The Hospital Emergency Incident Command System

Third Edition
June, 1998
Volume I

A Project of
San Mateo County Department of Health Services
Emergency Medical Services Agency
with grant support from
California Emergency Medical Services Authority
HEICS

THE

HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

San Mateo County Health Services Agency
Emergency Medical Services

Third Edition

Volume I

June, 1998
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The San Mateo County Emergency Medical Services would like to gratefully acknowledge the generous contributions made by the Hospital Emergency Incident Command System Revision Task Force. The leadership and commitment to medical disaster preparedness displayed by these individuals has assisted many in this country and around the globe.

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Forward to the Third Edition

The Hospital Emergency Incident Command System (HEICS) is a standard by which the medical community has found success and common ground in the area of disaster management. Like the first and second edition, this third version was completed with a grant from the State of California Emergency Medical Services Authority. The County of San Mateo Emergency Medical Services Agency undertook the project to update the 1993 HEICS document. A survey of California hospitals in the spring of 1997 indicated that this disaster management plan was the choice of many hospitals; the medical community had established HEICS as a facility standard in emergency response. From their input new instructional aids, an introductory video, and informational web pages on the California EMS Authority's internet site (www.emsa.cahwnet.gov) were developed. It is now hoped that the success and lessons learned relative to HEICS can be shared with hospitals across the nation and around the globe.

Many respected experts worked on this project; however, they are not responsible for validating the HEICS plan. It is the many disaster and emergency preparedness coordinators at medical facilities throughout the state who have made HEICS the standard it is today. This manuscript is dedicated to these individuals.

You will note a few changes to this edition of the HEICS document. There is a new executive summary stressing the flexibility of the response plan. The manual is divided into two volumes to place emphasis on the plan’s essentials and facilitate reading. Finally, the resource directory has been trimmed to include only those items directly related to the HEICS plan. It is hoped that the reader finds these improvements helpful.

The members of the Hospital Emergency Incident Command System Revision Task Force are an extraordinary collection of talented individuals. This project was fortunate to have their expertise and benefited tremendously from their assistance. One individual was especially involved with most every aspect of the project; including the important task of project time tracking. Ellen Nave is recognized and thanked for her commitment to this project.

Paul M. Russell, RN
HEICS Third Edition Revision Project Coordinator
EXECUTIVE SUMMARY

January, 1998

Confusion and chaos are commonly experienced by the hospital at the onset of a medical disaster. However, these negative effects can be minimized if management responds quickly with structure and a focused direction of activities. The Hospital Emergency Incident Command System (HEICS) is an emergency management system which employs a logical management structure, defined responsibilities, clear reporting channels, and a common nomenclature to help unify hospitals with other emergency responders. There are clear advantages to all hospitals using this particular emergency management system.

Based upon public safety’s Incident Command System, HEICS has already proved valuable in helping hospitals serve the community during a crisis and resume normal operations as soon as possible. A survey of California hospitals in the spring of 1997, reveals a significant number of hospitals have, or will be incorporating HEICS within their emergency plans. HEICS is fast becoming the standard for health care disaster response and offers the following features:

- predictable chain of management
- flexible organizational chart allows flexible response to specific emergencies
- prioritized response checklists
- accountability of position function
- improved documentation for improved accountability and cost recovery
- common language to promote communication and facilitate outside assistance
- cost effective emergency planning within health care organizations

The 1996 Edition of the National Fire Protection Association, Health Care Facilities Handbook states in chapter 11-4.3, “The disaster planning committee shall model the disaster plan on the incident command system (ICS).” The American Society for Healthcare Engineering of the American Hospital Association in an August, 1997 Healthcare Facilities Management Series states “One of the best examples of emergency preparedness through checklists can be found in The Hospital Emergency Incident Command System...” In California, public hospitals seeking financial recovery following a declared disaster are required to implement the 1993 mandates of the Standardized Emergency Management System. The utilization of the HEICS plan is recognized as partial compliance with this act.

HEICS and all of its support material are offered without charge. Implementation templates and instructional materials are free and make the cost of converting to the HEICS system minimal. HEICS is financially prudent as it assists the medical facility in staying open following a disaster and promotes the restoration of day-to-day hospital function. It is an efficient method for managing emergencies of disastrous proportions, as well as those of a lesser degree.
For More Information...
about the Hospital Emergency Incident Command System contact the California Emergency Medical Services Authority at (916) 322-4336; or visit the web site at www.emsa.ca.hwnet.gov/.
The Hospital Emergency Incident Command System (HEICS)

This organizational chart represents the response portion of a hospital's emergency or disaster plan. The HEICS management system fits within a facility's overall Emergency Preparedness Plan, and is supported by policies and procedures which outline this response plan's activation.
HEICS is an emergency management system made up of positions on an organizational chart. Each position has a specific mission to address an emergency situation. Each position represented above has an individual checklist designed to direct the assigned individual in disaster recovery tasks. The HEICS plan includes forms to enhance this overall system and promote accountability.

The HEICS plan is flexible. Only those positions, or functions, which are needed should be activated. The HEICS plan allows for the addition of needed positions, as well as the deactivating of positions at any time. This equates to promoting efficiency and cost effectiveness. The above chart may be fully activated for a large, extended disaster such as an earthquake. However, full activation may take hours or even days. The majority of disasters or emergencies will require the activation of far fewer positions.

More that one position may be assigned to an individual. Situations of a critical nature may require an individual to perform multiple tasks until additional support can be obtained. This is made possible with the use of the individual position checklists.
A bus crash in the early A.M. hours will find hospital management and staff at a minimum. The HEICS system allows a minimum activation of positions necessary to care for the arriving injured. The 5 positions with *double-boxed borders* are those which should be immediately activated upon notice of the crash. The other positions can be added as more personnel arrive. It should be remembered that a person might be required to perform more than one job. As more staff becomes available they relieve the individual with multiple assignments. For example: the Night Supervisor initially becomes the Incident Commander and Labor Pool Unit Leader. Tasks (positions) which are assigned a high priority may be divided among arriving (available) individuals.
The activation of positions for a mass casualty accident will be different than those activated for a hazardous material spill or an impending labor strike. HEICS will flex to accommodate the unique needs of each emergency. The above chart illustrates the positions which may be opened to address issues associated with a storm alert. This pre-disaster activation allows alerted staff to be in a “stand-by” mode in the event future positions need to be filled. Keep in mind, each emergency has its own set of priorities and circumstances. With easy to understand, pre-written checklists, almost anyone can assume a role after a few minutes of reading.
COST EFFECTIVE ACTIVATION - of a facility’s emergency plan will occur as a result of more efficient use of available personnel resource. Financial resources are saved by activating only those positions which are necessary.

COST EFFECTIVE IMPLEMENTATION - previous years of development and testing have created proven universal forms and procedures which need only to be customized for the facility. Disaster planning activities also serve as tangible disaster mitigation efforts.

COST EFFECTIVE TRAINING - is generic and basic to all hospital employees. Most training can be done in the annual update format of each facility. Employees coming from other institutions may already be schooled in the Incident Command System.

For More Information...

about the Hospital Emergency Incident Command System contact the California Emergency Medical Services Authority web site at www.emsa.caahwnet.gov/ or telephone the Authority at (916) 322-4336.
Hospital Emergency Incident Command System - Volume I

SECTION 1

INTRODUCTION

TO

H E I C S
INTRODUCTION TO THE
HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

INTRODUCTION

The Hospital Emergency Incident Command System (HEICS) was developed to assist the operation of a medical facility in a time of crisis. The second edition of the HEICS manual is significantly more comprehensive than the original version developed in 1991. This third edition remains essentially unchanged from its May, 1993 predecessor. Some of the additions made to the second edition included introductory text dealing with implementation of the HEICS program into a medical facility. The organizational chart was revised to include a subsection addressing the care of the hospital's in-patients. The Job Action Sheets were reformatted for easier reading. Lesson plans were added to facilitate instruction of the hospital staff and the training of other instructors. Each chapter has an introduction to explain the purpose and use of the material. Chapter introductions, added in the second edition of HEICS, were originally intended to be instructional and self-prompting. Experience over the years has pointed to the reality that a certain degree of outside support may be necessary to integrate HEICS into a medical facility's culture. An experienced instructor or tour of a facility using HEICS may be necessary to assist a hospital’s transition to the incident command style of management.

This third edition of the HEICS manual is the joint property of the State Emergency Medical Services Authority and the San Mateo County Emergency Medical Services Agency. All material is provided to institutions for their private use and adaptation within each facility/facilities. Institutions are encouraged to make full use of the material provided in this manual, so long as it is used for that specific facility or facilities managed by the same parent organization. This includes the direct use or adaptation or copying of any Job Action Sheet, lesson plan or other information contained in this manuscript. Any other use or publication of this material must have the written permission of the State EMS Authority. You are asked that when using this material credit be given to the State of California Emergency Medical Services Authority.

HISTORY OF THE HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

In the 1980's an inter-agency (local, State and Federal) cooperative effort was formed to develop a common organizational system which fire protection agencies could use in response to a very large incident, as well as smaller day-to-day operations. The cooperative plan known as FIRESCOPE, directed by the National Inter-Agency Incident Management System, produced a management system which has become a standard operating procedure for fire departments across the United States. The process, known as the Incident Command System (ICS), is utilized by most every fire department in the State of California. It is finding acceptance in fire departments across the United States and Canada and is now being integrated into other civil service areas and the private sector.
In 1987, the Hospital Council of Northern California completed work on an adaptation of the ICS to hospital emergency response functions in a publication entitled Earthquake Preparedness Guidelines for Hospitals. That document served as a cornerstone in the development of the original Hospital Emergency Incident Command System (HEICS) written by Orange County Emergency Medical Services in 1991 with a grant from the State of California Emergency Medical Services Authority. In 1992 Orange County EMS began work on the second edition of the HEICS, again, with a funding provided by the State EMS Authority. This major rewriting of the HEICS was done with the intention of making the original document easier to use and implement within the hospital environment. The second edition attempted to retain those same characteristics that made the original ICS-based plan so appealing. This third edition of HEICS is produced by the County of San Mateo Emergency Medical Services Agency; again, with a grant from the State EMS Authority. The Project began in the fall of 1996 with the intention of gathering data regarding the usage of HEICS. From this input, a revised edition of HEICS would be recreated. However, a survey of California acute care hospitals in the spring of 1997 revealed no major concerns regarding the currently used HEICS plan. What was discovered was that there needed to be a better understanding regarding the adaptability and flexibility of HEICS to facilities of all sizes and emergencies of all types. The original attributes remain as before. They include the following:

- Responsibility oriented chain of command

  This is an organizational structure which provides for the addressing of many facets of an emergency. It provides a manageable scope of supervision for all functions/positions.

- Wide acceptance through commonality of mission and language

  Through the use of a broadly accepted organizational chart and generic position titles, the ICS system has found expanding acceptance in both public and private based management circles.

- Prioritization of duties with the use of Job Action Sheets

  The Job Action Sheets are position job descriptions which have a prioritized list of emergency response tasks. The Job Action Sheets also serve as reminders of the lines of reporting and promote the documentation of the incident.

- Applicability to varying types and magnitudes of emergency events

  The HEICS is a flexible program which can be expanded or scaled back to meet the particular needs of a specific crisis.

- Thorough documentation of actions taken in response to the emergency.

  The Job Action Sheets and the associated forms promote vigorous documentation of both personnel and overall facility response to the crisis. This comprehensive documentation may improve recovery of financial expenditures, while it decreases liabilities.
Expeditious transfer of resources (mutual aid) within a particular system or from one facility to another

The idea of sharing material and human resources in time of need is not new to hospitals. Mutual aid among medical institutions will be facilitated which a common system of management and terms.

Flexibility in implementation of individual sections or branches of the HEICS

Activation of the HEICS based plan can be customized to meet the needs of a particular crisis.

Minimal disruption to existing hospital departments by virtue of parallel job qualifications/duties

The HEICS Organizational Chart and Job Action Sheets are designed to mitigate a crisis affecting the medical facility. However, it is readily apparent that there are many individuals within the day-to-day management structure whose jobs closely match those of the HEICS.

The HEICS Organizational Chart shows a chain of command which incorporates four sections under the overall leadership of an Emergency Incident Commander (IC). Each of the four sections: Logistics, Planning, Finance and Operations, has a Chief appointed by the IC responsible for their section. The Chiefs in turn designate directors and unit leaders to subfunctions, with supervisors and officers filling other crucial roles. This structure limits the span of control of each manager in the attempt to distribute the work. It also provides for a system of documenting and reporting all emergency response activities. It is hoped that this will lessen liability and promote the recovery of financial expenditures.

Each one of the forty-nine positions found on the organizational chart has a prioritized Job Action Sheets written to describe the important duties of each particular role. Every Job Action Sheet begins with the job title, the supervising officer where the location of the section operations center is and a mission statement to define the position responsibility. The duties listed on the Job Action Sheet are put into categories of
"Immediate", "Intermediate" and "Extended". A line to the left of the particular action is provided for the recording of the time when the duty was accomplished or last completed.

Where it is necessary to revise particular job descriptions, caution should be used to retain the intent of the Job Action Sheet's mission. Changing the Job Action Sheet title, or position title is not recommended, as there will be a loss of common nomenclature. Changing titles will only inhibit communication when dealing with outside agencies. Moving positions to other sections or locations will defeat commonality of structure. The organizational structure should remain as pictured in the organizational chart. Standardization of language and chain of command is essential to promote communication and mission achievement both inside the hospital and with outside entities.

