

**Kingdom of Bahrain**  
**Ministry of Health**  
**Standards Emergency & Disaster Preparedness**  
**Updates**

<b>Standards</b>	<b>Current status</b>	<b>Comments</b>
1.1 <i>The organization has policies and procedures on emergency and disaster preparedness.</i>	<b><u>Public Health Directorate(for biological events)</u></b>  The Public Health has policies and procedures on emergency and disaster preparedness.	
1.2 <i>The organization's policies and procedures on emergency and disaster preparedness comply with applicable laws and regulations.</i>	<b><u>Public Health Directorate (for biological events)</u></b>  The Public Health policies and procedures on emergency and disaster preparedness comply with applicable laws and regulations.	
1.4 <i>The organization's includes emergency and disaster preparedness activities in its annual operating budget.</i>	<b><u>Public Health Directorate(for biological events)</u></b>  The Public Health doesn't have a separate budget for the emergency disaster preparedness activities. It is included with the whole Ministry of Health budget. it can be give on emergency basis.	
2.1 <i>The organization has a process to prioritize and respond to memos and warnings from public health and public safety organizations about potential emergencies and disasters.</i>  <b>Guidelines</b> <i>Memos and warnings notify the organization of potential natural disasters including industrial accidents, outbreaks and pandemics.</i>	<b><u>Public Health Directorate(mainly for biological events)</u></b>  Yes, through follow up of WHO Events Site as well as the media and representative of communities in the health council.	

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<p>4.2 <i>The organization works with external partners and the community to develop plans, policies and procedures that integrate responses to emergencies and disasters.</i></p> <p><b>Guidelines</b>  <i>External partners include other health services organizations, the local public health department, suppliers and contractors, community organizations, public safety agencies, public works agencies, municipal representatives, and other government agencies.</i></p>	<p><b><u>Public Health Directorate</u></b></p> <p><b>Public Health works closely through IHR and other sections with external partners and the community to develop plans, policies and procedures that integrate responses to emergencies and disasters.</b>  <b>It was done by the Public Health Directorate in collaboration with</b></p> <ul style="list-style-type: none"> <li>- other stakeholders</li> <li>- other health facilities</li> <li>- WHO</li> <li>- GCC countries</li> </ul>	
<p>4.1 <i>The organization has a multidisciplinary emergency response team with defined roles, responsibilities, and reporting relationships.</i></p> <p><b>Guidelines</b>  <i>Emergency response teams include physicians, nurses, security personnel, and communications personnel.</i></p>	<p><b><u>Public Health Directorate</u></b></p> <p><b>Public Health has a multidisciplinary emergency response team with defined roles, responsibilities, and reporting relationships (for biological events only).</b></p>	
<p>4.2 <i>The emergency response team receives regular training in emergency response.</i></p> <p><b>Guidelines</b>  <i>Training includes advanced first aid (how to sustain life and prevent further injuries), field triage (sort patients into those who need critical attention and immediate medical attention and those with less serious injuries), and the use of altered care standards (conditions under which altered care</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>No regular training in emergency response is done to the Public health teams.</b></p>	

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<p><i>standards are activated, how emergency responders will be notified of the activation, and how to apply altered care standards in the field).</i></p>		
<p><i>5.1 The organization trains and educates all staff, including service providers and senior leaders, on emergency and disaster preparedness upon orientation and annually thereafter.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b>   <b>Not fully implemented.</b></p>	
<p><i>5.2 The organization maintains records on emergency and disaster Preparedness training in its files.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b>   <b>Not fully implemented.</b></p>	
<p><i>5.3 The organization has an up-to-date emergency management manual.</i></p> <p><b>Guidelines</b>  <i>The emergency management manual includes findings of the assessment of possible emergencies and disasters, vulnerabilities, and capacity; the emergency management plan; response and recovery policies and procedures; training modules; and results of exercises, drills and actual events. Organizations with two or more sites use the same or similar emergency management manual.</i></p>	<p><b><u>Public Health Directorate (for biological events)</u></b>   <b>Public Health does not have an up-to-date emergency management manual.</b></p>	
<p><i>5.4 The organization shares the emergency management manual with staff, service providers, and senior leaders.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b>   <b>No</b></p>	

