Spontaneous Implementation of Hospital Emergency Incident Command System (HEICS) during SARS Epidemics.

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摘要

Abstract

Although Taipei City government has requested the emergency response hospitals to implement Hospital Emergency Incident Command System (HEICS) since 2002, the initial evaluation revealed inadequate results last year. After SARS endemics, we re-evaluated the response plans provided by these hospitals to evaluate if the HEICS has been implemented. Of the 53 plans, there were about 51 (96%) that had predictable chain of management, and the average score was 79 points. As to accountability of position function, there were more plans meeting with the criteria than last year (58% v 19%, P<0.01), as the average score was (68+5 v 45+10, P<0.01). There were also more hospitals (n=31; 58% v 13%, P<0.01) containing flexible organizational chart that allowed flexible response, improved documentation of facility and common language to facilitate outside assistance. The individual scores were also significantly higher than last year. Twenty-four hospitals fulfilled the requirements of prioritized response checklists, cost effective emergency planning within health care corporations, and complete governmental requirements. The scores were thus 64, 66 and 64 respectively. The average score was significantly higher in tertiary center than in other hospitals (88+9 vs. 56+12, P<0.001). In summary, there is a trend that the hospitals implemented HEICS into their response plans spontaneously after SARS endemics. It may imply that HEICS can be a good model for disaster response. (Ann Disaster Med. 2003;2:14-19)