IMPLEMENTATION OF HEICS

In 1991 the administrative staff of the pilot hospitals were introduced to the original HIECS program, trained and tested the plan in a full functional exercise. This was all accomplished within a three month time span with very positive results. While 90 days may be rushing it for some institutions, the length of the implementation/transition program for each medical facility will depend upon a variety of factors. The size of the institution, the number of people committed to the project, the funds available to promote the project and the strength of management's support are just some of the factors that will need consideration in the implementation program design. The information and tools contained in this second edition will significantly help this process, but the actual implementation time is the decision of management and the HEICS implementation team.

IMPLEMENTATION PROGRAM OUTLINE

The following is an outline of the suggested phases which may be necessary to implement the Hospital Emergency Incident Command System (HEICS) Program into a medical facility.

HEICS Concept Briefing

Someone experienced in the HEICS program briefs interested hospital administrators and emergency planners. The person conducting the briefing may be an employee of the hospital who has attended an educational offering on the HEICS; or someone in public health, emergency services or from another hospital which has already instituted the system. Utilizing experience and information found in the HEICS lesson plans, the presenter will provide a general description of the program and the benefits of adapting the facility's emergency response plan to an incident command style of operation. As much detail as possible should be given to Administration regarding the estimated cost of implementation and maintenance of the HEICS plan. The session should conclude with a question and answer session. References should be made available if there is the desire to contact an individual at another facility which has adopted the HEICS program.

Commitment to Adopt the HEICS Plan

An anticipated result of the above briefing will be the hospital's decision to either accept or reject a plan to implement the HEICS program within the facility. If there is a commitment to go ahead with the HEICS program then a transition team should be appointed. This team should be composed of as many upper level managers as possible. The hospital's Disaster Coordinator should guide the team; but other institutions have experienced great success when a vice-president and department head have also been appointed to serve on the HEICS Implementation Team. Needless to say, all who sit on this team should be actively supportive of the concept and mission. These individuals should have the ability to devote at least five to ten hours per week for one to three months in order to effect the transition. Above all, top level management must make the decision to
stand visibly behind the program. If hospital management and staff are convinced of the CEO and/or Board's determination to enhance the hospital's disaster response the chances of a smooth and successful transition will be greatly increased.

The remainder of this document assumes that there has been a decision to proceed with the implementation of the HEICS.

**Establishment of the HEICS Implementation Committee**

The HEICS Implementation Committee should be larger than the Implementation Team. It should be composed of a number of hospital employees of various management levels and from various departments. These employees may be currently serving on the facility's Disaster or Safety Committee. The charge of the Implementation Committee is to put together a comprehensive program to integrate the HEICS into the facility. Some of the duties of the committee are:

- Develop an agenda and time line for the implementation project
- Revise the current disaster/emergency plan to incorporate the HEICS
- Develop a training schedule and pool of instructors
- Ensure the inclusion of HEICS training in the annual employee inservice training program
- Develop a pre-training employee awareness and "public relations" programs
- Establish an employee disaster preparedness resource center
- Requisition the HEICS vests, storage equipment and any other materials related to emergency management

There may be other projects that the committee may involve themselves with which will promote a positive attitude toward the hospital's revised emergency response plan.

**Management Briefing**

A presentation is made to all administrators, department heads and managers regarding the implementation of the HEICS program into the facility's emergency response plan will help solidify support in all areas of the hospital. It is very important that this briefing is co-sponsored by the HIECS Implementation Team and CEO/Board representative.

This program should be a combination of education and public relations. Managers should be made to feel that they are all an integral part of the new system. Interested managers can be recruited to become part of a train-the-trainer class.

**Revision of the Hospital's Disaster/Emergency Plan**

The hospital's current disaster plan will need to be configured so that the Incident Command System becomes the "standard operating procedure" when an the plan is activated. It is important to understand that the HEICS is not the entire disaster plan; but rather the method by which a hospital will operate when an emergency is declared. The revision of the facility's emergency plan may be initiated at any point in the implementation program, however, the sooner this process is completed the more cohesive the overall plan will appear to involved personnel. This may become a important, positive selling point during the general introductory phase.

The HIECS Job Action Sheets and forms might be viewed as the center of a disaster/emergency plan. Surrounding the Job Action Sheets are supporting policies and procedures which augment the HEICS and
make it work. The following is a short list of some typical P & P which are instrumental in a complete emergency plan:

- Pre-disaster departmental readiness checklists
- Policy for activation of the hospital's disaster plan
- Policy for termination of the hospital disaster plan
- Personnel recall procedures
- Security/lock-down policy
- Decision to evacuate policy
- Evacuation procedure
- Volunteer credentialing policy
- Policy regarding standing orders for patient care during a disaster
- Policy allowing for rapid patient discharge during a disaster

Some facilities have developed annexes, or subsections of the disaster plan, to deal with specific emergencies such as hazardous material releases, earthquakes, utility outage, severe weather, bomb/security threat and other conditions which may potentially occur.

The completed disaster manual will above all be simple. The plan requiring volumes of memorization will eventually collect dust on a shelf. Some of the most effective hospital disaster plans are surprisingly brief and simple to read. A well indexed text, with brevity as its hallmark, will be considered "user friendly" by those who depend upon it.

**Introductory Lesson for All Hospital Employees**

All employees of the facility are instructed on the HEICS plan. This is done utilizing the Introduction to the Hospital Emergency Incident Command System Lesson Plan. It is recommend that all levels and areas of service should attend these general education session. The programs are estimated to run approximately one hour. Participants at this training session are made aware of the HEICS plan and how it will affect their disaster response. They should be advised that some of them will be invited back to participate in a table top exercise. Ultimately all personnel will be involved when the hospital tests the new plan in a future disaster exercise.

This inservice may be an opportunity to create some positive employee - employer relations by promoting employee family/home disaster preparedness. Some hospitals have found this to be quite successful in promoting employee loyalty.

**Staff Table Top Exercise**

The HEICS Table Top Exercise is a paper drill intended to demonstrate the working and communication relationships of functions found within the HEICS organizational plan. The exercise is intended primarily for the administrators, managers and personnel who could conceivably be placed into an officer's position upon activation of the disaster plan. The exercise itself will take two to two and a half hours to complete.

**Full-Functional Exercise of the HEICS Plan**
The new HEICS disaster response plan may be tested when the facility conducts a general disaster exercise. This will involve the activation and simulated activity of all sections of the Incident Command System. Other medical facilities have received a highly positive response from employees who have been involved in their first, fully-functional exercise of the HEICS. In three hospitals of 200 beds or more, greater than 80% of participating employees felt that the hospital's disaster exercise performance was more organized than before the implementation of the HEICS program. These same hospitals have devoted an adequate amount of pre-training to all employees.

**Continuing Staff Education**

These periodic sessions are intended to meet licensing/accreditation standards, but also to keep all hospital responders committed to disaster preparedness and proficient in emergency operating procedures. The expertise of top management in regards the HEICS plan is a priority. The leadership team composed of managers who could potentially fill the roles of Incident Commander, Administrative officers and section chiefs must be always ready and always aware of how the facility's disaster plan works; as well as the responsibilities associated with the most critical job positions.

Educational offerings may be centered on paper or functional exercises, introduction of new disaster-related topics and review of the MASICS plan. Home and family emergency preparedness should always be stressed at each educational session. General employee classes are usually done at the employee’s anniversary or prior to a scheduled disaster exercise. Smaller educational sessions may be held within department inservices or as part of a facility-wide safety program. The chapter dealing with lesson plans has additional suggestions regarding staff education.

**Summary Comments**

It is believed that the material in this manual is comprehensive enough to allow institutions and individuals to begin the integration of an incident command system into a hospital's disaster plan. Those who worked on the revision of this document trust that those individuals who are able to grasp the key ideas in this text will be able to initiate a program like the one outlined here. It is important to keep in mind that the HEICS is a tool to facilitate accomplishing a task. The HEICS identifies critical management functions in order for the hospital to develop and implement an emergency action plan. In the end, it is people who are truly the most important element of any emergency plan. There is no Job Action Sheet or form or Action Plan which can substitute for the well trained employee; including the Medical Staff. Training and exercise of the disaster plan builds the confidence of the entire staff. Honest critiquing will illuminate those areas which are in need of further revision or retraining. Those officers with a working knowledge of the facility disaster plan will be better able to exercise a command and control presence over those areas assigned to their care. Confidence in management is an essential component of the plan which no hospital administrator should overlook. People who believe in leadership will give their loyalty, as well as their skill.

Finally, there are two types of people who believe in emergency plans. Those who know they are necessary for accreditation and licensing; and those who believe that they will eventually someday be used. People who develop plans for licensing purposes solely will probably not read this. There is really no other driving force other than to meet a code. For their purposes, any reasonable plan will suffice. The individual who believes that real emergencies do happen is usually committed to a preparedness philosophy which promotes emergency planning at work, home or where ever a person may be. Employee personal disaster preparedness is a deserving venture for the medical facility for a number of reasons. Some of these reasons are practical, such as the employee who is better prepared at home will be better able to report to work if called. The employer who has devoted energy to creating a comprehensive emergency plan in the workplace; and has also committed
some resource towards preparing the worker for an emergency away from the job, is clearly telling the employee "You are a valuable resource - a most important part of this facility's disaster plan." The employee’s attitude toward the hospital will be one of loyalty and commitment to recovery.
SECTION 2

JOB ACTION

SHEETS
The Hospital Emergency Incident Command System
Job Action Sheets

The Job Action Sheets, or job descriptions, found in this chapter are the essence of the HEICS program. This is the component that tells responding personnel "what they are going to do; when they are going to do it; and, who they will report it to after they have done it."

Organizational Charts

The organizational chart shows the variety of positions which may be needed to address an emergency situation. Another way to view this chart is to think of it, in the words of an Incident Command System (ICS) instructor, as a tool box. All the equipment necessary to perform a job can be found in this "box", however, some tools are used immediately and more often than others. And, so it is with the HEICS Organizational Chart.

One should try to refrain from thinking that each position represents a person, and each position must be filled as soon as possible. Each of these impressions is false. In conditions of minimum staffing, such as the middle of the night, there are not enough personnel to begin to fill each position. Each crisis is unique and should be confronted as such. Those positions which will be immediately needed to manage the emergency will be the first assignments made. These are the "first tools pulled out of the box." There are some positions or roles which are not needed for hours or days after the onset of the emergency. Some may not be needed at all. It becomes very clear that the most important abilities needed to react to an emergency circumstance are the skill to identify the priorities created by the event and which positions are most important to mitigate its ill effects.

When it is discovered that there are more jobs to be accomplished than people available, then it may be necessary to delegate more than one job to an individual. Another alternative is to realize that not every task can be accomplished at the time it needs to be done. This can lead to a re-prioritization of needs. In other words, there are limitations in resources which may need to be recognized. This uncomfortable realization may stimulate a revision in the manner in which day-to-day management is performed, or a change in your facility's emergency plan.

Following the Organizational Chart is a chart identified as a "Crosswalk". The crosswalk chart is a listing of possible positions which might have day-to-day responsibilities similar to those found in the Job Action Sheets. While it is not recommended that these be the only people trained for each position, it is reasonable to visualize how these individuals may be a logical first choice for filling a particular role. It must be remembered that the flexibility of having managers assume almost any officer's role is an important attribute to be retained in the HEICS program.

The blank organizational chart entitled "Worksheet" is provided to assist the reader in identifying positions within their own facility which may provide leadership in a key HEICS position.
**Job Action Sheets**

The Job Action Sheets were the basis for the first HEICS manual written in the spring of 1991. They have been revised and expanded to more clearly address the issues a health care facility may face in a crisis. These sheets should be closely examined and, if needed, altered to meet the needs of the facility.

There are two components of the Job Action Sheets which should not be changed under any circumstances. These areas are the job title and the mission statement. The HEICS plan was designed to closely emulate the Incident Command System developed by the FIRESCOPE organization in the late '70s/early '80's. ICS has been and continues to be adopted by many public and private agencies. In part, because it is a known standard. The universal titles and mission statements found in HIECS allow emergency responders from a variety of organizations to communicate quickly and clearly with other subscribers to the ICS style of management. Changing job titles and responsibilities (mission statements) would counter-serve the purpose which helped designed this program.

**Presentation and Storage of Job Action Sheets**

Job Action Sheets which are found within the facility's general emergency/disaster plan are sufficient to meet inspection and code requirements. In order to make them useful at the time they are needed, a system of presentation and storage should be developed.

Other hospitals have experienced success in laminating each Job Action Sheet in plastic so that the time of duty completion can be marked in the blank to the left of the duty. Using an erasable grease pen would allow a reuse of the sheet. Another approach would be to place the Job Action Sheet inside a clear plastic clipboard. Color coded clipboards coordinated with the color of the ICS section are also available.

One hospital has reduced the Job Action Sheets into a pocket sized booklet, similar to one used by some fire services. This booklet contains key job descriptions, telephone numbers and maps locating the various special areas that are established following a declared emergency.

Grouping the Job Action Sheets by section is the common sense approach in organizing and storing these command materials. This has been made easier by utilizing a color coded, plastic storage crate. A camping food chest has also been used to store the section's Job Action Sheets, identification vests and forms/supplies necessary to carry out the section's mission. At the time of the declared disaster these crates or chests would be given to each section chief for further dissemination.

In summary, the customizing of the Job Action Sheets and their distribution should result in making the implementation of the hospital's disaster plan as "user friendly" as possible. In time of crisis, the simpler a task can be made, the better its chances of being completed.
The positions found on this chart are offered only as suggestions to fill the functional roles found on the HEICS Organization Chart.
EMERGENCY INCIDENT COMMANDER

Mission: Organize and direct Emergency Operations Center (EOC). Give overall direction for hospital operations and if needed, authorize evacuation.

