Major Incident Response Development in HAHO

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Objectives
1. Strengthen the architecture for incident notification and response
2. Development of Rapid Communication System (RCS) which timely alert to senior officials

Methodology
1. The HA Incident Command and Communication Committee was established with the collaborative effort from 9 stakeholder Departments at HAHO.
2. Within the scope of governance of the committee, the architecture for corporate-wide incident notification, response and contingency measures of various subjects were articulated and strengthened.
3. The list of incidents that would deploy RCS by the 9 HAHO stakeholder Departments were detailed categorized.
4. Contingency plans from stakeholder Departments at HAHO were stocktaken, updated and uploaded to HA Contingency Plans Website by 2Q - 4Q 13/14 accordingly.
5. A simple, mobile and one-shot rapid notification system on a common architecture, namely rapid communication system (RCS) to facilitate speedy notification of critical or media-sensitive incidents had been developed and launched with effective from 29 July 2013. Subject to the nature of the incidents, stakeholder Departments would notify their preset recipient parties via RCS.

Result
1. With the live run of RCS among HAHO, there were total 274 reported incidents via RCS as at 8 January 2015. According to the record from RCS, the frequent users of
RCS included Infection, Emergency & Contingency Department (IEC) (81%); Capital Planning Department (CPD) (7%) and Information Technology Services (ITS) (6%). 2. As reflected in the RCS records, there were 228 reported incidents via RCS with over 75% of incidents reported by the three frequent users’ Departments were within 90 minutes. The time for notification of incident to relevant responder had been improved and demonstrated RCS was easy to use at anywhere and anytime. 3. It was reflected from the incident analysis that timely information from subject officer of stakeholder Departments at HAHO to their responders are vital, especially for incidents involving at cluster or hospital level. Therefore, there may be a need to broaden and widen exchange of information source at cluster or hospital level.