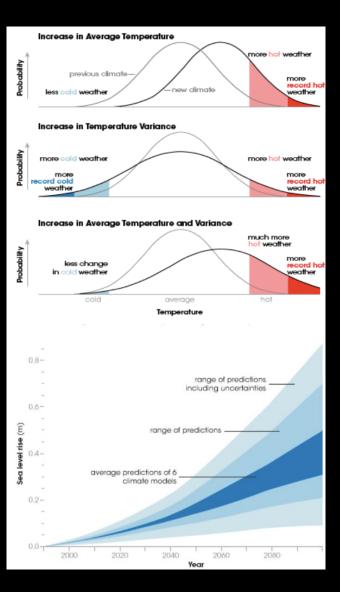


## Climate Change & Disaster Saravana Kumar MD

Joint Secretary - Society for Emergency Medicine,India Head – Emergency Dept & Deputy Head Clinical OPS – Dr Mehtas,Chennai

## Climate Change

## **Climate Change & Disaster**



2 ways

- Increase in weather and climate hazards
- Increase in vulnarability of communities to disasters

# 2100 ↑

## Impact on Health



DECEMBER 1-4,2015,Chennai,India







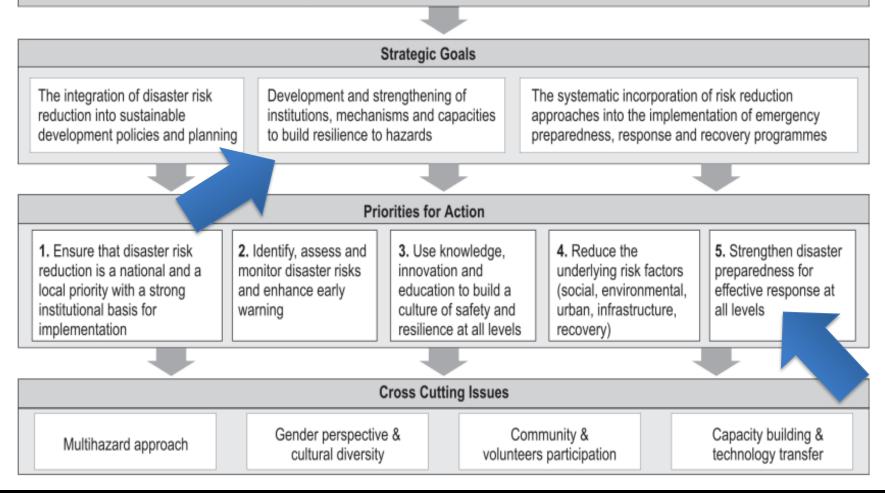






#### Expected Outcome

The substantial reduction of disaster losses, in lives and in the social, economic and environmental assets of communities and countries



International statergy for Disaster Reduction - UN

### Gathering resources and coordination relief





••••• Airtel 10:36 AM (9) Emergency Health Camps Adil, Dev Kanna Matketing, Dr. Dr. Dr.

Medical camps for <u>Dec 10,</u> 2015:

Confirmed camps:

Camp 1:

By SRMC in multiple areas Thandalam, Mugalivakkam, Ramapuram, Vadapalani, Mangadu, Kattupakkam Contact Dr. Koushik -<u>9894678080</u> for further details.

Camp 2: Valluvar kottam signal By mehta Hospital <u>No. 3 thangavel St</u>, gokulam colony <u>11 am</u> Contact Dr. Saravana Kumar -<u>9486668575</u>

ValsaraVakkam By NCC cadets No. 1, 5th cross St, SVS annexe 100 people with food for 150 people <u>11 am</u> Contact - Vamshi <u>9789932559</u>

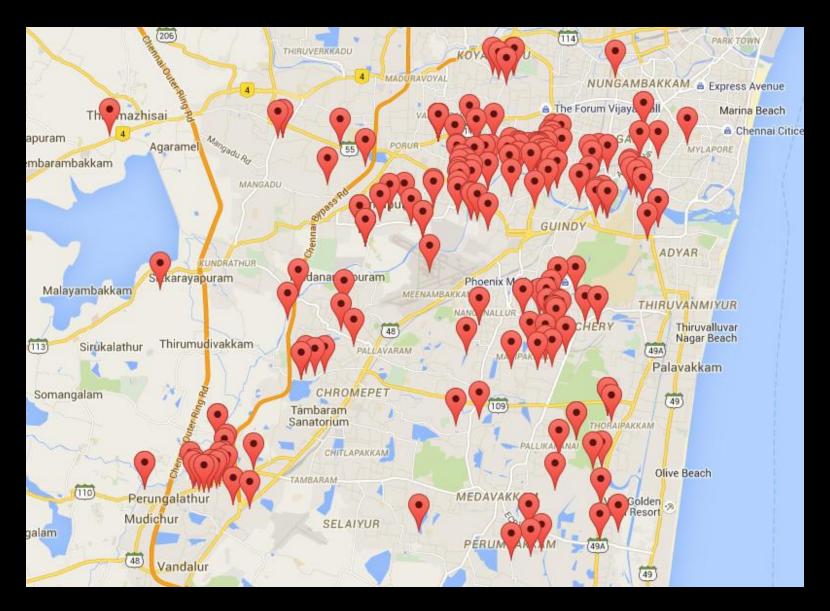
Camp 4: Kolathur By Canstop/ SMF 500 people <u>10 am</u> Contact - Mr. Boobalan <u>9790844132</u>

Camp 5: Tondiarpet PSG IMSR & Hospitals with

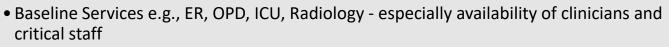




### **Over 150 Camps within 7 days**



## **Flood - Hospital Learning**



- Disruption of ambulance and transport services
- Contact for handling patient inflow from peer hospitals

- Availability of key resources e.g., power, oxygen, diesel, petrol, fresh water
- Plan for Re-location of service areas during emergencies (or close them down)
- Critical support staff availability
- Ensure cover for critical internal and outsourced support services e.g., IT, Lab, Pharmacy, Canteen
- Alternative Communication Protocol

- Water Logging and Seepage, leakage inside Hospital
- Roadside Water and Sewage Back Flow
- Keeping Access Ways from major patients

#### Clinical

#### operational

Infra and

access

## **Flood - Hospital Learning**

- Emergency coordinators contact in each institute
- Emergency response plan that can be tailored and deployed
- Comprehensive list of suppliers of critical services
- Alternative Communication Protocol
- Contacts with NGOs and Volunteer Groups

- Potential Backup Institutes in case of Facility Compromise
- Backup Supply Routes for Key Resources
- Share Key Resources during an Emergency (e.g., clinicians, drugs, diesel)
- Share Best Practices and Risks Rapidly



External

**Best Practices** 

- List of critical contacts within key corporation and emergency services e.g., army, corporation, water, fire
- Regular Communication with Media and Government during crisis
- Leverage other clinician associations e.g., IMA, IAP, SEMI

#### • Thank Friends post Crisis

Plan

# Summary

- Coordination & Management
- Planning, Training and Drills
- Information, Communication and Documentation
- Safety and Security
- Human Resources
- Logistics, Supply and Finance Management
- Continuity of Essential Support Services
- Surge Capacity for Medical Response

## Summary

- Post-Disaster Recovery
- Patient Handling
- Volunteer Involvement and Management
- Area Level Networking of Hospitals
- Coordination and Collaboration with Wider Disaster Preparedness Initiatives
- Hospital Disaster Management Plan

## Thank You