John Hopkins Hospital Case Study

Institution:

Date:

It is evident that hospitals address and respond to disasters and crisis differently. This is normally based on the laid down procedures which are stipulated by the management. In this case, disaster can be termed as any natural incident or accident that may cause harm or damage such as loss of life. A crisis can be termed as an incident or accident triggered by a human being that may risk life. I t is possible for one to stop a crisis before it escalates to a disaster. Ideally, disasters mainly involve natural calamities such as floods, landslides or other human related disasters which may result to loss of life. Profound disaster management strategies are very crucial in hospitals for the safety of the patients. To this extent therefore, this paper seeks to analyze a case study of John Hopkins Hospital on how they respond to disasters and crisis in the hospital. This response was retrieved from a case where a gunman shot the doctor, her mother and finally killing himself inside the hospital's premises. The case study will give a comprehensive analysis of the hospital setting, the disaster and the crisis, assessment of the scene capabilities, evaluation of the outcomes and challenges hindering quick response and suggested resolutions to the challenges.

Analysis of the Hospital setting

Johns Hopkins Hospital was founded back in 1889 to aid in medical teaching. The hospital is located in Maryland in the United States of America. The hospital offers quality services to the patients and has been ranked as one of the best hospitals in the world. The hospitals' main mission is to enhance and improve the health of people in the entire world through the provision of better health services through research, raising scientists and medics, treating diseases and research. The hospital offers the best health services in the United states of America. It is considered as one of the best teaching and referral hospital in America.(Tadros & Kiefer, 2017).

Analysis of the hospital disaster and crisis

The hospital is very well organized in the way they respond to disasters and crisis that may occur within their premise. They have an office that mainly specializes in preparedness of critical events and how to respond to such events in the hospital. The Critical Event Preparedness and Response (CEPAR) was founded with an objective of overseeing all medical preparedness in the Hospital. For instance, in a scenario where there is an alarming incident related to health care, the office operates as the command Centre to ensure that the issue has been resolved or responded to as quickly as possible. Ideally, the office coordinates all the activities and the resources of the Hopkin and contacts other disaster management teams such as the local, state and the federal governments that help in responding to disasters. The office was formed as a result of a combination of efforts between Hopkins Medicine and APL. APL is a body that mainly operates as the system engineer to stipulate all the models of operations used by the office of Critical Events Preparedness and Response. It is interesting to note how John Hopkins hospital deals with crisis within their premises. They have a good reputation on treating their patients in the best way possible which attracts many students and patients in the hospital. Ideally, the hospital is committed to ensure that the patients are accorded the safety that they deserve.

The idea of establishing CEPAR was introduced to the Executive Committee of Hopkins by the president of Hopkins University back in 2001 as criteria to enhance the response to any disaster or casualty in their institutions. The president introduced various Committees such as Mass Casualties Task Force (MCTF) to come up with a plan on how Hopkins could help in maintaining homeland security. This resulted to total dedication and commitment in disaster response thus officially launching of CEPAR in July 2002.

Apparently, the office was put to the test when a young man with a gunshot shot the doctor and wounded him seriously, shot and killed his mother who was a patient at the hospital and finally shot himself. This was a blow to the hospital since questions were raised about the security they offer to the patients. The young man injured Doctor David Cohen who is a specialist surgery of the spine, osteoporosis, and scoliosis. However, the Critical Event Preparedness and Response Office managed to call the responsible agencies as soon as possible to calm the matter. Unfortunately, they found that the man had already killed himself and the mother. The main reason that triggered the young man identified as David to act in that manner is that he was angered by the way the mother was paralyzed in the hospital. It is paramount that the hospital reputation was ruined by this event since there were numerous questions about how the young man managed to enter the hospital premises with a gun (Tadros & Kiefer, 2017).

Assessment of location capabilities

The Hopkins hospital has achieved a lot as far as the response to disasters is concerned. The Office of Critical Events Preparedness and Response has managed to initiate the growth and implementation of policies that help protect all the employees of the Hospital and all the patients admitted in the hospital. CEPAR has also come up with a database that allows cataloging all the staff, services and resources of the Hospital. Basically, this database will be used at all times when a crisis occurs to ensure that resources are used efficiently and effectively.

A friendly and reliable communication system has been developed to ensure that there is a smooth flow of information between different departments in the hospital. The private numbers for crucial parties and personnel in the security department have been identified to ease communication in case of any disaster. Apparently, if the communication system in an Organization, school, or hospital is well implemented, the risk of catastrophe is reduced since the security forces are always alert and prepared to respond to any crisis. For instance, if the security forces screened David and confined the firearm, the damage could not have occurred (Qari, Yusuf, Groseclose, Leinhos & Carbone, 2018).

