

Northwest hospitals unprepared for chemical emergencies

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Many hospitals in the northwest of England are ill-prepared to deal with a major chemical incident. According to a survey published in the online open access journal BMC Emergency Medicine. Two out of 18 hospitals in the region had not written a chemical emergency plan and three A&E departments did not have any staff trained in chemical decontamination.

“It is alarming that two departments lacked a written plan for chemical incidents and a further nine could not access theirs at the time of interview,” notes Mr Darren Walter, who led the research team from the University Hospital of South Manchester. “There could be delays or even failures in contacting appropriate personnel from within and outside the hospital in the majority of hospitals, leading to substandard handling of patients, possibly with unnecessary risks to staff.”

Since October 2005 all UK emergency departments are required by law to provide and maintain chemical decontamination facilities. The survey revealed that whilst all of the Northwest's 18 emergency departments had a designated decontamination area, it was questionable whether some departments could respond appropriately during a chemical incident.

Around 1300 chemical incidents occur in the UK each year, most involving fewer than 10 casualties.

In face-to-face interviews, only 11 of 18 Nurse Managers (or a nominated deputy) said they felt their department had an adequately

equipped decontamination area. For example, although three-quarters of departments had systems to trap water (containing potentially toxic or radioactive substances), 60% had capacity for less than one hour before effluent could enter the regular waste water network.

Only nine departments felt they could maintain patient dignity during decontamination procedures, mostly by using screens.

The study authors call for national guidelines on decontamination facilities and procedures. “There are major gaps in the preparedness of Northwest hospitals for chemical incidents,” says Walter. “Until standards are set and enforced it is likely that these inconsistencies will remain.”

Source: BioMed Central

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