Chile Earthquake of February 27, 2010 Reconnaissance Report on Hospitals

Bill Holmes

EERI Hospital Reconnaissance Team Members



Talca Regional Public Hospital, Talca, Chile, March 19, 2010

Rick Bissell

Professor of Emergency Health Services, University of Maryland Baltimore County, Baltimore, MD

Francisco de la Masa

Ministerio de Salud

Judith Mitrani-Reiser

Assistant Professor of Civil Engineering, Johns Hopkins University, Baltimore, MD

Bill Holmes

Structural Engineer, Rutherford & Chekene, San Francisco

Thomas Kirsch

Associate Professor and Director of Operations of Emergency Medicine, Johns Hopkins University, Baltimore, MD

Mike Mahoney

Senior Geophysicist of Building Science Branch, DHS/FEMA, Washington, DC

Nicolas Santa Cruz Marin

Pontificia Universidad Catolica

William T. Holmes



Goals of Hospital Team

- Assess the physical and medical similarity of Chilean Hospitals to US practice.
- Identify vulnerabilities that can
 - Threaten patients
 - Reduce the ability to provide emergency medical care
- Develop a protocol to collect detailed data measuring effectiveness and vulnerabilities of regional medical care.
 - Size and other medical characteristics of facility
 - Numbers of in-patients present, injured, evacuated, moved to other facilities
 - Numbers of outside patients treated



Chilean Hospital System

- Public Health System
 - Regional (we covered parts of 4 regions)
- ACHS
 - Began to provide care similar to Workman's Comp
 - Now essentially a hospital system
- Private hospitals and clinics
 - Catolica, etc.
- Systematic listing of facilities, damage, etc, available only on Public Health System.
 - Several other hospitals visited in Santiago

Overall performance of Public Health Hospital System according to Ministry of Health Website

- Total in shaken region: 100
- 17 to be completely rebuilt
- 8 with major damage
- 54 requiring minor repair
- 21 apparently undamaged



Reconnaissance of Hospitals

- Santiago area
 - Military Hospital
 - San Carlos Catolica Clinic
 - ACHS (Trahabador)
 - •Victor Bulnes (Santiago Sotero del Rio, Felix Bulnes)
- Talca Regional Public
- Los Angeles Regional Public
 - Six satellite facilities
 - de Hupiel
 - Laja
 - Santa Barbara
 - Nacimiento
 - Yumbel
 - Mulchen
- Concepcion Regional Public
 - Talcahuano



William T. Holmes

Chile Earthquake of Feb 27, 2010

Structural Systems

- Typical systems
 - Masonry bearing wall—only in very old buildings
 - Concrete Frame with infill
 - Concrete frame
 - Concrete frame with concrete shear wall
 - Steel brace frame-3 story (tube columns and braces)
- Structural Performance
 - Lack of damage to one story hospital buildings compared to high rise non-hospital concrete buildings suggests different input energy levels.
 - Older buildings beat up—often masonry
 - Mid-rise hospital buildings constructed after 1985 generally performed well structurally, with some exceptions.
 - Seismically isolated buildings (3) performed well but joint damage was common.

Nonstructural Systems

- Systems used are very comparable to US practice
- Only the newest hospitals in Chile have systematic seismic protection for nonstructural systems
- The nonstructural seismic performance observed should be expected in similar levels of ground motion in older US hospitals or where code-specified nonstructural protection is not enforced.
 - 0.2-0.25 g in Santiago
 - Higher, up to 0.5 g elsewhere
 - Effects of long duration on nonstructural systems has not been studied.



Organization of Findings

- By issues known to affect patient safety or functionality
 - Communications
 - The need for evacuations
 - Elevators
 - Loss of power
 - Loss of water
 - Water damage
 - Loss of bulk oxygen tanks
 - General disruption from ceiling damage
 - General disruption from nonstructural masonry damage
 - Disruption to fragile areas like paper medical records, pharmacies, and laboratories
 - Damage to medical equipment
 - Damage to MEP equipment
 - Damage to MEP distribution systems



Communications

- Over-reliance on cell phones, no plan for emergency communication in facility or between facilities—particularly to headquarters of public health system.
- Perhaps explains remarkable self reliance at each site
- Administrators interviewed wanted to address this issue for future emergencies

Evacuations

- San Carlos de Catolica (Santiago)
 - Fifth floor of fixed base wing due to nonstructural chaos
- Felix Bulnes (Santiago)
 - 200 patients from tower due mostly to nonstructural but also damage to infill masonry
 - Administrative building severely damaged, and would have caused casualties if occupied.
 - Entire facility is now closed. Clinic building under construction/renovation is being rushed to completion



Patient room. Felix Bulnes





Felix Bulnes



Evacuations

- Talca
 - Older light concrete frame with heavy masonry severely damaged and evacuated
 - Chilean military hospital set up across street is still in operation.
- Los Angeles
 - Older buildings slated for replacement in 3 years evacuated due to nonstructural, infill, and water damage
 - Several floors of newer building evacuated for repairs
- Concepcion
 - Older building evacuated due to water and sanitation piping systems leaks



Chile Earthquake of Feb 27, 2010





Evacuated building at Talca Hospital







Evacuated building at Los Angeles Hospital





Elevators

- Significant failures. Over 50% of all elevators were out, most due to counterweights off rails.
- In every building evacuated, elevators were inoperable, requiring patients to be carried down stairs-often rubble strewn.
- Elevator machine rooms and shafts are typically accessible only by elevator maintenance service or one person on site.
- Evacuations required use of stairs.