Immediate

___ Initiate the Hospital Emergency Incident Command System by assuming role of Emergency Incident Commander.
___ Read this entire Job Action Sheet.
___ Put on position identification vest.
___ Appoint all Section Chiefs and the Medical Staff Director positions; distribute the four section packets which contain:
   ? Job Action Sheets for each position
   ? Identification vest for each position
   ? Forms pertinent to Section & positions
___ Appoint Public Information Officer, Liaison Officer, and Safety and Security Officer; distribute Job Action Sheets. (May be pre-established.)
___ Announce a status/action plan meeting of all Section Chiefs and Medical Staff Director to be held within 5 to 10 minutes.
___ Assign someone as Documentation Recorder/Aide.
___ Receive status report and discuss an initial action plan with Section Chiefs and Medical Staff Director. Determine appropriate level of service during immediate aftermath.
___ Receive initial facility damage survey report from Logistics Chief, if applicable, evaluate the need for evacuation.
___ Obtain patient census and status from Planning Section Chief. Emphasize proactive actions within the Planning Section. Call for a hospital-wide projection report for 4, 8, 24 & 48 hours from time of incident onset. Adjust projections as necessary.
___ Authorize a patient prioritization assessment for the purposes of designating appropriate early discharge, if additional beds needed.
___ Assure that contact and resource information has been established with outside agencies through the Liaison Officer.

Intermediate

___ Authorize resources as needed or requested by Section Chiefs.
___ Designate routine briefings with Section Chiefs to receive status reports and update the action plan regarding the continuance and termination of the action plan.
___ Communicate status to chairperson of the Hospital Board of Directors or the designee.
___ Consult with Section Chiefs on needs for staff, physician, and volunteer responder food and shelter. Consider needs for dependents. Authorize plan of action.

Extended

___ Approve media releases submitted by P.I.O.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
PUBLIC INFORMATION OFFICER (P.I.O.)

Position Assigned To:

You Report To: ____________________________ (Emergency Incident Commander)

Command Center: ____________________________ Telephone:

Mission: Provide information to the news media.

Immediate

___ Receive appointment from Emergency Incident Commander.
___ Read this entire Job Action sheet and review organizational chart on back.
___ Put on position identification vest.
___ Identify restrictions in contents of news release information from Emergency Incident Commander.
___ Establish a Public Information area away from E.O.C. and patient care activity.

Intermediate

___ Ensure that all news releases have the approval of the Emergency Incident Commander.
___ Issue an initial incident information report to the news media with the cooperation of the Situation-Status Unit Leader. Relay any pertinent data back to Situation-Status Unit Leader.
___ Inform on-site media of the physical areas which they have access to, and those which are restricted. Coordinate with Safety and Security Officer.
___ Contact other at-scene agencies to coordinate released information, with respective P.I.O.s. Inform Liaison Officer of action.

Extended

___ Obtain progress reports from Section Chiefs as appropriate.
___ Notify media about casualty status.
___ Direct calls from those who wish to volunteer to Labor Pool. Contact Labor Pool to determine requests to be made to the public via the media.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
LIAISON OFFICER

Positioned Assigned To:

You Report To: ________________________________ (Emergency Incident Commander)

Command Center: ________________________________ Telephone:

**Mission:**

Function as incident contact person for representatives from other agencies.

**Immediate**

___ Receive appointment from Emergency Incident Commander.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Obtain briefing from Emergency Incident Commander.

___ Establish contact with Communications Unit Leader in E.O.C. Obtain one or more aides as necessary from Labor Pool.

___ Review county and municipal emergency organizational charts to determine appropriate contacts and message routing. Coordinate with Public Information Officer.

___ Obtain information to provide the interhospital emergency communication network, municipal E.O.C. and/or county E.O.C as appropriate, upon request. The following information should be gathered for relay:

   ? The number of "Immediate" and "Delayed" patients that can be received and treated immediately (Patient Care Capacity).

   ? Any current or anticipated shortage of personnel, supplies, etc.

   ? Current condition of hospital structure and utilities (hospital's overall status).

   ? Number of patients to be transferred by wheelchair or stretcher to another hospital.

   ? Any resources which are requested by other facilities (i.e., staff, equipment, supplies).

___ Establish communication with the assistance of the Communication Unit Leader with the interhospital emergency communication network, municipal E.O.C. or with county E.O.C./County Health Officer. Relay current hospital status.

___ Establish contact with liaison counterparts of each assisting and cooperating agency (i.e., municipal E.O.C.). Keeping governmental Liaison Officers updated on changes and development of hospital's response to incident.

**Intermediate**

___ Request assistance and information as needed through the interhospital emergency communication network or municipal/county E.O.C.

___ Respond to requests and complaints from incident personnel regarding inter-organization problems.

___ Prepare to assist Labor Pool Unit Leader with problems encountered in the volunteer credentialing process.
____ Relay any special information obtained to appropriate personnel in the receiving facility (i.e., information regarding toxic decontamination or any special emergency conditions).

Extended

____ Assist the Medical Staff Director and Labor Pool Unit Leader in soliciting physicians and other hospital personnel willing to volunteer as Disaster Service Workers outside of the hospital, when appropriate.

____ Inventory any material resources which may be sent upon official request and method of transportation, if appropriate.

____ Supply casualty data to the appropriate authorities; prepare the following minimum data:
  - Number of casualties received and types of injuries treated
  - Number hospitalized and number discharged to home or other facilities
  - Number dead
  - Individual casualty data: name or physical description, sex, age, address, seriousness of injury or condition

____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

____ Other concerns:
SAFETY AND SECURITY OFFICER

Positioned Assigned To:

You Report To: ___________________________ (Emergency Incident Commander)

Command Center: ___________________________ Telephone:

Mission: Monitor and have authority over the safety of rescue operations and hazardous conditions. Organize and enforce scene/facility protection and traffic security.

Immediate

___ Receive appointment from Emergency Incident Commander.
___ Read this entire Job Action sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain a briefing from Emergency Incident Commander.
___ Implement the facility’s disaster plan emergency lockdown policy and personnel identification policy.
___ Establish Security Command Post.
___ Remove unauthorized persons from restricted areas.
___ Establish ambulance entry and exit routes in cooperation with Transportation Unit Leader.
___ Secure the E.O.C., triage, patient care, morgue and other sensitive or strategic areas from unauthorized access.

Intermediate

___ Communicate with Damage Assessment and Control Officer to secure and post non-entry signs around unsafe areas. Keep Safety and Security staff alert to identify and report all hazards and unsafe conditions to the Damage Assessment and Control Officer.
___ Secure areas evacuated to and from, to limit unauthorized personnel access.
___ Initiate contact with fire, police agencies through the Liaison Officer, when necessary.
___ Advise the Emergency Incident Commander and Section Chiefs immediately of any unsafe, hazardous or security related conditions.
___ Assist Labor Pool and Medical Staff Unit Leaders with credentialing/screening process of volunteers. Prepare to manage large numbers of potential volunteers.
___ Confer with Public Information Officer to establish areas for media personnel.
___ Establish routine briefings with Emergency Incident Commander.
___ Provide vehicular and pedestrian traffic control.
___ Secure food, water, medical, and blood resources.
___ Inform Safety & Security staff to document all actions and observations.
___ Establish routine briefings with Safety & Security staff.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:

___
LOGISTICS SECTION CHIEF

Positioned Assigned To:

You Report To: ___________________________ (Emergency Incident Commander)

Logistics Command Center: ___________________________ Telephone:

Mission: Organize and direct those operations associated with maintenance of the physical environment, and adequate levels of food, shelter and supplies to support the medical objectives.

Immediate

____ Receive appointment from the Emergency Incident Commander. Obtain packet containing Section's Job Action Sheets, identification vests and forms.

____ Read this entire Job Action Sheet and review organizational chart on back.

____ Put on position identification vest.

____ Obtain briefing from Emergency Incident Commander.

____ Appoint Logistics Section Unit Leaders: Facilities Unit Leader, Communications Unit Leader, Transportation Unit Leader, Material's Supply Unit Leader, Nutritional Supply Unit Leader; distribute Job Action Sheets and vests. (May be pre-established.)

____ Brief unit leaders on current situation; outline action plan and designate time for next briefing.

____ Establish Logistics Section Center in proximity to E.O.C..

____ Attend damage assessment meeting with Emergency Incident Commander, Facility Unit Leader and Damage Assessment and Control Officer.

Intermediate

____ Obtain information and updates regularly from unit leaders and officers; maintain current status of all areas; pass status info to Situation-Status Unit Leader.

____ Communicate frequently with Emergency Incident Commander.

____ Obtain needed supplies with assistance of the Finance Section Chief, Communications Unit Leader and Liaison Unit Leader.

Extended

____ Assure that all communications are copied to the Communications Unit Leader.

____ Document actions and decisions on a continual basis.

____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

____ Other concerns:
FACILITY UNIT LEADER

Positioned Assigned To:

You Report To: ________________________________ (Logistics Section Chief)

Logistics Command Center: __________________________ Telephone:

Mission: Maintain the integrity of the physical facility to the best level. Provide adequate environmental controls to perform the medical mission.

Immediate

___ Receive appointment from Logistics Section Chief and Job Action Sheets for Damage Assessment and Control Officer, and Sanitation Systems Officer.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Meet with Logistics Section Chief to receive briefing and develop action plan; deliver preliminary report on the physical status of the facility if available.
___ Appoint Damage Assessment and Control Officer and Sanitation Systems Officer; supply the corresponding Job Action Sheets. Provide the Facility System Status Report Form to the Damage Assessment and Control Officer. (May be pre-established.)
___ Receive a comprehensive facility status report as soon as possible from Damage Assessment and Control Officer.
___ Facilitate and participate in damage assessment meeting between Emergency Incident Commander, Logistics Section Chief and Damage Assessment and Control Officer.

Intermediate

___ Prepare for the possibility of evacuation and/or the relocation of medical services outside of existing structure, if appropriate.
___ Receive continually updated reports from the Damage Assessment and Control Officer, and Sanitation Systems Officer.

Extended

___ Forward requests of outside service providers/ resources to the Materials Supply Unit Leader after clearing through the Logistics Section Chief.
___ Document actions and decisions on a continual basis. Obtain the assistance of a documentation aide if necessary.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
DAMAGE ASSESSMENT AND CONTROL OFFICER

Positioned Assigned To:

You Report To: ____________________________ (Facility Unit Leader)

Logistics Command Center: ____________________________ Telephone:

Mission: Provide sufficient information regarding the operational status of the facility for the purpose of decision/policy making, including those regarding full or partial evacuation. Identify safe areas where patients and staff can be moved if needed. Manage fire suppression, search and rescue and damage mitigation activities.

Immediate

___ Receive appointment, Job Action Sheet and Facility System Status Report form from Facility Unit Leader.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Facility Unit Leader.
___ Assign teams to check system components of entire facility, and report back within 5 minutes.
___ Identify hazards, e.g. fire and assign staff to control and eliminate.
___ Receive initial assessment/damage reports and immediately relay information in a briefing to Emergency Incident Commander, Logistics Section Chief and Facility Unit Leader; follow-up with written documentation.
___ Notify Safety & Security Officer of unsafe areas and other security problems.
___ Assemble light-duty search rescue team(s) to retrieve victims and deliver to Triage Area. Obtain Search and Rescue Team equipment pack from Materials Supply Unit Leader.
___ Notify Labor Pool of staffing needs.
___ Identify areas where immediate repair efforts should be directed to restore critical services.

Intermediate

___ Arrange to have structural engineer under contract report and obtain more definitive assessment if indicated.
___ Inspect those areas of reported damage and photographically record.
___ Identify areas where immediate salvage efforts should be directed in order to save critical services and equipment.

Extended

___ Assign staff to salvage operations.
___ Assign staff to repair operations.
___ Brief Facility Unit Leader routinely to provide current damage/recovery status.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
SANITATION SYSTEMS OFFICER

Positioned Assigned To:

You Report To: ___________________________ (Facility Unit Leader)

Logistics Command Center: ______________________ Telephone:

Mission: Evaluate and monitor the patency of existing sewage and sanitation systems. Enact pre-established alternate methods of waste disposal if necessary.

Immediate

____ Receive appointment and Job Action Sheet from Facility Unit Leader.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Obtain briefing from Facility Unit Leader.
____ Coordinate the inspection of the hospital's sewage system with Damage Assessment and Control Officer.
____ Inspect the hazardous waste collection areas(s) to ensure patency of containment measures. Cordon off unsafe areas with assistance of the Safety & Security Officer.
____ Control observed hazards, leaks or contamination with the assistance of the Safety & Security Officer and the Damage Assessment and Control Officer.
____ Report all findings and actions to the Facility Unit Leader. Document all observations and actions.

Intermediate

____ Implement pre-established alternative waste disposal/collection plan, if necessary.
____ Assure that all sections and areas of the hospital are informed of the implementation of the alternative waste disposal/collection plan.
____ Position portable toilets in accessible areas; away from patient care and food preparation.
____ Ensure an adequate number of handwashing areas are operational near patient care/food preparation areas, and adjacent to portable toilet facilities.
____ Inform Infection Control personnel of actions and enlist assistance where necessary.

Extended

____ Monitor levels of all supplies, equipment and needs relevant to all sanitation operations.
____ Brief Facility Unit Leader routinely on current condition of all sanitation operations; communicate needs in advance.
____ Obtain support staff as necessary from Labor Pool.
____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
COMMUNICATIONS UNIT LEADER

Positioned Assigned To

You Report To: ________________________________ (Logistics Section Chief)

Logistics Command Center: ______________________ Telephone:

Mission: Organize and coordinate internal and external communications; act as custodian of all logged/documented communications.

