</b> |



## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

### APPENDIX H

#### MEDIA MESSAGE/PARKING

##### Press Release for Major Emergency

###### Public

- The Major Emergency Plan has been put into operation in CUH with effect from (time and date).
- All non-essential visiting in CUH has ceased. Existing visitors are being asked to vacate the hospital now.
- All Outpatient clinics have been postponed until further notice.
- Public car parking will not be allowed on site
- No vehicular access will be permitted to the CUH site except for ambulance and emergency vehicles.
- Relatives of the injured who wish to visit CUH are advised to park in the designated parking area in Wilton Shopping Centre and walk across to the main gate of CUH, where they will be directed to the Relatives reception area in the Radiotherapy Department.

###### Staff

- Please do not phone the hospital. Staff who have been alerted by text are requested to make their way to the hospital.
- Night duty staff are asked not to come into the hospital ahead of their shift start time unless explicitly requested by their Line Manager.
- Off duty staff scheduled for the next shift are requested to report for duty as per their scheduled shift.

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

## APPENDIX i

## MAJOR EMERGENCY TELEPHONE NUMBERS

**Hospital Emergency Control Centre**

Main Boardroom phone number	021 4920847
Major Emergency dedicated phone number	021 4234195
Major Emergency dedicated fax number	021 4234194
Emergency mobile phone number	086 7872183
Emergency mobile phone number	086 7872184

**Information Room**

Major Emergency dedicated phone number	021 4234197
Major Emergency dedicated fax number	021 4234196

**Garda Casualty Bureau**

Major Emergency dedicated phone numbers	021 4234192 021 4234199
Major Emergency dedicated fax number	021 4234198

**Media Room**

Major Emergency dedicated phone number	021 4920334
Major Emergency dedicated fax number	021 4920335

**Relatives Room**

Radiotherapy Reception Desk phone numbers	021 4922492 021 4921329 021 4920308
Radiotherapy Reception Desk fax number	021 4922498

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

### V.I.P Room

Meeting Room Level 1 Cork University Maternity Hospital (CUMH) 021 4922112

### Main Switchboard

Dedicated emergency phone numbers 021 4922111  
021 4922444

Dedicated 24 hour fax number 021 4920345

### Emergency Department

Garda Liaison Officer phone number 087 1235061

Garda Liaison Officer fax number 021 4346130

Shift Leaders phone (text messaging activation Phone) 086 7872227

Nurses Station 021 4920200

Reception Desk 021 4920232

### Health Records Department

Incoming calls in relation to the ME 021 4922420

Incoming calls in relation to the ME 021 4922538

Internal Calls in relation to patient activity in the hospital 021 4922871

Internal Calls in relation to patient activity in the hospital 021 4922486

Spare Phone Line 021 4922865

Spare Phone Line 021 4920257

### Declaration of a Major Emergency

The CUH Major Emergency Plan will be initiated by a call on the **RED TELEPHONE** to the Emergency Department from Ambulance Control on receiving this call the Nurse in charge/Shift

Leader will contact the main hospital switchboard on **22111** or **22444** to inform CUH Switchboard that the MEP is either on standby or operational as appropriate. The Switchboard will confirm this information with ambulance control.

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

### Key Personnel (Priority Group)

Nurse in Charge (Shift Leader) ED	086 7872227
ED CNM 3	087 9904218
ED Coordinator (Registrar/Consultant) Dr. Gerry McCarthy	086 7989712
ED Nurse Service Manager	086 7872209
Switchboard Supervisor	086 7872313
Chief Executive Officer	087 2355295
Clinical Director	087 7986972
Director of Nursing	087 9834469
Operations Manager	087 9683253
Services Manager	087 2951369
Information Manager	086 6032532
Emergency Response Rep (ED) Nora Twomey	087 9935490
Communications/Press Officer (CUH)	086 7872232
Relatives Coordinator	086 7872205
Bed Manager	087 6599466
Security Manager	087 2424897
Garda Liaison Officer	087 8304445

### Major Emergency E-Mail Address

[cuhmep@hse.ie](mailto:cuhmep@hse.ie)

(Account Password User 6789, can be accessed from any PC using webmail)

### TEXT MESSAGING ALERT SYSTEM

The Text Messaging Alert System is activated from the Shift Leaders Mobile Phone in the Emergency Department. It will be used to supplement the Phone alert system as detailed above. Text messages can be sent to Emergency Department staff and a priority list of hospital staff giving them information on the Major Emergency. Local radio will also be used and staff may be asked to listen in to news bulletins on local radio in the event of a major emergency.