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<p>6.1 <i>The organization conducts a comprehensive risk assessment.</i></p> <p><b>Guidelines</b>  <i>A comprehensive risk assessment identifies: all the possible emergencies and disasters that could impact the organization's ability to provide services, the likelihood of these events occurring; and the consequences of these events.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Public Health does not conduct a comprehensive risk assessment. It was done at the National level through the National Disaster Committee</b></p>	
<p>6.2 <i>The organization's risk assessment includes an analysis of possible emergencies and disasters, the organization's vulnerabilities, and its capacity to withstand these events should they occur.</i></p> <p><b>Guidelines</b>  <i>Emergencies and disasters include a variety of hazardous situations that may occur inside or outside the organization. These include, but are not limited to fire, natural disasters (e.g. floods, earthquakes), industrial accidents (e.g. train derailments), chemical spills, radiation exposure, threats of personal violence, acts of terrorism, and public health emergencies such as outbreaks and pandemics.</i></p> <p><i>Vulnerabilities are conditions that increase the organization's susceptibility to the impact of these events should they occur. Conditions may be physical, social, economic, or environmental. Vulnerabilities can exist within the organization's physical structures, supply chains, utilities, staff, security, training, communication, etc. The vulnerability of an organization determines, in part, the probable effect(s) of an emergency or</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Done through the National Disaster Committee (NDC).</b></p>	

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<p><i>disaster.</i></p> <p><i>By reducing its vulnerability, an organization can lessen the impact. Capacity is the combination of all the strengths and resources available to the organization that can reduce the impact of an emergency or disaster. Capacity may include physical, institutional, social or economic resources; skilled personal; or leadership and management abilities.</i></p> <p><i>In determining capacity, the organization considers the availability of medications, supplies, equipment, personal protective and decontamination equipment, water, fuel, food, beds, linens, and transportation.</i></p>		
<p><i>6.4 The organization prioritizes the identified emergencies and disasters based on their frequency and severity.</i></p> <p><b>Guidelines</b>  <i>Possible emergencies and disasters are prioritized so that organizations can organize their emergency and disaster preparedness activities according to the most important event.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Through the National Disaster Committee (NDC).</b></p>	
<p><i>6.5 The organization annually reviews the risk assessment, and updates it as needed.</i></p> <p><b>Guidelines</b>  <i>Possible emergencies and disasters, vulnerabilities, and capacity may change over time.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Done through the National Disaster Committee (NDC).</b></p>	
<p><i>7.1 The organization has an emergency management plan.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p>	

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	<p>Partial through specific diseases contingency plans          -H5N1          -H1N1plan          -MERS-COV          -Ebola.</p>	
<p>7.2 <i>The organization has policies and procedures for activating and deactivating the plan.</i></p> <p><b>Guidelines</b>  <i>The plan identifies the circumstances under which it is activated and deactivated; the individuals with the authority to activate and deactivate the plan; and how the organization will notify staff, service providers, and senior leaders when the plan is activated and deactivated.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Partial</p>	
<p>7.3 <i>The plan describes how the organization will receive, identify and triage casualties.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Partial for Public Health</p>	
<p>7.4 <i>The plan identifies separate reception and treatment areas for casualties.</i></p> <p><b>Guidelines</b>  <i>The reception area is in close proximity to client services areas and is equipped with emergency or portable auxiliary power. Treatment areas are designated for emergent, acute, ambulatory, near deceased and deceased casualties.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Not Applicable for Public Health</p>	