Immediate

____ Receive appointment from Logistics Section Chief.
____ Read this entire Job Action Sheet and review organizational chart back.
____ Put on position identification vest.
____ Obtain briefing from Emergency Incident Commander or Logistics Section Chief.
____ Establish a Communications Center in close proximity to E.O.C.
____ Request the response of assigned amateur radio personnel assigned to facility.
____ Assess current status of internal and external telephone system and report to Logistics Section Chiefs and Damage Assessment and Control Officer.
____ Establish a pool of runners and assure distribution of 2-way radios to pre-designated areas.
____ Use pre-established message forms to document all communication. Instruct all assistants to do the same.
____ Establish contact with Liaison Officer.
____ Receive and hold all documentation related to internal facility communications.
____ Monitor and document all communications sent and received via the interhospital emergency communication network or other external communication.

Intermediate

____ Establish mechanism to alert Code Team and Fire Suppression Team to respond to internal patient and/or physical emergencies, i.e. cardiac arrest, fires, etc..

Extended

____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
TRANSPORTATION UNIT LEADER

Positioned Assigned To:
You Report To: __________________________ (Logistics Section Chief)
Logistics Command Center: ______________________ Telephone:

Mission: Organize and coordinate the transportation of all casualties, ambulatory and non-ambulatory. Arrange for the transportation of human and material resources to and from the facility.

Immediate

___ Receive appointment from Logistics Section Chief.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Logistics Section Chief.
___ Assess transportation requirements and needs for patients, personnel and materials; request patient transporters from Labor Pool to assist in the gathering of patient transport equipment.
___ Establish ambulance off-loading area in cooperation with the Triage Unit Leader.
___ Assemble gurneys, litters, wheelchairs and stretchers in proximity to ambulance off-loading area and Triage Area.
___ Establish ambulance loading area in cooperation with the Discharge Unit Leader.

Intermediate

___ Contact Safety & Security Officer on security needs of loading areas.
___ Provide for the transportation/shipment of resources into and out of the facility.
___ Secure ambulance or other transport for discharged patients.
___ Identify transportation needs for ambulatory casualties.

Extended

___ Maintain transportation assignment record in Triage Area, Discharge Area, and Material Supply Pool.
___ Keep Logistics Section Chief apprised of status.
___ Direct unassigned personnel to Labor Pool.
___ Observe and assist any staff who exhibits signs of stress or fatigue. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
MATERIALS SUPPLY UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________________ (Logistics Section Chief)

Logistics Command Center: __________________________ Telephone:

Mission: Organize and supply medical and non-medical care equipment and supplies.

Immediate

___ Receive appointment from Logistics Section Chief.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Logistics Section Chief.
___ Establish and communicate the operational status of the Materials Supply Pool to the Logistics Section Chief, E.O.C. and Procurement Unit Leader.
___ Dispatch the pre-designated supply carts to Triage Area, Immediate Treatment Area, Delayed Treatment Area and the Minor Treatment Area, once these areas have been established. Enlist the assistance of the Transportation Unit Leader.
___ Release Search and Rescue Team equipment packs to those teams designated by the Damage Assessment and Control Officer.
___ Collect and coordinate essential medical equipment and supplies. (Prepare to assist with equipment salvage and recovery efforts.)
___ Develop medical equipment inventory to include, but not limited to the following:
   ? Bandages, dressings, compresses and suture material
   ? Sterile scrub brushes, normal saline, anti-microbial skin cleanser.
   ? Waterless hand cleaner and gloves
   ? Fracture immobilization, splinting and casting materials
   ? Backboard, rigid stretchers
   ? Non-rigid transporting devices (litters)
   ? Oxygen-ventilation-suction devices
   ? Advance life support equipment (chest tube, airway, major suture trays)

Extended

___ Identify additional equipment and supply needs. Make requests/needs known through Logistics Section Chief. Gain the assistance of the Procurement Unit Leader when indicated.
___ Determine the anticipated pharmaceuticals needed with the assistance of the Medical Care Director and Pharmacy Unit Leader to obtain/request items.
___ Coordinate with Safety & Security Officer to protect resources.
___ Observe and assist staff who exhibit signs of stress or fatigue. Report concerns to Psychological Support Unit Leader.
___ Other concerns:
NUTRITIONAL SUPPLY UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________________________ (Logistics Section Chief)

Logistics Command Center: ________________________________ Telephone:

Mission: Organize food and water stores for preparation and rationing during periods of anticipated or actual shortage.

Immediate

___ Receive appointment from Logistics Section Chief.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Receive briefing from Logistics Section Chief.

___ Meet with and brief Nutritional Services personnel.

___ Estimate the number of meals which can be served utilizing existing food stores; implement rationing if situation dictates.

___ Inventory the current emergency drinking water supply and estimate time when re-supply will be necessary. Implement rationing if situation dictates.

___ Report inventory levels of emergency drinking water and food stores to Logistics Section Chief.

Intermediate

___ Meet with Labor Pool Unit Leader and Staff Support Unit Leader to discuss location of personnel refreshment and nutritional break areas.

___ Secure nutritional and water inventories with the assistance of the Safety & Security Officer.

___ Submit an anticipated need list of water and food to the Logistics Section Chief. Request should be based on current information concerning emergency events as well as projected needs for patients, staff and dependents.

Extended

___ Meet with Logistics Section Chief regularly to keep informed of current status.

___ Observe and assist staff who exhibit signs of stress and fatigue. Report concerns to Psychological Support Unit Leader. Provide for staff rest period and relief.

___ Other Concerns:
PLANNING SECTION CHIEF

Positioned Assigned To:

You Report To: ______________________________________________________________________ (Emergency Incident Commander)

Planning Command Center: ____________________________________________________________________ Telephone: ______________________________________________________________________


Immediate

____ Receive appointment from Incident Commander. Obtain packet containing Section's Job Action Sheets.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Obtain briefing from Incident Commander.
____ Recruit a documentation aide from the Labor Pool.
____ Appoint Planning unit leaders: Situation - Status Unit Leader, Labor Pool Unit Leader, Medical Staff Unit Leader, Nursing Unit Leader; distribute the corresponding Job Action Sheets and vests. (May be pre-established.)
____ Brief unit leaders after meeting with Emergency Incident Commander.
____ Provide for a Planning/Information Center.
____ Ensure the formulation and documentation of an incident-specific, facility Action Plan. Distribute copies to Incident Commander and all section chiefs.
____ Call for projection reports (Action Plan) from all Planning Section unit leaders and section chiefs for scenarios 4, 8, 24 & 48 hours from time of incident onset. Adjust time for receiving projection reports as necessary.
____ Instruct Situation - Status Unit Leader and staff to document/update status reports from all disaster section chiefs and unit leaders for use in decision making and for reference in post-disaster evaluation and recovery assistance applications.

Intermediate

____ Obtain briefings and updates as appropriate. Continue to update and distribute the facility Action Plan.
____ Schedule planning meetings to include Planning Section unit leaders, section chiefs and the Incident Commander for continued update of the facility Action Plan.

Extended

____ Continue to receive projected activity reports from section chiefs and Planning Section unit leaders at appropriate intervals.
____ Assure that all requests are routed/documented through the Communications Unit Leader.
____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
SITUATION-STATUS (SIT-STAT) UNIT LEADER

Positioned Assigned To:

You Report To: _______________________________ (Planning Section Chief)

Planning Command Center: __________________________ Telephone:

Mission: Maintain current information regarding the incident status for all hospital staff. Ensure a written record of the hospital's emergency planning and response. Develop the hospital's internal information network. Monitor the maintenance and preservation of the computer system.

Immediate

____ Receive appointment from Planning Section Chief.
____ Read this entire Job Action Sheet and review organizational chart back.
____ Put on position identification vest.
____ Obtain briefing from Planning Section Chief.
____ Obtain status report on computer information system.
____ Assign recorder to document decisions, actions and attendance in E.O.C.
____ Establish a status/condition board in E.O.C. with a documentation aide. Ensure that this board is kept current.
____ Assign recorder to Communications Unit Leader to document telephone, radio and memo traffic.

Intermediate

____ Ensure that an adequate number of recorders are available to assist areas as needed. Coordinate personnel with Labor Pool.
____ Supervise backup and protection of existing data for main and support computer systems.
____ Publish an internal incident informational sheet for employee information at least every 4-6 hours. Enlist the assistance of the Public Information Officer, Staff Support Unit Leader and Labor Pool Unit Leader.
____ Ensure the security and prevent the loss of medical record hard copies.

Extended

____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
LABOR POOL UNIT LEADER

Positioned Assigned To:

You Report To: _______________________________ (Planning Section Chief)

Planning Command Center: _______________________________ Telephone:

Mission: Collect and inventory available staff and volunteers at a central point. Receive requests and assign available staff as needed. Maintain adequate numbers of both medical and non-medical personnel. Assist in the maintenance of staff morale.

Immediate

___ Receive appointment from Planning Section Chief.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from the Planning Section Chief.
___ Establish Labor Pool area and communicate operational status to E.O.C. and all patient care and non-patient care areas.
___ Inventory the number and classify staff presently available. Use the following classifications and sub-classifications for personnel:

I. MEDICAL PERSONNEL

A. Physician (Obtain with assistance of Medical Staff Unit Leader.)

1. Critical Care
2. General Care
3. Other

B. Nurse

1. Critical Care
2. General Care
3. Other

C. Medical Technicians

1. Patient Care (aides, orderlies, EMTs, etc.)
2. Diagnostic

II. NON-MEDICAL PERSONNEL

A. Engineering/Maintenance/Materials Management
B. Environmental/Nutritional Services
C. Business/Financial
D. Volunteer
E. Other

___ Establish a registration and credentialing desk for volunteers not employed or associated with the hospital.
___ Obtain assistance from Safety & Security Officer in the screening and identification of volunteer staff.
___ Meet with Nursing Unit Leader, Medical Staff Unit Leader and Operations Section Chief to coordinate long term staffing needs.

Intermediate

___ Maintain log of all assignments.
___ Assist the Situation - Status Unit Leader in publishing an informational sheet to be distributed at frequent intervals to update the hospital population.
___ Maintain a message center in Labor Pool Area with the cooperation of Staff Support Unit Leader and Situation - Status Information Systems Unit Leader.

Extended

___ Brief Planning Section Chief as frequently as necessary on the status of labor pool numbers and composition.
___ Develop staff rest and nutritional area in coordination with Staff Support Unit Leader and Nutritional Supply Unit Leader.
___ Document actions and decisions on a continual basis.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
MEDICAL STAFF UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________________ (Planning Section Chief)

Planning Command Center: ___________________________ Telephone:

Mission: Collect available physicians, and other medical staff, at a central point. Credential volunteer medical staff as necessary. Assist in the assignment of available medical staff as needed.

Immediate

___ Receive assignment from Planning Section Chief.
___ Read this entire Job Action Sheet and refer to organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Emergency Incident Commander or Planning Section Chief.
___ Establish Medical Staff Pool in predetermined location and communicate operational status to E.O.C. and Medical Staff Director. Obtain documentation personnel from Labor Pool.
___ Inventory the number and types of physicians, and other staff present. Relay information to Labor Pool Unit Leader.
___ Register and credential volunteer physician/medical staff. Request the assistance of the Labor Pool Unit Leader and Safety & Security Officer when necessary.

Intermediate

___ Meet with Labor Pool Unit Leader, Nursing Service Unit Leader and Operations Section Chief to coordinate projected staffing needs and issues.
___ Assist the Medical Staff Director in the assignment of medical staff to patient care and treatment areas.

Extended

___ Establish a physician message center and emergency incident information board with the assistance of Staff Support Unit Leader and Labor Pool Unit Leader.
___ Assist the Medical Staff Director in developing a medical staff rotation schedule.
___ Assist the Medical Staff Director in maintaining a log of medical staff assignments.
___ Brief Planning Section Chief as frequently as necessary on the status of medical staff pool numbers and composition.
___ Develop a medical staff rest and nutritional area in coordination with Staff Support Unit Leader and the Nutritional Supply Unit Leader.
___ Document actions and decisions on a continual basis.
___ Observe and assist medical staff who exhibit signs of stress and other fatigue. Report concerns to the Medical Staff Director and/or Psychological Support Unit Leader.
___ Other concerns:
NURSING UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________ (Planning Section Chief)

Planning Command Center: ___________________ Telephone:

Mission: Organize and coordinate nursing and direct patient care services.

Immediate

___ Receive appointment from Planning Section Chief.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain a briefing from Emergency Incident Commander or Planning Section Chief
___ Appoint Patient Tracking Officer and Patient Information Officer and distribute the corresponding Job Action Sheets. Ensure the implementation of a patient tracking system.
___ Obtain current in-patient census and request a prioritization assessment (triage) of all in-house patients from the Medical Care Director.
___ Meet with Operations Chief, Medical Staff Director and Medical Care Director to assess and project nursing staff and patient care supply needs.
___ Recall staff as appropriate; assist the Labor Pool in meeting the nursing staff needs of the Medical Care Director.

Intermediate

___ Implement emergency patient discharge plan at the direction of the Emergency Incident Commander with support of the Medical Staff Director.
___ Meet regularly with the Patient Tracking Officer and Patient Information Officer.
___ Meet with Labor Pool Unit Leader, Medical Care Director and Operations Section Chief to coordinate long term staffing needs.
___ Coordinate with the Labor Pool staff the number of nursing personnel which may be released for future staffing or staffing at another facility.