### Text Messaging Alert System

Activation Phone (ED Shift Leaders Phone)	086 7872227
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VHI SwiftCare Clinic, City Gate, Mahon, Cork.	01 6477758
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Please note that the Clinic Opening hours are from 8 am – 10 pm Monday to Sunday. Also even though the number above is a Dublin number you will be connected straight through to the Cork Clinic

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

## APPENDIX J

## EQUIPMENT- LOCATION

<b>Phone Handsets x7</b> for Hospital Emergency Control Centre, Media Room, Garda Casualty Bureau and Information Room (inc. 2 spare handsets)	Major Emergency Store CEO's Boardroom
<b>Fax Machines x5</b> for Hospital Emergency Control Centre, Media Room, Garda Casualty Bureau and Information Room plus one spare.	Major Emergency Store CEO's Boardroom
<b>Emergency Mobile Phones x2</b> for Hospital Emergency Control Centre	Main Switchboard
<b>Information Boards x4</b> plus 4 easels and markers	Major Emergency Store CEO's Boardroom
<b>Radio's x3</b> for Hospital Emergency Control Centre (2 pocket & 1 standard with batteries)	Major Emergency Store CEO's Boardroom
<b>Door Signs</b>	Major Emergency Store CEO's Boardroom
<b>Internal Telephone Directory</b>	Major Emergency Store CEO's Boardroom
MEP Document MEP Action Cards (Full set)	Major Emergency Store CEO's Boardroom, Major Emergency Store Emergency Department, Head Porters Office
<b>Personal Protective Equipment</b>	Major Emergency Store Emergency Department
<b>Registration Documentation</b>	Major Emergency Store Emergency Department
<b>Log Books A4 x 7 inc box of biros</b>	Major Emergency Store CEO's Boardroom

## CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

## CUH Biomedical Engineering Department – Major Emergency Plan Equipment

Device	Model	Make	Current Location	Emergency Department Location
Ventilator	LTV 1200	Viasys	GITU	Resuscitation Room
Ventilator	LTV 1200	Viasys	Biomed Workshop HSH	Resuscitation Room
Ventilator	LTV 1200	Viasys	Ward 5B Room 4 (Key for room in Carmel's Office)	Plaster Room
Ventilator	LTV 1200 (MRI Compatible)	Viasys	Ward 5B Room 4 (Key for room in Carmel's Office)	Procedure Room
Ventilator	Oxilog 3000	Drager	Medical Equipment Library	Cubicle 5
Ventilator	Oxilog 3000	Drager	Medical Equipment Library	Cubicle 6
Ventilator	Oxilog 3000	Drager	Biomed Workshop HSH	Cubicle 11
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Plaster Room
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Procedure Room
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Cubicle 5
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Cubicle 6
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Cubicle 11
Infusion Pump	Colleague	Baxter	Medical Equipment Library	Cubicle 12
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Plaster Room
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Procedure Room
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Cubicle 5
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Cubicle 6
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Cubicle 11
Syringe Driver	Perfusor Space	Braun	Medical Equipment Library	Cubicle 12

CORK UNIVERSITY HOSPITAL MAJOR EMERGENCY PLAN

**APPENDIX K**

TEMPLATE FOR SWITCHBOARD PORTER RUNNER MESSAGE



FOR THE ATTENTION OF  
MAIN RECEPTION & WARD BLOCK,  
GF, AMU & CRC.

THIS IS A **HIGH ALERT** MESSAGE TO INFORM  
ALL WARDS THAT THE  
**MAJOR EMERGENCY PLAN**  
IS NOW IN OPERATION FOLLOWING:

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Porter Runner message prepared by CUH Switchboard in the event of a Major Emergency being declared.



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Services Department  
Cork University Hospital  
Tel: 021 4921375



Ospidéal Ollscoile Chorcaí  
Cork University Hospital