Evaluation of response challenges and outcomes

There are various challenges that CEPAR face as they respond to disasters and other casualties in the hospitals. The mission of the office is to ensure that they develop and put into practice a model infrastructure for effective and efficient preparedness for perilous events that need quick medical response, create a plan that incorporates other agencies that fight disaster such as local and federal government, and create a disaster model that can fit major metropolitan areas worldwide. However, the main challenges are the effectiveness of these agencies. The office must be committed to work with these agencies such as the local and federal governments but fail in how they respond to the casualties. It is paramount many injuries and disasters, especially in hospitals, require a quick and immediate response. The police from the local and federal government may take hours before getting to the scene. This is a very dangerous cause it gives a space for more damages which could have been stopped if the response team was immediate.

The other primary challenge is the major challenge is an inadequate screening of firearms in the hospital. It is disturbing that David managed to access the hospital premises with a gun without the concerned agencies noticing. The security personnel should always ensure that they screen all individuals visiting the hospital. No one should be allowed to get into the hospital premises with a firearm or any other weapon that can be harmful to patients. It is unfortunate that many hospitals do not have viable strategies and policies that help in disaster preparedness and response. This may be triggered by inadequate resources thus not deploying enough security guards(Tadros & Kiefer, 2017).

It is paramount that most people disrespect already laid down laws, rules, and regulations. This can also be a major challenge to disaster response, especially in Hopkins hospital. For instance, David decided to carry the firearm in the ward whereas he knew very well that it is not allowed. This is disobedient and disrespecting the rules and regulations of the hospital. It is evident that if society can have people who follow the rules and regulations, the world can be a very comfortable place to be. Unfortunately, there is a great number of people who always do or behave contrary to the law(Qari, Yusuf, Groseclose, Leinhos & Carbone, 2018).

Lack of public sensitization and education is also a significant challenge to disaster response in this case. Citizens should always be sensitized on what to do, how to behave and who to alert in case of any disaster or casualty in the hospitals. It is recommendable and advisable to invest in internal security first before investing in sophisticated securities. One way that helps to enhance the internal security of Organizations, Institutions and hospitals are sensitizing the employees, students, patients or any other member of the public about the importance of security control and how to react in events that can result to loss of life or severe injuries.In the case of Johns Hospital, they don’t have any strategy to enlighten the public on disaster preparedness and response in their institutions(Qari, Yusuf, Groseclose, Leinhos & Carbone, 2018).

Proposed solutions to the challenges

The following are the solutions that can help settle the aforementioned challenges:

The hospital can sensitize the public about disaster preparedness and response. Knowledge is power. If people can learn how to respond to disasters and other casualties especially in hospitals, life can be interesting. This sensitization can be done through organizing campaigns that aim to promote disaster preparedness in the society, teaching the public on how to behave in case of any disaster which can help protect the lives of many. In the Hopkins hospital, the management can organize to sensitize the doctors, medics, nurses and other workers on how to behave when they sense danger in hospitals. The security organs should also be taught how to deal with the visitors especially those armed with firearms (Edrees, Connors, Paine, Norvell, Taylor & Wu, 2016).

The other proposed solution to this is to make sure that every patient that visits the hospital is registered before the admission process begins. Registration of the patients will allow the hospital to have the exact number of the patients that are in their hospital and gain relevant information about the relatives of the patient. This will also enable the hospital to conduct thoro

A sound collaboration of the responsible agencies such as the police can help reduce disasters in hospitals. For instance, it is reported that the police responded very well and prevented David from harming more patients in Hopkins hospital. This also entails the effective coordination of all the resources owned by the hospital to ensure that any response to casualty is made promptly. Hospitals should also outsource security forces from the respective local or federal governments to keep the patients safe(Qari, Yusuf, Groseclose, Leinhos & Carbone, 2018).

Documentation of the patients can also help in disaster response. This can allow the hospital to track any information of people who may cause a crisis in their premise. Good recording breeds exemplary performance and success in every organization. As such, institutions, Organizations and hospitals should ensure that they take details of any person who visits them. The records should be kept safe for reference in case of any disaster within the premises. The security forces should get details such as names, and other relevant information that can help them identify the culprits. Additionally, all the visitors should be screen extensively to curb an influx of firearms in the hospital. Possession of weapons in the wards is very dangerous since it can result to cases of murder as it happened in the case of David(Edrees, Connors, Paine, Norvell, Taylor & Wu, 2016).

In conclusion, hospitals should ensure that the patients are safe through implementation sound security measures in their premises. As such, Organizations, schools and hospitals should adopt stringent policies to curb disasters and crisis such as through screening of people by the security forces, public sensitization on disaster preparedness and response. For instance, in Johns Hopkins case, Critical Events Preparedness and Response office is created to help in quick response to disaster in their institutions and hospital.

References

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