Extended

___ Establish a staff rest and nutritional area in cooperation with Labor Pool Unit Leader and Staff Support Unit Leader.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:

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2 - 25
# PATIENT TRACKING OFFICER

Positioned Assigned To:

You Report To: ________________________________ (Nursing Unit Leader)

Planning Command Center: _____________________ Telephone:

**Mission:** Maintain the location of patients at all times within the hospital's patient care system.

<table>
<thead>
<tr>
<th>Immediate</th>
<th>Receive appointment from Nursing Unit Leader.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Read this entire Job Action Sheet and review organizational chart on back.</td>
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<tr>
<td></td>
<td>Put on position identification vest.</td>
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<tr>
<td></td>
<td>Obtain a briefing from Nursing Unit Leader.</td>
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<tr>
<td></td>
<td>Obtain patient census from Nursing Unit Leader, Admitting personnel or other source.</td>
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<tr>
<td></td>
<td>Establish an area near the E.O.C. to track patient arrivals, location and disposition.</td>
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<td></td>
<td>Obtain sufficient assistance to document current and accurate patient information.</td>
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<td></td>
<td>Ensure the proper use of the hospital disaster chart and tracking system for all newly admitted.</td>
</tr>
</tbody>
</table>

| Intermediate | Meet with Patient Information Officer, Public Information Officer and Liaison Officer on a routine basis to update and exchange patient information and census data. |

| Extended | Maintain log to document the location and time of all patients cared for. |
|          | Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief. |
|          | Other concerns: |
PATIENT INFORMATION OFFICER

Positioned Assigned To:

You Report To: ________________________________ (Nursing Unit Leader)

Planning Command Center: ______________________ Telephone:

Mission: Provide information to visitors and families regarding status and location of patients. Collect information necessary to complete the Disaster Welfare Inquiry process in cooperation with the American Red Cross.

Immediate

_____ Receive appointment from Nursing Unit Leader.

_____ Read this entire Job Action Sheet and review organizational chart back.

_____ Put on position identification vest.

_____ Obtain briefing on incident and any special instructions from Nursing Unit Leader.

_____ Establish Patient Information Area away from E.O.C.

_____ Meet with Patient Tracking Officer to exchange patient related information and establish regularly scheduled meetings.

Intermediate

_____ Direct patient related news releases through Nursing Unit Leader to the Public Information Officer.

_____ Receive and screen requests about the status of individual patients. Obtain appropriate information and relay to the appropriate requesting party.

_____ Request assistance of runners and amateur radio operators from Labor Pool as needed.

Extended

_____ Work with American Red Cross representative in development of the Disaster Welfare Inquiry information.

_____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

_____ Other concerns:
FINANCE SECTION CHIEF

Positioned Assigned To:

You Report To: ________________________________ (Emergency Incident Commander)

Finance Command Center: ____________________________ Telephone:

Mission: Monitor the utilization of financial assets. Oversee the acquisition of supplies and services necessary to carry out the hospital's medical mission. Supervise the documentation of expenditures relevant to the emergency incident.

Immediate

___ Receive appointment from Emergency Incident Commander. Obtain packet containing Section's Job Action Sheets.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Obtain briefing from Emergency Incident Commander.

___ Appoint Time Unit Leader, Procurement Unit Leader, Claims Unit Leader and Cost Unit Leader; distribute the corresponding Job Action Sheets and vests. (May be pre-established.)

___ Confer with Unit Leaders after meeting with Emergency Incident Commander; develop a section action plan.

___ Establish a Financial Section Operations Center. Ensure adequate documentation/recording personnel.

Intermediate

___ Approve a "cost-to-date" incident financial status report submitted by the Cost Unit Leader every eight hours summarizing financial data relative to personnel, supplies and miscellaneous expenses.

___ Obtain briefings and updates from Emergency Incident Commander as appropriate. Relate pertinent financial status reports to appropriate chiefs and unit leaders.

___ Schedule planning meetings to include Finance Section unit leaders to discuss updating the section's incident action plan and termination procedures.

Extended

___ Assure that all requests for personnel or supplies are copied to the Communications Unit Leader in a timely manner.

___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

___ Other concerns:
TIME UNIT LEADER

Positioned Assigned To:

You Report To: ________________________________ (Finance Section Chief).

Finance Command Center: _______________ Telephone:

Mission: Responsible for the documentation of personnel time records. The monitoring and reporting of regular and overtime hours worked/volunteered.

Immediate

___ Receive appointment from Finance Section Chief.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Finance Section Chief; assist in the development of the section action plan.
___ Ensure the documentation of personnel hours worked and volunteer hours worked in all areas relevant to the hospital’s emergency incident response. Confirm the utilization of the Emergency Incident Time Sheet by all section chiefs and/or unit leaders. Coordinate with Labor Pool Unit Leader.

Intermediate

___ Collect all Emergency Incident Time Sheets from each work area for recording and tabulation every eight hours, or as specified by the Finance Section Chief.
___ Forward tabulated Emergency Incident Time Sheets to Cost Unit Leader every eight hours.

Extended

___ Prepare a total of personnel hours worked during the declared emergency incident.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
PROCUREMENT UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________ (Finance Section Chief)

Finance Command Center: ____________________ Telephone:

Mission: Responsible for administering accounts receivable and payable to contract and non-contract vendors.

Immediate

____ Receive appointment from Finance Section Chief.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Obtain briefing from Finance Section Chief; assist in the development of the section action plan.
____ Ensure the separate accounting of all contracts specifically related to the emergency incident; and all purchases within the enactment of the emergency incident response plan.
____ Establish a line of communication with the Material Supply Unit Leader.
____ Obtain authorization to initiate purchases from the Finance Section Chief, or authorized representative.

Intermediate

____ Forward a summary accounting of purchases to the Cost Unit Leader every eight hours.

Extended

____ Prepare a Procurement Summary Report identifying all contracts initiated during the declared emergency incident.
____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
CLAIMS UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________________________ (Finance Section Chief)

Finance Command Center: __________________________ Telephone:

Mission: Responsible for receiving, investigating and documenting all claims reported to the hospital during the emergency incident which are alleged to be the result of an accident or action on hospital property.

Immediate

____ Receive appointment from Finance Section Chief.

____ Read this entire Job Action Sheet and review the organizational chart on back.

____ Put on position identification vest.

____ Obtain briefing from Finance Section Chief; assist in the development of section action plan.

____ Receive and document alleged claims issued by employees and non-employees. Use photographs or video documentation when appropriate.

____ Obtain statements as quickly as possible from all claimants and witnesses.

____ Enlist the assistance of the Safety & Security Officer where necessary.

Intermediate

____ Inform Finance Section Chief of all alleged claims as they are reported.

____ Document claims on hospital risk/loss forms.

Extended

____ Report any cost incurred as a result of a claim to the Cost Unit Leader as soon as possible.

____ Prepare a summary of all claims reported during the declared emergency incident.

____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

____ Other concerns:
COST UNIT LEADER

Positioned Assigned To:
You Report To: _______________________________ (Finance Section Chief)
Finance Command Center: _______________________________ Telephone:

Mission: Responsible for providing cost analysis data for declared emergency incident. Maintenance of accurate records of incident cost.

Immediate

____ Receive appointment from Finance Section Chief.
____ Read this entire Job Action Sheet and review the Organizational chart on back.
____ Put on position identification vest.
____ Obtain briefing from Finance Section Chief; assist in development of section action plan.
____ Meet with Time Unit Leader, Procurement Unit Leader and Claims Unit Leader to establish schedule for routine reporting periods.

Intermediate

____ Prepare a "cost-to-date" report form for submission to Finance Section Chief once every eight hours.
____ Inform all section chief's of pertinent cost data at the direction of the Finance Section Chief or Emergency Incident Commander.

Extended

____ Prepare a summary of all costs incurred during the declared emergency incident.
____ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Other concerns:
OPERATIONS SECTION CHIEF

Positioned Assigned To:

You Report To: __________________________ (Emergency Incident Commander)

Operations Command Center: __________________________ Telephone:

Mission: Organize and direct aspects relating to the Operations Section. Carry out directives of the Emergency Incident Commander. Coordinate and supervise the Medical Services Subsection, Ancillary Services Subsection and Human Services Subsection of the Operations Section.

Immediate

___ Receive appointment from Emergency Incident Commander. Obtain packet containing Section’s Job Action Sheets.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Emergency Incident Commander.
___ Appoint Medical Staff Director, Medical Care Director, Ancillary Services Director and Human Services Director and transfer the corresponding Job Action Sheets. (May be pre-established.)
___ Brief all Operations Section directors on current situation and develop the section’s initial action plan. Designate time for next briefing.
___ Establish Operations Section Center in proximity to E.O.C.
___ Meet with the Medical Staff Director, Medical Care Director and Nursing Unit Leader to plan and project patient care needs.

Intermediate

___ Designate times for briefings and updates with all Operations Section directors to develop/update section’s action plan.
___ Ensure that the Medical Services Subsection, Ancillary Services Subsection and Human Services Subsection are adequately staffed and supplied.
___ Brief the Emergency Incident Commander routinely on the status of the Operations Section.

Extended

___ Assure that all communications are copied to the Communications Unit Leader; document all actions and decisions.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
MEDICAL STAFF DIRECTOR

Positioned Assigned To:

You Report To: ____________________________ (Operations Section Chief)

Operations Command Center: ____________________________ Telephone:

Mission: Organize, prioritize and assign physicians to areas where medical care is being delivered. Advise the Incident Commander on issues related to the Medical Staff.

Immediate

___ Receive appointment from the Operations Section Chief.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Meet with Operations Section Chief and other Operations Section directors for briefing and development of an initial action plan.
___ Meet with the Medical Staff Unit Leader to facilitate recruitment and staffing of Medical Staff. Assist in Medical Staff credentialing issues.
___ Document all physician assignments; facilitate rotation of physician staff with the assistance of the Medical Staff Unit Leader; where necessary, assist with physician orientation to in-patient and treatment areas.
___ Meet with Operations Chief, Medical Care Director and Nursing Unit Leader to plan and project patient care needs.
___ Provide medical staff support for patient priority assessment to designate patients for early discharge.

Intermediate

___ Meet with Incident Commander for appraisal of the situation regarding medical staff and projected needs. Establish meeting schedule with IC if necessary.
___ Maintain communication with the Medical Care Director to co-monitor the delivery and quality of medical care in all patient care areas.

Extended

___ Ensure maintenance of Medical Staff time sheet; obtain clerical support from Labor Pool if necessary.
___ Meet as often as necessary with the Operations Section Chief to keep appraised of current conditions.
___ Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Other concerns:
### MEDICAL CARE DIRECTOR

<table>
<thead>
<tr>
<th>Mission:</th>
<th>Organize and direct the overall delivery of medical care in all areas of the hospital.</th>
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<tr>
<td>Immediate</td>
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<tr>
<td></td>
<td>Receive appointment from the Operations Section Chief and receive the Job Action Sheets for the Medical Services Subsection.</td>
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<tr>
<td></td>
<td>Read this entire Job Action Sheet and review organizational chart on back.</td>
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<tr>
<td></td>
<td>Put on position identification vest.</td>
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<tr>
<td></td>
<td>Meet with Operations Section Chief and other Operations Section directors for briefing and development of an initial action plan. Establish time for follow up meetings.</td>
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<td>Appoint the In-Patient Areas Supervisor and the Treatment Areas Supervisor and transfer the corresponding Job Action Sheets.</td>
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<td>Assist in establishing an Operations Section Center in proximity to the E.O.C.</td>
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<td></td>
<td>Meet with In-Patient Areas Supervisor and Treatment Areas Supervisor to discuss medical care needs and physician staffing in all patient care areas.</td>
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<td>Confer with the Operations Chief, Medical Staff Director and Nursing Unit Leader to make medical staff and nursing staffing/material needs known.</td>
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<td>Request Medical Staff Director to provide medical staff support to assist with patient priority assessment to designate those eligible for early discharge.</td>
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<td>Establish 2-way communication (radio or runner) with In-Patient Areas Supervisor and Treatment Areas Supervisor.</td>
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<tr>
<td>Intermediate</td>
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<tr>
<td></td>
<td>Meet regularly with Medical Staff Director, In-Patient Areas Supervisor and Treatment Areas Supervisor to assess current and project future patient care conditions.</td>
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<tr>
<td>Extended</td>
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<td></td>
<td>Brief Operations Section Chief routinely on the status/quality of medical care.</td>
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<td></td>
<td>Observe all staff, volunteers and patients for signs of stress and inappropriate behavior. Report concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.</td>
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<td>Other concerns:</td>
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</tbody>
</table>
IN-PATIENT AREAS SUPERVISOR

Positioned Assigned To:

You Report To: ________________________________ (Medical Care Director)

Operations Command Center: ___________________________ Telephone:

Mission: Assure treatment of in-patients and manage the in-patient care area(s). Provide for a controlled patient discharge.

Immediate

___ Receive appointment from Medical Care Director and receive Job Action Sheets for the Surgical Services, Maternal - Child, Critical Care, General Nursing and Out Patient Services Unit Leaders.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Receive briefing from Medical Care Director; develop initial action plan with Medical Care Director, Treatment Areas Supervisor and Medical Staff Director.

___ Appoint Unit Leaders for:

  ? Surgical Services
  ? Maternal - Child
  ? Critical Care
  ? General Nursing Care
  ? Out Patient Services

___ Distribute corresponding Job Action Sheets, request a documentation aide/assistant for each unit leader from Labor Pool.

___ Brief unit leaders on current status. Designate time for follow-up meeting.

___ Assist establishment of in-patient care areas in new locations if necessary.

___ Instruct all unit leaders to begin patient priority assessment; designate those eligible for early discharge. Remind all unit leaders that all in-patient discharges are routed through the Discharge Unit.