Anchor bolt failure of elevator generator set due to inadequate edge distance. Los Angeles Regional Public Hospital



Security camera at Military Hospital (Santiago) captures counterweight failure

William T. Holmes

Chile Earthquake of Feb 27, 2010



Loss of Power

- Outside power lost for various times at every facility
- Seldom caused an ongoing problem due to availability of emergency generators and at least 3 days fuel.

Loss of Water

- Unlike most of the US, many sites had on-site storage for 3 or more days (or wells).
- Water provided that was not pumped through facility system did not provide sufficient pressure for toilets and some medial equipment.

- Damage/disruption from water
 - Not statistically frequent but caused at least three buildings to be evacuated, and shut down 3 of 6 ORs in relatively new building.



2005 building; Los Angeles Hospital. Infill masonry wall collapses on to distilled water equipment, spilling two 150 gallon containers; water leaks past perimeter edge of slab to OR suite below, closing 3 or 6 ORs

William T. Holmes

March 30, 2010



Continuing water damage at Talca Hospital. Water is leaking from water heater on right. Building was closed due to nonstructural damage, dominated by water.

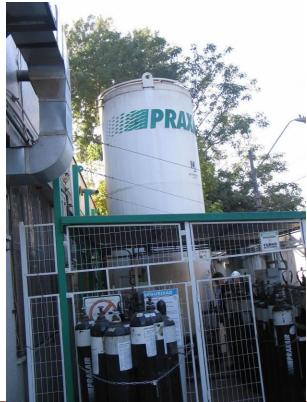
William T. Holmes



Bulk oxygen storage tanks

 Standard of practice is to anchor. No overturning reported, but close calls....





25



Oxygen tank legs punched through support slab but did not overturn and remained functional. Felix Bulnes-Santiago

William T. Holmes

Chile Earthquake of Feb 27, 2010





Overturning tension stretched anchor bolts. Talcahuano Hospital.



- Suspended lay-in ceilings. Generally without any seismic detailing. The "American Ceiling"
 - Most consistent failure.
 - Often causes little real damage but great fear and disruption.
 - Fallen light fixtures and air registers can be life safety issue
 - Older ceilings drop dust and other debris (in the US, often asbestos)

The story of the American Ceiling





The morning after. Los Angeles Hospital. Note fallen light fixtures and mechanical registers, in addition to ceiling panels.



Fallen tile despite clips. Talca Hospital.



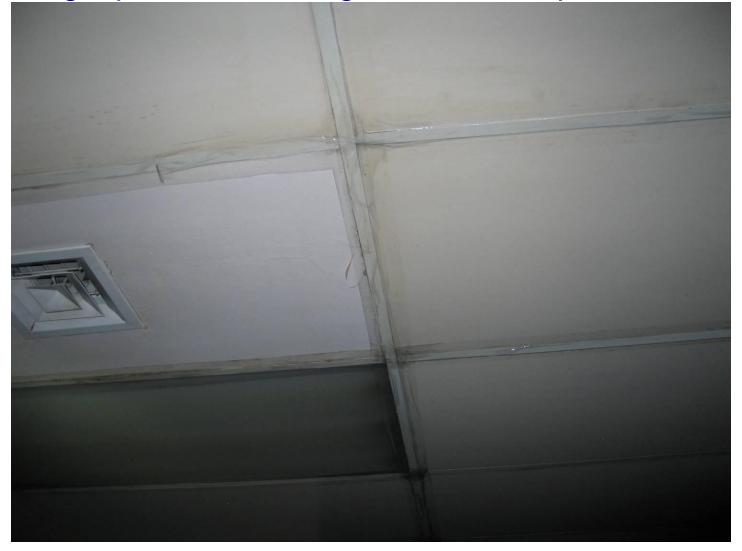
Close up of clips used at Talca Hospital in new building.

March 30, 2010



ICU. Talca Hospital older building-evacuated

Packing tape is almost as good as duct tape as a cure-all!



ICU Talca Hospital

Chile Earthquake of Feb 27, 2010

- Infill masonry/heavy partition damage
 - Considered "nonstructural" but, like ceilings, causes fear, creates dust and occasionally risk of injury.



Cracked and spalled infill in patient room. Felix Bulnes (Santiago)





Temporary braces at loose precast partitions. Laja

Braces supported at bottom with cabinet





- Vulnerable areas
 - Paper medical records, pharmacies, and laboratories
 - Medical Equipment
 - Mechanical/Electrical/Plumbing Equipment
 - Mechanical/Electrical/Plumbing Distribution
 Systems
- Did not "stand out" as vulnerable. Damaged when building had other nonstructural damage

Acknowledgements

- This study was supported by the Earthquake
 Engineering Research Institute's Learning from
 Earthquakes (LFE) Program, the Johns Hopkins
 University's Office of Critical Event Preparedness and
 Response (CEPAR), and the Federal Emergency
 Management Agency (FEMA).
- We would also like to acknowledge the valuable input and support from Juan Carlos De La Llera, Cristian Maluk, and Catterina Ferreccio at Pontificia Universidad Católica, Ministro de Salud Jaime Mañalich, Subsecretaria de Redes Asistenciales Giovanna Gutierrez, and all the wonderful employees who hosted us and patiently answered all of our questions.