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<p>7.5 The plan includes policies and procedures for maintaining the organization's critical operations for at least 96 hours.</p> <p><b>Guidelines</b>  Critical operations include communications, resources, security and safety, staff, utilities, and client care. Maintaining critical operations for 96 hours allows time for community resources to mobilize and for support to begin flowing. Procedures can include, but are not limited to maintaining or expanding services; conserving or replenishing resources; limiting services; acquiring additional resources from outside the organization and community; closing the organization to new clients; and evacuation.</p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Not Applicable for Public Health</b></p>	
<p>7.6 The plan describes how the organization will increase security, manage visitors, and control the movement of individuals and vehicles.</p> <p><b>Guidelines</b>  Individuals, particularly clients, are vulnerable during emergencies and disasters. The organization is prepared to protect the safety and security of clients, families, visitors, staff, and service providers.</p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Partial (Public Health arrange for contact screening only)</b></p>	
<p>7.7 The plan includes policies procedures to relocate and evacuate admitted clients.</p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Not applicable for public Health.</b></p>	

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<p><b>Guidelines</b>  <i>Procedures identify the predetermined satellite locations and routes; transportation requirements; discharge protocols; the safe transfer of clients; provisions for the transfer of client records; and agreements with other health service organizations to receive clients. Procedures are activated according to the pre-determined prioritization of clients and their associated staff and service providers.</i></p>		
<p><i>7.8 The plan describes how staff and service providers will be encouraged to report to work and supported while at work.</i></p> <p><b>Guidelines</b>  <i>Staff and service providers may be unwilling to report to work during an emergency or disaster because of fear and concern for themselves and their families. Staff and service providers need support when they are expected to stay at work for long periods of time during an emergency or disaster.</i></p> <p><i>Mechanisms to encourage staff and service providers to report to work and support them while at work can include the provision of essential medications and food; paid time off; housing for family members; financial incentives; and providing support for staff and service providers' dependents, including children, elders, and pets.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>The public Health plan does not include it in the plan but it is done through the National Disaster Committee (NDC).</b></p>	



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<p>7.11 <i>The organization regularly tests the plan with exercises and drills.</i></p> <p><b>Guidelines</b>  <i>Regular testing includes both small- and large-scale drills. A least one type of emergency or one element of the plan is tested quarterly and annual evacuation drills are held for each shift. The organization's leaders encourage as many staff and service providers as possible to participate in testing the plan, and monitor and document participation.</i></p> <p><i>The organization's response to an actual emergency and disaster is also considered a test of the emergency management plan.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Testing the plan is arranged from the Ministry of Health in collaboration with the National Disaster Committee (NDC) i.e., Ebola drills.</p>	
<p>8.1 <i>The organization has a process in place to monitor local, regional, or national emergency alerts and broadcast services for information about emergencies and disasters.</i></p> <p><b>Guidelines</b>  <i>Early notification helps the organization prepare and respond to actual events.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Public Health has a process in place to monitor local, regional, or national emergency alerts and broadcast services for information about emergencies and disasters.</p>	
<p>8.2 <i>The organization has an emergency notification system to inform staff and service providers that the emergency management plan has been activated.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>The emergency notification system to inform staff and service providers that the emergency management plan has been activated is done through the National Disaster Committee (NDC).</p>	

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<p>8.3 <i>The organization trains and educates staff and service providers on the emergency notification system.</i></p> <p><b>Guidelines</b>  <i>Staff and service providers are trained and educated on the standardized codes, their roles and responsibilities, and their obligation to respond rapidly when the emergency management plan is activated.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Education of the staff and service providers on the emergency notification system is done through the National Disaster Committee (NDC).</b></p>	
<p>8.4 <i>The organization regularly tests the emergency notification system.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Testing the emergency notification system is done through the National Disaster Committee (NDC).</b></p>	
<p>9.1 <i>The organization has an emergency management system.</i></p> <p><b>Guidelines</b>  <i>Emergency management systems are an approach to respond to and manage emergencies and disasters. Their purpose is to coordinate services and activities during and after an emergency or disaster. There are different forms of emergency management systems, including the widely used Incident Command System. The incident command system is used to structure activities in five key functional areas: command, operations, planning, logistics, and finance and administration.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Emergency management system is done through the National Disaster Committee (NDC).</b></p>	

