Development of an Emergency Response Management using Mobile Devices for Hospital Infrastructures Affected by Power Grid Failures

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ABSTRACT

In the case of a partial or general power blackout in a hospital infrastructure, the most important issue becomes how to secure at maximum the patients’ lives, especially those who are depending on electrical systems. In this paper, a novel web mobile-based evacuation support system has been developed. The proposed solution is consolidated by the improvement of several parameters such as communication quality, prioritization, staffing management and coordination. To evaluate the performance of the proposed solution, real tests were conducted in a hospital. The results showed that the proposed evacuation support system, compared to the classical solutions, is more efficient in terms of the actions execution time reduction and the information quality improvement.

KEYWORDS

Electrical Failure, Evacuation Support System, Hospital Infrastructure, Management, Web-Mobile Application

1. INTRODUCTION

Because of technological advances, our societies have become increasingly vulnerable to critical infrastructures failures, such as power plants, gas distribution, water supply, telecommunication systems, transportation, etc (Chen, Scown, Matthews, Garrett, & Hendrickson, 2009). Indeed, on the one hand, they are more and more dependent on these vital networks and on the other hand, these infrastructures have the tendency to be highly interdependent. Thus, a failure in one of them is capable of influencing negatively on the whole by causing faults in the rest of the infrastructures.

In a modernized world with a growing dependence on interconnected systems that rely on electricity, power reliability is becoming more critical. Since people are extremely dependent on their lifestyle, a power outage is revealed as almost catastrophic. Among the strategic elements in healthcare infrastructures is the electricity. Hospitals require a continuous power supply to keep all their services on alert and to protect the patients whose lives depend on electrical equipment. Nowadays, a power blackout in the electricity network due to natural disasters or high power requirements is a common event that frequently occurs (Bruch, et al., 2011). In fact, a power failure or a malfunction of an electrical transformer or a generator can cause a total paralysis of medical services that usually accommodate many patients in critical situations and under intensive care. Such situation may end up with a disaster like the death of some patients and severe damage in sensitive medications etc.
Despite the increased reliability and the resistance of modern power systems to physical damage, the risks associated with electrical failures remain serious.

Unfortunately, the impact of power outages on health is still poorly understood, and thus, a deeper research effort is essential to prevent and mitigate adverse health effects as mentioned in (Klinger & Owen Landeg, 2014). This paper is interested in the dependency relationship between two life support systems, the hospital infrastructure, and the electricity grid. More precisely, it focuses on the impact of the electrical network failures over the healthcare sector.

Special attention is given to the exceptional event of having a partial or general power failure according to which the hospital has to make a decision about the evacuation of the concerned patients and their medical staff. This decision comes up after the failure of a series of preventive steps and measures such as, the use and the depletion of all existing sources of backup power supply, while the power outage persists and the patients’ situation deteriorate. According to the nature of the occupants, a complete evacuation is the last consideration of healthcare facilities (Kader, 2008). When patients rely on sensitive electrical equipment that provides vital support, they require a certain amount of time and a set of stakeholders to be evacuated from the hospital (Taaffe, Johnson, & Steinman, 2006). The critical point in this emergency is the establishment of an evacuation process management, which insures a good communication between the involved different stakeholders and avoids disorder, panic and time wasting. This idea has been concretized in this paper using pervasive technologies in the evacuation process. In fact, a web application was developed employing stakeholders internet connected devices (mobile, tablet, laptop…).

This research work is organized as follows. In section two, a literature based hospital evacuation is presented. In section three, real cases of power outages in different hospitals around the world are presented and analyzed. In section four, the different parameters causing the hospital’s evacuation process decision are defined. In section five, the evacuation problems following a power outage are identified. Finally, in section six, the proposed system architecture and the related evacuation support model are presented by the authors and described in detail.

2. HOSPITAL EVACUATION LITERATURE

Many incidents are likely to trigger a hospital evacuation. The research works that dealt with this problematic were developed according to the incident nature, such as, hurricane (Taaffe, Johnson, & Steinman, 2006; Tayfur & Taaffe, 2007, 2009; Adalja, et al., 2014), hazardous materials, chemical exposure (Burgess, 1999), fire (Johnson, 2006; De-Ching, et al., 2011), flood (Blaser & Ellison, 1985), bomb threat (Augustine & Schoettmer, 2005), electrical system hazards (Kader, 2008, Vugrin; Verzi, Finley, & Turnquist, 2015) and earthquake (Niwa, Okaya, & Takahashi, 2015; Schultz, Koenig, & Lewis, 2007; Kobes, Helsloot, de Vries, & Post, 2010; Sokhansefat, Delavar, & Banedj-Schafii, 2012; Shi, Ren, & Chen, 2009; Liu, et al., 2013).

A standardized data collection tool was developed in (Rinne, Tillander, & Gronberg, 2010) to record hospital evacuation information in a systematic manner. In (Wabo, Ortenwall, & Khorram-Manesh, 2012), the authors proposed a study to evaluate the need for an evacuation plan in hospitals and how it should be designed by raising many issues. They concluded that the planning must be based on a continuous risk and vulnerability analysis and consisted of good communication, functional logistic and training opportunities. Some hospital evacuation issues and complexities were cited in (Taaffe, Kohl, & Kimbler, 2005). This latter described firstly the issues inherent in planning and evaluation along with the complexities of constructing appropriate models for emergency preparedness and evacuation. Secondly, the authors in (Taaffe, Kohl, & Kimbler, 2005) addressed the evacuation
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