HEALTH ASPECTS OF DISASTER COLLOQUIUM
Flinders University Adelaide
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Key Issues, Questions and Challenges for Disaster Preparedness Australia

David Templeman
MAINSTREAMING DISASTER PREPAREDNESS AS A CRITICAL COMMUNITY AND NATIONAL ISSUE
KEY ISSUES FOR AUSTRALIA

complacency

community engagement

reliance on volunteers

public confidence/expectation

Surge capacity

act on lessons and implementation

plan for recovery—the long haul stuff!

psycho/social aftermath
SOME OF OUR RISKS FOR PREPAREDNESS CAPABILITY

- Federalism
- Current hazards and chasing the political..
  - SARS
  - terrorism
  - pandemic influenza
  - CBR
  - mass gatherings
  - more natural disasters (global warming/climate change)
- Inflexible orgs doing what they do (many stovepipes)
- Reliance on volunteerism
- Complacency
- Community and Industry resilience
- Societal issues (ageing, cultural, urban shift/drift, infrastructure capacity)
‘Katrina won't happen again!!’
Bush  30 August 2006

He promised a "better and more effective response" in the event of another hurricane, saying Katrina exposed government failure at "all levels".

‘Why we are not prepared for mega-disasters and What we can do now?

Australia has sound arrangements and planning—our critical issues would be response and recovery capability and sustainability, combined with a reliance on volunteers. Think of cyclone ‘Larry’s’ impact on Cairns in conjunction with a king tide and storm surge?
THERE ARE NO EXCUSES FOR IGNORANCE

Know the jurisdictional and national arrangements

Who’s in charge?

Redeployment of resources, surge/sustainability

National Security priority but it’s one hazard!

Perception vs Reality
PREPAREDNESS PRIORITIES

• Community expectations
• Publicly available information
• Realistic testing
• Political/media interest
• Holistic view of healthcare

pre-hospital, emergency departments, acute care, nursing facilities, specialist expertise, equipment plus infrastructure, utilities, transport, communications support
CRITICAL ISSUES FOR HEALTH DISASTER MANAGEMENT

primarily borne out in lessons from response

• Hospitals, capacity and skills
• self sufficiency
• surge
• preparedness (planning, training for the unusual)
• incident management procedures (Madrid and London)
• integration/co-ordination
• information management
• range of injuries (spinal/crush/burns/internal/fractures/psycho/trauma)
• ambulatory capacity
NATIONAL COORDINATION NEEDS

‘plans are nothing, planning is everything’ Dwight Eisenhower

• Sound plans with generic focus
• Jurisdictional responsibility and support arrangements
• AHPC, AEMC, NCTC and COAG
• Who’s in charge?
• Realty testing
BIG CONCERNS

Communications

Healthcare System capacity

Pre-hospital care & transport of casualties

People

Business continuity
SUGGESTED IMPROVEMENT MEASURES

- Capability/Preparedness surveys
- National standards
- Research
- Exercising
- Disaster triage hospitals
- Casualty airlift
- More disaster training and education