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<p>9.2 The emergency management system identifies a central location for managing the organization's emergency response.</p> <p><b>Guidelines</b>  <i>The incident command system refers to this location as the incident command post.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Done through the National Disaster Committee (NDC).</p>	
<p>10.1 The organization has an emergency communication plan.</p> <p><b>Guidelines</b>  <i>The communication plan identifies the essential information and messages that must be sent and received, whom they should communicated to, and how the organization will send communications.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Emergency communication plan is done through the National Disaster Committee (NDC).</p> <p>And at the Public Health level it is done for:  -communicable diseases  - IHR</p>	
<p>10.2 The emergency communication plan includes 24-hour contact information for key internal and external personnel.</p> <p><b>Guidelines</b>  <i>Key internal personnel can include the organization's CEO or president and senior leaders; department heads; and leaders from security, infection control, emergency preparedness, laboratory services, diagnostic imaging, plant services, risk management, communications, information services, pharmacy, ethics, pastoral care, social services. Key external contacts can include public health, fire services, emergency medical services, emergency dispatch/communications centre, police services, regional</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p>Emergency communication plan includes 24-hour contact information for key internal and external personnel is done in Public Health through IHR and communicable diseases.</p>	

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<p><i>laboratories, coroner's office, local or regional emergency response agencies, funeral homes, local, regional, and national health authorities.</i></p>		
<p>10.3 <i>The emergency communication plan includes policies and procedures for sharing client information.</i></p> <p><b>Guidelines</b>  <i>Policies and procedures define what kind of information will be shared (the names of clients being treated, the names of the deceased, and clients' clinical information) and with whom (next of kin and families, emergency services, government agencies, other health service organizations, and the media).</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>The emergency communication plan for Public Health includes policies and procedures for sharing client information.</b></p>	
<p>11.1 <i>The organization maintains a list of structures, equipment, and records that could be damaged during an emergency or disaster.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>The Public Health does not maintains a list of structures, equipment, and records that could be damaged during an emergency or disaster.</b></p>	
<p>11.2 <i>The organization has backup systems for essential utilities and systems.</i></p> <p><b>Guidelines</b>  <i>Essential utilities include electricity, potable water, sterile water, fuel, medical gases and vacuum systems. Essential systems include elevators/escalators; heating, ventilation, and cooling systems; steam for sterilization; communication systems (e.g. telephones, faxes, mobile phones, pagers,</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Not applicable to Public Health</b></p>	

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<p><i>and intercoms); and information systems.</i></p>		
<p><i>11.3 The organization develops policies and procedures for restoring normal operations following an emergency or disaster.</i></p> <p><b>Guidelines</b>  <i>Restoring normal operations includes servicing utilities; renovation or restoration of physical structures; and clean-up, salvage, and waste disposal.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Not applicable to Public Health</b></p>	
<p><i>11.4 The organization develops policies and procedures for replenishing medications, medical and non-medical supplies, and personal protective equipment.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Public Health develops policies and procedures for replenishing medications, medical and non-medical supplies, and personal protective equipment. Partial</b></p>	
<p><i>12.1 The organization provides immediate support services to staff and service providers directly involved in the incident.</i></p> <p><b>Guidelines</b>  <i>Also known as defusing, this is often done informally, sometimes at the scene. Defusing is designed to assist staff and service providers in coping in the short term and address their immediate needs. Defusing reassures staff and service providers that their feelings are normal, tells them what symptoms to watch for and offers them a telephone number where they can reach someone who they can talk to.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Through the National Disaster Committee (NDC).</b></p> <p><b>Partial for Public Health Directorate.</b></p>	

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<p>12.2 <i>The organization has a process in place to debrief staff, service providers, casualties and their families, and the community after the incident.</i></p> <p><b>Guidelines</b> <i>Debriefing is designed to mitigate acute symptoms, assess the need for follow-up, and if possible, provide a sense of closure. Depending on the scope of the emergency or disaster, debriefing could entail a small informal meeting with those involved or something larger such as an open forum with partner organizations and the community. An example of debriefing is the Mitchell Model, a 7-step process which offers structured group discussion for 1 to 10 days post incident.</i></p>	<p><b><u>Public Health Directorate(for biological events)</u></b></p> <p><b>Through the National Disaster Committee (NDC). at low level at public health level.</b></p>	
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