

Regional Consultation of SEAR Member Countries on

Keeping Health Facilities Safe from Disasters

BHUTAN COUNTRY REPORT



Presentation Chronology

- Introduction
- Overview of Hospitals and Health Facilities in Bhutan
- Overview of preparedness at National Level.
- Role of Ministry of Health
- Preparedness in health facilities
- Challenges
- Disaster Risk Reduction.
- Disaster-resilient health facilities.

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Bhutan- Introduction

- ♦ Landlocked, mountainous country in the Himalayan ranges.
- ♦ Area of 38,394 square kilometers
- ♦ High rugged mountains separated by deep gorges and narrow valleys and prone to earthquake (642 events).
- ♦ Torrential rivers fed by glacial lakes (2674)
- ♦ Launch DMD under MoHCA in 2005
- ♦ Endorsed NDRM framework in 2006



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Overview of Hospitals and Health Facilities in Bhutan

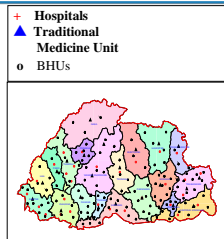
- ♦ We have one national referral hospital, two regional referral hospitals, 26 Hospitals, 176 BHUs and 514 outreach clinics in our country
- ♦ Every district has one hospital and around 3-15 BHUs depending on the size and distribution of the population .
- ♦ In the BHU Level, the primary care services are provided.
- ♦ Subsequently, the secondary cares are provided in the general hospitals and tertiary care in the referral hospitals.
- ♦ We do not have private health facilities

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Overview of Hospitals and Health Facilities in Bhutan

- ♦ Roughly, each BHUs covers 2500-5000 numbers of population and each hospital covers 15,000-20,000 numbers of populations and one referral hospital covers around 6 Districts.
- ♦ No major disaster experienced since 2006



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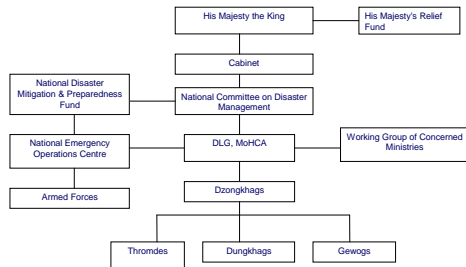
Overview of preparedness at National Level

- ♦ We have National Disaster Risk Management Framework in place and we are working on health sector disaster management plan.
- We have 5 Disaster Management Committee and three Emergency Operation Centre
- It is multi-sectoral approach , MoHCA as a nodal Agency
- Funds shall be made available in the following forms:
 - His Majesty's Relief Fund,
 - Major Disaster Fund and
 - Disaster Mitigation, Prevention and Preparedness Fund.

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Institutional mechanism at the center



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Role of Ministry of Health

- MoH has a major role to play at all levels of DM.
- Since Bhutan has not faced a major Disaster so far, our DM initiatives mainly incorporated into the existing health facilities under DPH & DMS.
- Although EMS was introduced, the EMS concept mainly focused on preparedness plans for trauma management- training of EMTs and other health works.
- Recently, with the Avian Flue Pandemic threat, a National Task Force has been formed and a preparedness plan already drafted.

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Future plan for Preparedness in health facilities

- To establish and maintain a system for dealing with disaster, which is achievable within national resources,
- Emergency preparedness to mitigate loss of lives and to minimize disabilities.
- Institutional responsibility of EMS will fall within the mandate of the health care division.
- Identification of trauma centers, enhancement of physical structures, training of human resource.
- Vulnerabilities assessment of the health infrastructure and to take remedial action.
- Adequate community participation and understanding,

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Future plan of Preparedness in health facilities (role of hospital)

- provides disaster-site medical teams
- receives initial message
- act as co-ordinating hospital
- receives casualties afresh from disaster site
- triages casualties upon arrival
- mass casualty registration
- inpatient care vs outpatient care
- information management
- psychological support

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Challenges

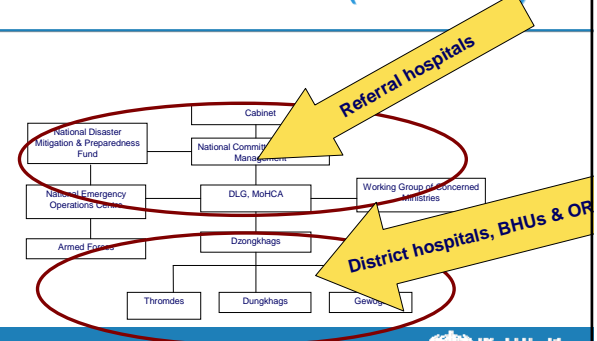
Challenges are :

- Lack of resources
- Competing developmental priorities.
- Lack of multi-sectoral coordination.
- Low technical and organizational capacity across the sectors.
- Poor access to synthesized information on disaster risks and disaster risk management options for policy and decision makers
- Disaster risk management process continues to be largely disconnected from the development process

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Disaster Risk Reduction (coordination)



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Disaster Risk Reduction (Infrastructure)

- ◆ Strengthening Institutional capacity and create awareness on quality assurance/control ongoing.
- ◆ Promotion of awareness of Earthquake vulnerability in the country
- ◆ Unsafe construction practices in rural and satellite towns high.
- ◆ Enforcement of building by laws inadequate but importance noted.

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Disaster-resilient health facilities (Vulnerability assessment for External Disasters)

- ◆ Hazard maps for all hazards (landslides, floods, GLOFS, earthquakes, forest fires) developed further in a prioritized manner.



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Disaster-resilient health facilities (Vulnerability assessment for internal Disasters)

- ◆ National and all regional referral hospital equipped with fire alarm and fire hydrant system.
- ◆ Primary health care facilities equipment with fire extinguishers
- ◆ Study yet to be carried out

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Disaster Risk Reduction

Summary

- ◆ Institutional, legislative and policy frameworks
- ◆ Hazard, vulnerability and risk assessments
- ◆ Disaster Management System
- ◆ Early warning systems
- ◆ Disaster preparedness plans
- ◆ Mitigation & integration of disaster risk reduction in development sectors
- ◆ Public awareness and education
- ◆ Capacity building
- ◆ Communication and transportation

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