___ Assess problems and treatment needs in each area; coordinate the staffing and supplies between each area to meet needs.

___ Meet with Medical Care Director to discuss medical care plan of action and staffing in all in-patient care areas.

___ Receive, coordinate and forward requests for personnel and supplies to the Labor Pool Unit Leader, Medical Care Director and Material Supply Unit Leader. Copy all communication to the Communications Unit Leader.

Intermediate

___ Contact the Safety & Security Officer for any security needs. Advise the Medical Care Director of any actions/requests.
____ Report equipment needs to Materials Supply Unit Leader.
____ Establish 2-way communication (radio or runner) with Medical Care Director.
____ Assess environmental services (housekeeping) needs in all in-patient care areas; contact Sanitation Systems Officer for assistance.

Extended
____ Assist Patient Tracking Officer and Patient Information Officer in obtaining information.
____ Observe and assist any staff who exhibit signs of stress and fatigue. Report any concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
____ Report frequently and routinely to Medical Care Director to keep apprised of situation.
____ Document all action/decisions with a copy sent to the Medical Care Director.
____ Other concerns:
SURGICAL SERVICES UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________ (In-Patient Areas Supervisor)

Operations Command Center: ____________________________ Telephone:

**Mission:** Supervise and maintain the surgical capabilities to the best possible level in respect to current conditions in order to meet the needs of in-house and newly admitted patients.

**Immediate**

___ Receive appointment from In-Patient Areas Supervisor.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from In-Patient Areas Supervisor with other In-Patient Area unit leaders.
___ Assess current pre-op, operating suite and post-op capabilities. Project immediate and prolonged capacities to provide surgical services based on current data.
___ Begin patient priority assessment; designate those eligible for early discharge. Remind all staff that all in-patient discharges are routed through the Discharge Unit.
___ Develop action plan in cooperation with other In-Patient Area unit leaders and the In-Patient Areas Supervisor.
___ Request needed resources from the In-Patient Areas Supervisor.
___ Assign and schedule O.R. teams as necessary; obtain additional personnel from Labor Pool.

**Intermediate**

___ Identify location of Immediate and Delayed Treatment areas; inform patient transportation personnel.
___ Contact Safety & Security Officer of security and traffic flow needs in the Surgical Services area. Inform In-Patient Areas Supervisor of action.
___ Report equipment/material needs to Materials Supply Unit Leader. Inform In-Patient Areas Supervisor of action.

**Extended**

___ Ensure that all area and individual documentation is current and accurate. Request documentation/clerical personnel from Labor Pool if necessary.
___ Keep In-Patient Areas Supervisor, Immediate Treatment and Delayed Treatment Unit Leader apprised of status, capabilities and projected services.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to In-Patient Areas Supervisor. Provide for staff rest periods and relief.
___ Review and approve the area documentation aide’s recordings of actions/decisions in the Surgical Services Area. Send copy to the In-Patient Areas Supervisor.
___ Direct non-utilized personnel to Labor Pool.
___ Other concerns:
MATERNAL-CHILD UNIT LEADER

Positioned Assigned To:

You Report To: ______________________________ (In-Patient Areas Supervisor)

Operations Command Center: __________________________ Telephone:

Mission: Supervise and maintain the obstetrical, labor & delivery, nursery, and pediatric services to the best possible level in respect to current conditions in order to meet the needs of in-house and newly admitted patients.

Immediate

____ Receive appointment from In-Patient Areas Supervisor.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Receive briefing from In-Patient Areas Supervisor with other In-Patient Area unit leaders.
____ Assess current capabilities. Project immediate and prolonged capacities to provide all obstetrical and pediatric services based on current capabilities. (Give special consideration to the possibility of an increase in normal and premature deliveries due to environmental/emotional stress.)
____ Begin patient priority assessment; designate those eligible for early discharge. Remind all staff that all in-patient discharges are routed through the Discharge Unit.
____ Develop action plan in cooperation with other In-Patient Area unit leaders and the In-Patient Areas Supervisor.
____ Request needed resources from the In-Patient Areas Supervisor.
____ Assign delivery and patient teams as necessary; obtain additional personnel from Labor Pool.

Intermediate

____ Identify location of Immediate and Delayed Treatment areas; inform patient transportation personnel.
____ Contact Safety & Security Officer of security and traffic flow needs. Inform In-Patient Areas Supervisor of action.
____ Report equipment/material needs to Materials Supply Unit Leader. Inform In-Patient Areas Supervisor of action.

Extended

____ Ensure that all area and individual documentation is current and accurate. Request documentation/clerical personnel from Labor Pool if necessary.
____ Keep In-Patient Areas Supervisor, Immediate Treatment and Delayed Treatment Unit Leader apprised of status, capabilities and projected services.
____ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to In-Patient Areas Supervisor. Provide for staff rest periods and relief.
____ Review and approve the area documentation aide's recordings of actions/decisions in the Surgical Services Area. Send copy to the In-Patient Areas Supervisor.
___ Direct non-utilized personnel to Labor Pool.
___ Other concerns:
CRITICAL CARE UNIT LEADER

Positioned Assigned To:

You Report To: __________________________________ (In-Patient Areas Supervisor)

Operations Command Center: ____________________________ Telephone:

Mission: Supervise and maintain the critical care capabilities to the best possible level to meet the needs of in-house and newly admitted patients.

Immediate
____ Receive appointment from In-Patient Areas Supervisor.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Receive briefing from In-Patient Areas Supervisor with other In-Patient Area unit leaders.
____ Assess current critical care patient capabilities. Project immediate and prolonged capabilities to provide services based on known resources. Obtain medical staff support to make patient triage decisions if warranted.
____ Develop action plan in cooperation with other In-Patient Area unit leaders and the In-Patient Areas Supervisor.
____ Request the assistance of the In-Patient Areas Supervisor to obtain resources if necessary.
____ Assign patient care teams as necessary; obtain additional personnel from Labor Pool.

Intermediate
____ Identify location of Discharge Area; inform patient transportation personnel.
____ Contact Safety & Security Officer of security and traffic flow needs in the critical care services area(s). Inform In-Patient Areas Supervisor of action.
____ Report equipment/material needs to Materials Supply Unit Leader. Inform In-Patient Areas Supervisor of action.

Extended
____ Ensure that all area and individual documentation is current and accurate. Request documentation/clerical personnel from Labor Pool if necessary.
____ Keep In-Patient Areas Supervisor, Immediate Treatment and Delayed Treatment Unit Leaders apprised of status, capabilities and projected services.
____ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to In-Patient Areas Supervisor. Provide for staff rest periods and relief.
____ Review and approve the area document’s recordings of actions/decisions in the Critical Care Area(s). Send copy to the In-Patient Areas Supervisor.
____ Direct non-utilized personnel to Labor Pool.
____ Other concerns:
GENERAL NURSING CARE UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________________________ (In-Patient Areas Supervisor)

Operations Command Center: ______________________________ Telephone:

Mission: Supervise and maintain general nursing services to the best possible level to meet the needs of in-house and newly admitted patients.

Immediate

___ Receive appointment from In-Patient Areas Supervisor.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from In-Patient Areas Supervisor with other In-Patient Area unit leaders.
___ Assess current capabilities. Project immediate and prolonged capacities to provide general medical/surgical nursing services based on current data.
___ Begin patient priority assessment; designate those eligible for early discharge. Remind all staff that all in-patient discharges are routed through the Discharge Unit.
___ Develop action plan in cooperation with other In-Patient Area unit leaders and the In-Patient Areas Supervisor.
___ Request needed resources from the In-Patient Areas Supervisor.
___ Assign patient care teams as necessary; obtain additional personnel from Labor Pool.

Intermediate

___ Identify location of Immediate and Delayed Treatment areas; inform patient transportation personnel.
___ Contact Safety & Security Officer of security and traffic flow needs. Inform In-Patient Areas Supervisor of action.
___ Report equipment/material needs to Materials Supply Unit Leader. Inform In-Patient Areas Supervisor of action.

Extended

___ Ensure that all area and individual documentation is current and adhered. Request documentation/clerical personnel from Labor Pool if necessary.
___ Keep In-Patient Areas Supervisor, Immediate Treatment and Delayed Treatment Unit Leader apprised of status, capabilities and projected services.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to In-Patient Areas Supervisor. Provide for staff rest periods and relief.
___ Review and approve the area documenter's recordings of actions/decisions in the Surgical Services Area. Send copy to the In-Patient Areas Supervisor.
___ Direct non-utilized personnel to Labor Pool.
___ Other concerns:
OUT PATIENT SERVICES UNIT LEADER

Positioned Assigned To:

You Report To: _____________________________ (In-Patient Areas Supervisor)

Operations Command Center: ____________________________ Telephone:

Mission: Prepare any out patient service areas to meet the needs of in-house and newly admitted patients.

Immediate

___ Receive appointment from In-Patient Areas Supervisor.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from In-Patient Areas Supervisor with other In-Patient Area unit leaders.
___ Assess current capabilities. Project immediate and prolonged capacities to provide nursing services based on current data.
___ Begin out patient priority assessment; designate those eligible for immediate discharge; admit those patients unable to be discharged. Remind all staff that all patient discharges are routed through the Discharge Unit.
___ Develop action plan in cooperation with other In-Patient Area unit leaders and the In-Patient Areas Supervisor.
___ Request needed resources from the In-Patient Areas Supervisor.
___ Assign patient care teams in configurations to meet the specific mission of the Out Patient areas; obtain additional personnel as necessary from Labor Pool.

Intermediate

___ Contact Safety & Security Officer of security and traffic flow needs. Inform In-Patient Areas Supervisor of action.
___ Report equipment/material needs to Materials Supply Unit Leader. Inform In-Patient Areas Supervisor of action.

Extended

___ Ensure that all area and individual documentation is current and accurate. Request documentation/clerical personnel from Labor Pool if necessary.
___ Keep In-Patient Areas Supervisor apprised of status, capabilities and projected services.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to In-Patient Areas Supervisor. Provide for staff rest periods and relief.
___ Review and approve the area documenter's recordings of actions/decisions in the Surgical Services Area. Send copy to the In-Patient Areas Supervisor.
___ Direct non-utilized personnel to Labor Pool.
___ Other concerns:
TREATMENT AREAS SUPERVISOR

Positioned Assigned To:

You Report To: .......................................................... (Medical Care Director)

Operations Command Center: __________________________ Telephone:

Mission: Initiate and supervise the patient triage process. Assure treatment of casualties according to triage categories and manage the treatment area(s). Provide for a controlled patient discharge. Supervise morgue service.

Immediate

____ Receive appointment from Medical Care Director and Job Action Sheets for the Triage, Immediate-Delayed-Minor Treatment, Discharge and Morgue Unit Leaders.

____ Read this entire Job Action Sheet and review organizational chart on back.

____ Put on position identification vest.

____ Receive briefing from Medical Care Director and develop initial action plan with Medical Care Director, In-Patient Areas Supervisor and Medical Staff Director.

____ Appoint unit leaders for the following treatment areas:

? Triage
? Immediate Treatment
? Delayed Treatment
? Minor Treatment
? Discharge
? Morgue

Distribute corresponding Job Action Sheets, request a documentation aide/assistant for each unit leader from Labor Pool.

____ Brief Treatment Area unit leaders. Designate time for follow-up meeting.

____ Assist establishment of Triage, Immediate, Delayed, Minor Treatment, Discharge and Morgue Areas in pre-established locations.

____ Assess problem, treatment needs and customize the staffing and supplies in each area.

____ Meet with Medical Care Director to discuss medical care plan of action and staffing in all triage/treatment/discharge/morgue areas. Maintain awareness of all in-patient capabilities, especially surgical services via the In-Patient Areas Supervisor.

____ Receive, coordinate and forward requests for personnel and supplies to the Labor Pool Unit Leader, Medical Care Director and Material Supply Unit Leader. Copy all communication to the Communications Unit Leader.

Intermediate

____ Contact the Safety and Security Officer for any security needs, especially those in the Triage, Discharge and Morgue areas. Advise the Medical Care Director of any actions/requests.
___ Report equipment needs to Materials Supply Unit Leader.
___ Establish 2-way communication (radio or runner) with Medical Care Director.
___ Assess environmental services (housekeeping) needs for all Treatment Areas; contact Sanitation Systems Officer for assistance.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report any concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.
___ Assist Patient Tracking Officer and Patient Information Officer in obtaining information.

Extended

___ Report frequently and routinely to Medical Care Director to keep apprised of situation.
___ Document all action/decisions with a copy sent to the Medical Care Director.
___ Other concerns:
TRIAGE UNIT LEADER

Positioned Assigned To:

You Report To: _______________________________ (Treatment Areas Supervisor)

Operations Command Center: ___________________________ Telephone:

Mission: Sort casualties according to priority of injuries, and assure their disposition to the proper treatment area.

Immediate
____ Receive appointment from Treatment Areas Supervisor.
____ Read this entire Job Action Sheet and review organizational chart on back.
____ Put on position identification vest.
____ Receive briefing from Treatment Areas Supervisor with other Treatment Area unit leaders.
____ Establish patient Triage Area; consult with Transportation Unit Leader to designate the ambulance off-loading area.
____ Ensure sufficient transport equipment and personnel for Triage Area.
____ Assess problem, triage-treatment needs relative to specific incident.
____ Assist the In-Patient Areas Supervisor with triage of internal hospital patients, if requested by Treatment Areas Supervisor.
____ Develop action plan, request needed resources from Treatment Areas Supervisor.
____ Assign triage teams.

