

Adequacy of hospitals in Rome to an unconventional event (CBRNe): TTX simulation and HTA

Abstract

Background: Rome hosts thousands of sensible targets. Healthcare reaction has been guaranteed by 6 advanced Emergency Departments (EDs) and 7 basic ones. Everyday Rome hosts 6 millions of people/die, \pm 2 million in particular occasions.

About National Stockpile Antidotes (SNA), Rome hosts 3 warehouses. In case of events, stockpiles are activated with a long-time call; then stockpiles are charged in delivering trucks.

Methods: Study analyzes PEIMAF (State of emergency plans for massive influx of injures) of advanced EDs in Rome and their adequacy in a possible CBRNe attack. Hypothesis of C/N attack on Saint Peter's Square during Angelus on Wednesday (at 12.00 AM). Analysis of activation of SNA and travel times between SNA warehouse and EDs.

Finding: EDs are chronically undermanned in ordinary conditions already, and would have issues in hosting a very large number of critical patients all at once. Some hospitals do not inform their workers about PEIMAF or they do not consider CBRNe emergencies in their PEIMAF, and even if it has been considered, hardly any simulation/exercitation is ever performed. Furthermore, without a standardize protocol active in the whole city, no cross-hospital organization can be performed.

Conclusion: All data point towards the weakness and fragmentation of actual organizative system. Time of activation and charging are crucials for first aid efficacy and efficiency; a smart call system can reduce the activation time of SNA. A better organization of SNA in major Rome hospitals can reduce delivering time and help save more lives.

Take Home Messages:

All the resilience health strategies, especially when connected to terrorist/CBRNe events, should be managed by the National Government.

The capability to face up these kind of events should be up to time-dependent networks, especially considering those hospitals with medium-high intensity healthcare.



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