Intermediate
____ Identify location of Immediate, Delayed, Minor Treatment, Discharge and Morgue areas; coordinate with Treatment Areas Supervisor.
____ Contact Safety & Security Officer of security and traffic flow needs in the Triage Area. Inform Treatment Areas Supervisor of action.

Extended
____ Report emergency care equipment needs to Materials Supply Unit Leader. Inform Treatment Areas Supervisor of action.
____ Ensure that the disaster chart and admission forms are utilized. Request documentation/clerical personnel from Labor Pool if necessary.
____ Keep Treatment Areas Supervisor apprised of status, number of injured in the Triage Area or expected to arrive there.
____ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to Treatment Areas Supervisor. Provide for staff rest periods and relief.
____ Review and approve the area documenter's recordings of actions/decisions in the Triage Area. Send copy to the Treatment Areas Supervisor.
____ Direct non-utilized personnel to Labor Pool.
____ Other concerns:
# IMMEDIATE TREATMENT UNIT LEADER

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<th>Positioned Assigned To:</th>
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<tbody>
<tr>
<td>You Report To:</td>
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<tr>
<td>(Treatment Areas Supervisor)</td>
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<tr>
<td>Operations Command Center:</td>
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<td>Telephone:</td>
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**Mission:** Coordinate the care given to patients received from the Triage Area; assure adequate staffing and supplies in the Immediate Treatment Area; facilitate the treatment and disposition of patients in the Immediate Treatment Area.

**Immediate**
- ___ Receive appointment from Treatment Areas Supervisor.
- ___ Read this entire Job Action Sheet and review the organizational chart on back.
- ___ Put on position identification vest.
- ___ Receive briefing from Treatment Areas Supervisor with other Treatment Area unit leaders.
- ___ Assist Treatment Areas Unit Leader in the establishment of Immediate Treatment Area.
- ___ Assess situation/area for supply and staffing needs; request staff and supplies from the Labor Pool and Materials Supply Unit Leaders. Request medical staff support through Treatment Areas Supervisor.
- ___ Obtain an adequate number of patient transportation resources from the Transportation Unit Leader to ensure the movement of patients in and out of the area.

**Intermediate**
- ___ Ensure the rapid disposition and flow of treated patients from the Immediate Treatment Area.
- ___ Report frequently and routinely to the Treatment Areas Supervisor on situational status.

**Extended**
- ___ Observe and assist any staff who exhibits signs of stress and fatigue. Report any concerns to the Treatment Areas Unit Leader. Provide for staff rest periods and relief.
- ___ Review and approve the area documenter's recordings of actions/decisions in the Immediate Treatment Area. Send copy to the Treatment Areas Supervisor.
- ___ Direct non-utilized personnel to Labor Pool.
- ___ Other concerns:
HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

Job Action Sheet

MEDICAL SERVICES SUBSECTON

Delayed Treatment Unit Leader

Revised: 5/93 Reviewed: 6/98

DELAYED TREATMENT UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________ (Treatment Areas Supervisor)

Operations Command Center: ____________________________ Telephone:

Mission: Coordinate the care given to patients received from the Triage Area. Assure adequate staffing and supplies in the Delayed Treatment Area. Facilitate the treatment and disposition of patients in the Delayed Treatment Area.

Immediate

_____ Receive appointment from Treatment Areas Supervisor.

_____ Read this entire Job Action Sheet and review the organizational chart on back.

_____ Put on position identification vest.

_____ Receive briefing from Treatment Areas Supervisor with other Treatment Area unit leaders.

_____ Assist Treatment Areas Supervisor in the establishment of Delayed Treatment Area.

_____ Assess situation/area for supply and staffing need; request staff and supplies from the Labor Pool and Materials Supply Unit Leaders. Request medical staff support through Treatment Areas Supervisor.

_____ Obtain an adequate number of patient transportation resources from the Transportation Unit Leader to ensure the movement of patients in and out of area.

Intermediate

_____ Ensure the rapid disposition and flow of treated patients from the Delayed Treatment Area.

_____ Report frequently and routinely to the Treatment Areas Supervisor on situational status.

Extended

_____ Observe and assist any staff who exhibits signs of stress and fatigue. Report any concerns to the Treatment Areas Supervisor. Provide for staff rest periods and relief.

_____ Review and approve the area documenter’s recordings of actions/decisions in the Delayed Treatment Area. Send copy to the Treatment Areas Supervisor.

_____ Direct non-utilized personnel to Labor Pool.

_____ Other concerns:
MINOR TREATMENT UNIT LEADER

Positioned Assigned To:

You Report To: __________________________ (Treatment Areas Supervisor)

Operations Command Center: ________________________ Telephone:

Mission: Coordinate the minor care of patients received from the Triage Area, and other areas of the hospital. Assure adequate staffing and supplies in the Minor Treatment. Facilitate the minor treatment of patients and disposition.

Immediate  ___ Receive appointment from the Treatment Areas Supervisor.
            ___ Read this entire Job Action Sheet and review the organizational chart on back.
            ___ Put on position identification vest.
            ___ Receive briefing from Treatment Areas Supervisor with other Treatment Area unit leaders.
            ___ Assist Treatment Areas Supervisor in the establishment of Minor Treatment Area.
            ___ Assess situation/area for supply and staffing need; request staff and supplies from the Labor Pool and Materials Supply Unit Leaders. Request medical staff support through Treatment Areas Supervisor.

Intermediate ___ Obtain an adequate number of patient transportation resources from the Transportation Unit Leader to ensure the movement of patients in and out of the area.
             ___ Ensure a rapid, appropriate disposition of patients treated within Minor Treatment Area.
             ___ Report frequently and routinely to the Treatment Areas Supervisor on situational status.

Extended  ___ Observe and assist any staff who exhibit signs of stress or fatigue. Report any concerns to the Treatment Areas Supervisor. Provide for staff rest periods and relief.
            ___ Review and approve the area documenter's recordings of action/decisions in the Minor Treatment Area. Send copy to the Treatment Areas Supervisor.
            ___ Direct non-utilized personnel to Labor Pool.
            ___ Other concerns:
HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

Job Action Sheet

MEDICAL SERVICES SUBSECTION
Discharge Unit Leader

Revised: 5-93  Reviewed: 6-98

DISCHARGE UNIT LEADER

Positioned Assigned To:

You Report To: ________________________________ (Treatment Areas Supervisor)

Operations Command Center: __________________________ Telephone:

Mission:

Coordinate the controlled discharge, (possible observation and discharge) of patients received from all areas of the hospital. Facilitate the process of final patient disposition by assuring adequate staff and supplies in the Discharge Area.

Immediate

___ Receive appointment from the Treatment Areas Supervisor.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Treatment Areas Supervisor with other Treatment Areas unit leaders.
___ Assist Treatment Areas Supervisor in the establishment of Discharge Area. Coordinate with Human Services Director, Transportation Unit Leader and Safety & Security Officer.
___ Assess situation/area for supply and staffing need; request staff and supplies from the Labor Pool and Materials Supply Unit Leaders. Request medical staff support through Treatment Areas Supervisor. Prepare area for minor medical treatment and extended observation.

Intermediate

___ Request involvement of Human Services Director in appropriate patient disposition. Communicate regularly with Patient Tracking Officer.
___ Ensure that all patients discharged from area are tracked and documented in regards to disposition. Ensure a copy of the patient chart is sent with patient transfers. If copy service is not available, record chart number and destination for future retrieval. (If other hospital areas are discharging patients, provide for accurate controls and documentation.) Provide for patient discharge services in Morgue Area.
___ Report frequently and routinely to Treatment Areas Supervisor on situational status.

Extended

___ Observe and assist any staff or patient who exhibits sign of stress. Report concerns to the Treatment Areas Supervisor. Provide for staff rest periods and relief.
___ Review and approve the area documenter's recordings of action/decisions in the Discharge Area. Send copy to the Treatment Areas Supervisor.
___ Direct non-utilized personnel to Labor Pool.
___ Other concerns:
# MORGUE UNIT LEADER

**(Positioned Assigned To):**

**You Report To:**

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<th>Mission:</th>
<th>Collect, protect and identify deceased patients. Assist Discharge Area Unit Leader in appropriate patient discharge.</th>
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**Immediate**

- Receive appointment from the Treatment Areas Supervisor.
- Read this entire Job Action Sheet and review the organizational charton back.
- Put on position identification vest.
- Receive briefing from Treatment Areas Supervisor with other Treatment Area unit leaders.
- Establish Morgue Area: coordinate with Treatment Areas Supervisor and Medical Care Director.
- Request an on-call physician from the Treatment Areas Supervisor to confirm any resuscitatable casualties in Morgue Area.
- Obtain assistance from the Transportation Unit Leader for transporting deceased patients.
- Assure all transporting devices are removed from under deceased patients and returned to the Triage Area.

**Extended**

- Maintain master list of deceased patients with time of arrival for Patient Tracking Officer and Patient Information Officer.
- Assure all personal belongings are kept with deceased patients and are secured.
- Assure all deceased patients in Morgue Areas are covered, tagged and identified where possible.
- Keep Treatment Areas unit leaders apprised of number of deceased.
- Contact the Safety & Security Officer for any morgue security needs.
- Arrange for frequent rest and recovery periods, as well as relief for staff.
- Schedule meetings with the Psychological Support Unit Leader to allow for staff debriefing.
- Observe and assist any staff who exhibits signs of stress or fatigue. Report any concerns to the Treatment Areas Supervisor.
- Review and approve the area documenter's recording of action/decisions in the Morgue Area. Send copy to the Treatment Areas Supervisor.
- Direct non-utilized personnel to Labor Pool.
- Other concerns:
ANCILLARY SERVICES DIRECTOR

Positioned Assigned To:

You Report To: (Operations Section Chief)

Operations Command Center: Telephone:

Mission: Organize and manage ancillary medical services. To assist in providing for the optimal functioning of these services. Monitor the use and conservation of these resources.

Immediate

___ Receive appointment from Operation Section Chief and subsection's Job Action Sheets.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Meet with Operations Section Chief and other Operations Section directors for a briefing and development of initial action plan. Designate time for next meeting.

___ Appoint unit leaders for:

? Laboratory Services
? Radiology Services
? Pharmacy Services
? Cardiopulmonary Services

Distribute corresponding Job Action Sheets; request a documentation aide/assistant for each unit leader from the Labor Pool.

___ Brief all unit leaders. Request an immediate assessment of each service's capabilities, human resources and needs. Designate time for follow-up meeting.

___ Receive, coordinate and forward requests for personnel and materials to the appropriate individual.

Intermediate

___ Report routinely to the Operations Section Chief the actions, decisions and needs of the Ancillary Services Section.

___ Track the ordering and receiving of needed supplies.

___ Supervise salvage operations within Ancillary Services when indicated.

___ Meet routinely with Ancillary Services unit leaders for status reports, and relay important information to Operation Section Chief.

Extended

___ Observe and assist any staff who exhibits signs of stress or fatigue. Report any concerns to Psychological Support Unit Leader. Provide for staff rest periods and relief.

___ Review and approve the documenter's recordings of actions/decisions in the Ancillary Services Section. Send copy to the Operations Section Chief.

___ Direct non-utilized personnel to Labor Pool.

___ Other concerns:
LABORATORY UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________ (Ancillary Services Director)

Operations Command Center: ______________________ Telephone:

Mission: Maintain Laboratory services, blood and blood products at appropriate levels. Prioritize and manage the activity of the Laboratory Staff.

Immediate

___ Receive appointment from Ancillary Services Director.
___ Read this entire Job Action Sheet and review organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Ancillary Services Director with other subsection unit leaders; develop a subsection action plan.
___ Inventory available blood supply and designate those units of blood, if any, which may be released for use outside the facility. Report information to Ancillary Services Director and Communications Unit Leader.
___ Evaluate Laboratory Service's capacity to perform:
   ? Hematology studies
   ? Chemistry studies
   ? Blood Bank services

___ Ascertain the approximate "turn around" time for study results. Report capabilities and operational readiness to Ancillary Services Director.
___ Assign a phlebotomies and runner with adequate blood collection supplies to the Immediate Treatment and Delayed Treatment Areas.

Intermediate

___ Contact Materials Supply Unit Leader in anticipation of needed supplies.
___ Prepare for the possibility of initiating blood donor services.
___ Send any unassigned personnel to Labor Pool.
___ Inform patient care areas of currently available service.
___ Communicate with Patient Tracking Officer to ensure accurate routing of test results.

Extended

___ Provide for routine meetings with Ancillary Services Director.
___ Review and approve the documenter's recordings of actions/decisions in the Laboratory Services area. Send copy of to the Ancillary Services Director.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to Ancillary Services Director. Provide for staff rest periods and relief.
___ Other concerns:
RADIOLGY UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________ (Ancillary Services Director)

Operations Command Center: ____________________________ Telephone:

Mission: Maintain radiology and other diagnostic imaging services at appropriate levels. Ensure the highest quality of service under current conditions.

Immediate

___ Receive appointment from Ancillary Services Director.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Ancillary Services Director with other subsection unit leaders; develop a subsection action plan.
___ Evaluate Radiology Service's capacity to perform x-ray and other appropriate procedures:
   ? Number of Operational X-ray suites
   ? Number of operational portable X-ray units
   ? Number of hours of film processing available
   ? Availability of CT scan or MRI
   ? Availability of fluoroscopy
   Report status to Ancillary Services Director.
___ Provide radiology technician and portable X-ray unit to Immediate and Delayed Treatment Areas, if available.

Intermediate

___ Contact Materials Supply Unit Leader in anticipation of needed supplies.
___ Send any unassigned personnel to Labor Pool.
___ Inform patient care areas of currently available radiology services.
___ Communicate with Patient Tracking Officer to ensure accurate routing of test results.

Extended

___ Provide for routine meetings with Ancillary Services Director.
___ Review and approve the documenter's recordings of action/decisions in the Radiology Services Area. Send copy to Ancillary Services Director.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report concerns to Ancillary Services Director. Provide for staff rest periods and relief.
___ Other concerns:
PHARMACY UNIT LEADER

Positioned Assigned To:

You Report To: ___________________________________(Ancillary Services Director)

Operations Command Center: ______________________ Telephone:

Mission: Ensure the availability of emergency, incident specific, pharmaceutical and pharmacy services.

Immediate

___ Receive appointment from Ancillary Services Director.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Ancillary Services Director with other subsection unit leaders; develop a subsection action plan.
___ Assign pharmacist to Immediate and Delayed Treatment Areas, when appropriate.
___ Inventory most commonly utilized pharmaceutical items and provide for the continual update of this inventory.
___ Identify any inventories which might be transferred upon request to another facility and communicate list to the Ancillary Services Director.

Intermediate

___ Communicate with the Materials Supply Unit Leader to assure a smooth method of requisitioning and delivery of pharmaceutical inventories within the hospital.

Extended

___ Provide for routine meetings with Ancillary Services Director.
___ Review and approve the documenter’s recordings of actions/decisions in the Pharmacy Service Area. Send copy to Ancillary Services Director.
___ Observe and assist any staff who exhibit signs of stress and fatigue. Report any concerns to Ancillary Services Director. Provide for staff rest periods and relief.
___ Other concerns:
CARDIOPULMONARY UNIT LEADER

Positioned Assigned To:

You Report To: __________________________ (Ancillary Services Director)

Operations Command Center: ________________ Telephone:

Mission: Provide the highest level of Cardiopulmonary services at levels sufficient to meet the emergency incident needs.

Immediate

_____ Receive appointment from Ancillary Services Director.

_____ Read this entire Job Action Sheet and review the organizational chart on back.

_____ Put on position identification vest.

_____ Receive briefing from Ancillary Services Director with other subsection unit leaders; develop a subsection action plan.

_____ Evaluate Cardiopulmonary service's capacity to supply/perform:

  ? Operational ventilatory equipment
  ? Arterial blood gas analysis (ABG's)
  ? Electrocardiograph study (EKG)
  ? In-wall oxygen, nitrous oxide and other medical gases (confer with Damage Assessment and Control Officer)
  ? Size and availability of gas cylinders

  Report status/information of Ancillary Services Director.

_____ Assign respiratory therapist technician and EKG technician to the Immediate Treatment Area, when appropriate.

Intermediate

_____ Consider the possibility of requesting additional Cardiopulmonary resources vs. developing a list of resources which may be loaned out of the facility.

Extended

_____ Monitor levels of all medical gases.

_____ Provide for routine meetings with Ancillary Services Director.

_____ Review and approve the documenter's recordings of actions/decisions in the Cardiopulmonary Services area. Send copy to the Ancillary Services Director.

_____ Observe and assist any staff who exhibit signs of stress and fatigue. Report any concerns to Ancillary Services Director. Provide for staff rest periods and relief.

_____ Other concerns:
HUMAN SERVICES DIRECTOR

Positioned Assigned To:

You Report To: _______________________________ (Operations Section Chief)

Operations Command Center: ______________________ Telephone:

Mission: Organize, direct and supervise those services associated with the social and psychological needs of the patients, staff and their respective families. Assist with discharge planning.

Immediate

___ Receive appointment from Operations Section Chief. Obtain packet containing subsection Job Action Sheets.

___ Read this entire Job Action Sheet and review organizational chart on back.

___ Put on position identification vest.

___ Obtain briefing from Operations Section Chief with other section directors and assist with development of the Operations Section's action plan. Designate time for follow up meeting.

___ Appoint Staff Support Unit Leader, Psychological Support Unit Leader and Dependent Care Unit Leader. Distribute corresponding Job Action Sheets and identification vests.

___ Brief unit leaders on current situation; outline action plan for subsection and designate time for next briefing.

___ Establish Human Services Center near Discharge Area or near staff rest/rehabilitation area.

___ Assist with establishment of Discharge Area. Lend personnel to assist with patient discharge process.

___ Assist in the implementation of patient early discharge protocol on the direction of Operations Section Chief. Secure the aid of Nursing Unit Leader.

Intermediate

___ Assist Psychological Support Unit Leader in securing a debriefing area.

___ Meet regularly with unit leaders to receive updates and requests.

___ Communicate frequently with Operations Section Chief.

Extended

___ Document action and decisions on a continual basis.

___ Observe and assist anyone who exhibits signs of stress and fatigue. Provide for staff rest and relief.

___ Other concerns:
STAFF SUPPORT UNIT LEADER

Positioned Assigned To:

You Report To: ____________________________ (Human Services Director)

Operations Command Center: _________________ Telephone:

Mission: Assure the provision of logistical and psychological support of the hospital staff.

Immediate

___ Receive assignment from Human Services Director.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Human Services Director with other subsection unit leaders; assist in development of subsection action plan. Designate time for follow up meeting.
___ Anticipate staff needs as they might relate to the specific disaster.

Intermediate

___ Establish a staff rest and nutritional area in a low traffic area. Provide for a calm relaxing environment provide overall disaster information updates (bulletins) for rumor control.
___ Provide for nutritional support and sleeping arrangements; contact Nutritional Supply Unit Leader and Labor Pool Unit Leader for assistance.
___ Establish a staff Information Center with the help of Communications Unit Leader, Nursing Unit Leader and Labor Pool Unit Leader. Provide overall disaster info updates (bulletins) for rumor control.
___ Arrange for routine visits/evaluations by the Psychological Support Unit Leader. Assist in establishment of separate debriefing area.

Extended

___ Observe all staff closely for signs of stress and fatigue; intervene appropriately. Provide for personal staff rest periods and relief.
___ Assist staff with logistical and personal concerns; act as facilitator when appropriate.
___ Report routinely to the Human Services Director.
___ Document all actions, decisions and interventions.
___ Other concerns:
PSYCHOLOGICAL SUPPORT UNIT LEADER

Positioned Assigned To:

You Report To: ________________________________ (Human Services Director)

Operations Command Center: ________________________________ Telephone:

Mission: Assure the provision of psychological, spiritual and emotional support to the hospital staff, patients, dependents and guests. Initiate and organize the Critical Stress Debriefing process.

Immediate

___ Receive appointment from Human Services Director.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Receive briefing from Human Services Director; assist in development of subsection action plan. Designate time for follow up meeting.
___ Establish teams composed of staff, clergy and other mental health professionals to support the psycho-social needs of the staff, patients and guests.

Intermediate

___ Designate a secluded debriefing area where individual and group intervention may take place. Coordinate with Staff Support Unit Leader.
___ Appoint psychological support staff to visit patient care and non-patient care areas on a routine schedule.
___ Meet regularly with all members of the Human Services Subsection.
___ Assist the Staff Support Unit Leader in establishment of staff information/status board (situation, disaster update, hospital activities).

Extended

___ Advise psychological support staff to document all contacts.
___ Observe psychological support staff for signs of stress and fatigue. Arrange for frequent, mandatory rest periods and debriefing sessions.
___ Schedule and post the dates and times for critical stress debriefing sessions during and after the immediate disaster period.
___ Document all actions, decisions and interventions.
___ Other concerns:
DEPENDENT CARE UNIT LEADER

Positioned Assigned To:
You Report To: ____________________________ (Human Services Director)
Operations Command Center: ________________ Telephone:

Mission: Initiate and direct the sheltering and feeding of staff and volunteer dependents.

Immediate
___ Receive appointment from Human Services Director.
___ Read this entire Job Action Sheet and review the organizational chart on back.
___ Put on position identification vest.
___ Obtain briefing from Human Services Director; participate in development of subsection action plan. Designate time for follow up meeting.
___ Establish a controlled, comfortable area where patients and visitors may wait for disposition home.

Intermediate
___ Establish a Dependent Care Area removed from any patient care areas.
___ Obtain volunteers from the Labor Pool to assist with child and/or adult care. Make tentative plans for extended care.
___ Monitor the area continuously for safety and dependant needs with a minimum of two hospital employees.
___ Implement a positive I.D. system for all children cared for under age of 10 years of age. Provide matching I.D. for retrieving guardian to show upon release of child.
___ Document care and all personnel in the area.
___ Contact the Safety & Security Officer for assistance.
___ Contact Materials Supply Unit Leader and Nutritional Supply Unit Leader for supplies and food; advise Situation - Status Unit Leader and Labor Pool Unit Leader of any extended plans.

Extended
___ Assure that those dependents taking medications have sufficient supply for estimated length of stay.
___ Arrange for the Psychological Support Unit Leader to make routine contact with dependents in the shelter, as well as responding when necessary.
___ Observe staff and dependents for signs of stress and fatigue. Provide for staff rest periods and relief.
___ Report routinely to Human Services Director. Document all actions/decisions.
___ Other concerns:
SECTION 3

HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM

FORMS
III. The Hospital Emergency Incident Command System Forms

This chapter contains the various forms used with the HEICS job assignments. The forms are very simple and self-explanatory. While paper work is often portrayed as burdensome, it should also be pointed out that through accurate documentation an event can be reconstructed so that lessons may be learned. Sound documentation is also the beginning step in the road to financial recovery.

The pages in this chapter have not been indexed with page numbers so that the forms may be reproduced on a photocopy machine. The following is an indexing of the forms and those positions intended to use them:

- **Activity Log**
  - All officers

- **Section Personnel Time Sheet**
  - Each Section Chief or aide

- **Procurement Summary Report**
  - Procurement Unit Leader

- **Volunteer Staff Registration/Credentialing Form**
  - Labor Pool Unit Leader

- **Facility Systems Status Report**
  - Damage Assessment and Control Officer

- **Resource Accounting Record**
  - Each Section Chief or aide

- **Patient Tracking Sheet**
  - Patient Tracking Officer

- **Action Plan**
  - Incident Commander, Section Chiefs and individuals

- **Emergency Incident Message Forms**
  - All personnel
HEICS III

HEICS

ACTIVITY LOG

Date: __/__/______  Section: __________________________

Position Title: __________________________  Individual Name: __________________________

<table>
<thead>
<tr>
<th>#</th>
<th>Time</th>
<th>Incident - Problem Situation</th>
<th>Action</th>
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This form is intended for use by all individuals as an accounting of their personal action or the section activity.

Original: Immediate Supervisor or Section Chief

Copy: Position/Section Documentation

3 - 3
HEICS III

HEICS
SECTION PERSONNEL TIME SHEET

Date: / / 

Section: ________________________________

Hours: From: ___________ To: ___________

<table>
<thead>
<tr>
<th>#</th>
<th>(Please Print) Employee/Volunteer Name</th>
<th>Title/Job Class</th>
<th>Signature</th>
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<th>Time Out</th>
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Certifying Officer ________________________________

Date/Time: ________________________________

*Original = TIME UNIT LEADER (Finance Section) every 12 hours.*
# HEICS III

## PROCUREMENT SUMMARY REPORT

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<th>Date/Time</th>
<th>Item/Service</th>
<th>Vendor</th>
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Certifying Officer: ____________________________  Date/Time: ____________________________
HEICS
VOLUNTEER STAFF REGISTRATION/CREDENTIALING FORM

DATE: ___ / ___ / _______  Event: ______________________________________________

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<tr>
<th>#</th>
<th>(Print) Name</th>
<th>(Print) Address</th>
<th>Signature</th>
<th>Driver's License #</th>
<th>PROF/TECH LIC #</th>
<th>Specialty Skills</th>
<th>Employer Address</th>
<th>Time IN</th>
<th>Time OUT</th>
<th>Security Follow-up</th>
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Certifying Officer ___________________________________  Date/Time: ____________________________

Original: Labor Pool Unit Leader  Copy: Safety/Security Officer
**HEICS III**

**HEICS**

**FACILITY SYSTEM STATUS REPORT**

Date: __________ / __________ / ________

Time: ______________ Certifying Officer ____________________________

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<th>System</th>
<th>Operational Status</th>
<th>Comments (If Non-Operational, Give Reason And Estimate Time/Resources To Necessitate Repair)</th>
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HEICS III

HEICS
RESOURCE ACCOUNTING RECORD

Date: __/__/__  Section: ________________________________

G 0000 - 1159 hours  G 1200 - 2359 hours

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Certifying Officer: ____________________________  Date/Time: ____________________________

Original: Section Chief  Copy: Finance Chief
HEICS PATIENT TRACKING SHEET

DATE: __________ / __________ / __________
Event: ________________________________

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<th>Age</th>
<th>Status</th>
<th>Location</th>
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Certifying Officer ___________________________ Date/Time: ___________________________
HEICS ACTION PLAN

Incident: ___________________________  Date: ___________  Section/Position: ___________

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Signature: ___________________________  Position ___________________________  Time: ___________________________
HOSPITAL EMERGENCY INCIDENT COMMAND SYSTEM
EMERGENCY INCIDENT MESSAGE FORM

FILL IN ALL INFORMATION

TO (Receiver): _____________________________________________________________

FROM (Sender): ___________________________________________________________

DATE & TIME: _____________________________________________________________

PRIORITY
G Urgent-Top     G Non Urgent-Moderate     G Informational-Low

Message:

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Received By:  Time Received:  Comments:

Forward To:

Received By:  Time Received:  Comments:

Forward To:

Received By:  Time Received:  Comments:

Forward To:

KEEP ALL MESSAGES REQUESTS BRIEF, TO THE POINT AND VERY SPECIFIC.

Original: Receiver    Copy #1: Communications Officer    Copy #2: Sender