Module 9

The Hospital Incident Command System
Module 9: Objectives

- Describe the role, responsibility and command considerations for the following:
  - Operations Section
  - Planning Section
  - Logistics Section
  - Finance and Administration Section
- Discuss command staff identification
- Discuss the importance of building a command staff
- Describe function and design of the Job Action Sheet (JAS)
- Describe the purpose and how to use the incident response guide
- Discuss the importance of integration with unified command, and the healthcare system
- Discuss issues related with managing simultaneous events
The Incident Management Team (IMT) Charts

- Depict the hospital command functions that have been identified
- Represent how authority and responsibility are distributed in the incident management team
The IMT Charts

- Identify the critical functions that have been pre-identified for each type of incident
- Not intended that every position will be activated for each incident or event
- HICS positions are assigned to personnel only as indicated by an assessment of the scope and magnitude of the incident or event
Command

- The activities at the Hospital Command Center (HCC) are directed by the Incident Commander (IC)
- IC has overall responsibility for all activities within the HCC
- The IC may appoint other Command Staff personnel to assist as the situation and resources warrant
Sections

- Operations
- Planning
- Logistics
- Finance/Administration
Department Level Command

The following should be maintained available for immediate access

- Job action sheet
- Identification vest
- Radio/phone
- Appropriate command forms
- Pre-designated resources
Department Level Command

Each floor should have ready access to necessary equipment and supplies:

− Bottled water
− Flashlights and chemical light sticks
− “RESTROOM CLOSED” signs
− Chemical or standard portable toilets/toilet paper
− Hand washing foam/disinfectant wipes
− Evacuation chairs/sleds
Operations Section
Operations Section

- Responsible for managing the tactical objectives outlined by the Incident Commander
- The largest in terms of needed resources
- Branches, Divisions, and Units are implemented as needed
- The degree to which command positions are filled depends on the situational needs and the availability of qualified command officers
Medical Care Branch

Responsible for the provision of acute and continuous care of the incident victims as well as those already in the hospital

- The Medical Care Branch Director
  - Works with the Logistics Branch to ensure needed personnel, equipment, medication, and supplies are requested
  - Works with the Staging Manager to ensure their delivery to needed areas
  - Directs the Casualty Care Unit Leader (usually be located in the Emergency Department)
Infrastructure Branch

- Maintains the normal operational capability of the facility including:
  - Power and lighting, water and sewer, HVAC, medical gases and medical devices, building/grounds
- Increases capacity when patient surge requirements dictate
- Identifies and restores utility service-delivery failures
HazMat Branch

• Deals with internal or external hazmat response issues including:
  – Agent identification
  – Spill response
  – Victim decontamination
  – Decontamination of equipment and the facility
Security Branch

- Responsible for security of facility and staff
- May need assistance from local law enforcement or contract security
- Planning needs to address:
  - Lock-down vs. restricted visitation
  - Supplemental security staffing
  - Traffic control
  - Personal belongings management
  - Chain of custody
Business Continuity Branch

- Facilitates the acquisition and access to essential recovery resources
- Supports the Infrastructure and Security Branches
- Coordinates restoration of business functions and technology requirements
- Assists other branches and impacted areas
Additional Branch Options

• Special Operations Branches might be created to address the specific needs of an incident that are not already being met

• New Branch creation at discretion of hospital unique operational needs
Planning Section
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Planning Section

Planning Section Chief

- Resources Unit Leader
  - Personnel Tracking Manager
  - Materiel Tracking Manager
- Situation Unit Leader
  - Patient Tracking Manager
- Documentation Unit Leader
  - Bed Tracking Manager
- Demobilization Unit Leader
Planning Section

- Responsible for collecting evaluating, and disseminating incident situation information and intelligence to Incident Command
- Prepares status reports
- Displays various types of information
- Develops the Incident Action Plan
The Situation Unit

- Responsible for writing and maintaining incident updates including those related to patient tracking
- A Patient Tracking Manager may be appointed to assist
The Resource Unit

- Tracks the status of personnel and material resources that are being utilized in various locations of the hospital
- A Personnel Tracking and Materials Tracking Manager may be appointed to assist when needed
The Documentation Unit

• Completes action plans and other support documents and archives them
Demobilization Unit

• Responsible for developing and revising the demobilization plan
Forms and Management

- Twenty specific forms have been included for use as part of HICS
- The two principal types are:
  - FEMA forms modified for hospital use
  - HICS specific
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Special Forms Address

- Details about the actual incident as they are learned
- Organizational assignments
- Critical problems encountered and incident command actions taken
- Patient care information
- Patient location
- Resources on hand and requests for supplementation
- Personnel time and accountability
- Internal and external communications
- Facility status
Archiving

- At the termination of the incident, all of the collated IAPs will be used to help outline the hospital’s response activities and decision-making processes.

- All other documentation materials will be collected and archived as well.
Logistics Section

- Responsibilities include:
  - acquiring resources from internal and external sources
  - use standard and emergency acquisition procedures to acquire
  - Make requests to the local EOC or the RHCC
Logistics Subdivisions

Service Branch
Will be responsible for supporting:
- Communication
- Food services
- IT/IS resource needs

Support Branch
- Focuses on acquiring needed supplies, supporting infrastructure operations
- Coordinating internal and external transportation
- Acquiring additional personnel
The costs associated with the response must be accounted for from the outset of the incident.

Daily financial reporting requirements are likely to be modified and in select situations new requirements outlined by state and federal officials.
Finance / Administrative Section

Finance/Administration Section Chief

- Time Unit Leader
- Procurement Unit Leader
- Compensation/Claims Unit Leader
- Cost Unit Leader
Finance Planning and Roles

- The Finance/ Administration Section coordinates:
  - Personnel time
  - Orders items,
  - Arranges personnel- related payments and Workers’ Compensation
  - Payment of
Command Staff Identification

- All personnel assigned to an incident command role should wear identification that correctly communicates their role.
Building Command Staff Depth

- Three to five persons should be trained for each command position in case a prolonged response is required.
- Training and exercises should be used as a means of preparing personnel to competently and confidently assume one or more roles based on situational need and available resources.
- Completion of the specified NIMS courses, either online or in the classroom, should help to prepare those persons likely to assume command roles.
Job Action Sheets

Information tool provided on a JAS includes a radio identification title, purpose, to whom they report, and critical action considerations. These tasks are intended to “prompt” the incident management team members to take needed actions related to the incident.
Incident Response Guides

- Incident Response Guides have been devised for fourteen external and thirteen internal scenarios.
- Each IRG lists fundamental decision considerations specific to managing that situation by timeframe.
- The IRG’s are intended to complement the hospital EOP and provide a primer that will provide some directional assistance and a means of initially...
Integration of HICS with Unified Command

• The hospital must be effectively integrated into the community response, including the overall incident command structure

• This integration actually starts before the incident occurs through
  – the hospital’s regular participation in community preparedness meetings, training, and exercises
  – mutual understanding of roles and responsibilities, incident management principles, resource allocation, and effective communication and information-sharing practices.
Integration of HICS with Unified Command

• Unified command will be used when more than one responding agency for the incident is present or the situation crosses political jurisdictions.

• This command model does not change any feature of HICS. It does allow for all agencies with responsibility for the incident, including the hospital, to participate in the decision-making process.
Integration with Healthcare Systems

- Corporate member hospitals must also coordinate their planning and response activities with the appropriate administrative section(s) of the parent organization
  - *Done before the incident*
  - *During the incident*
  - *After the incident*
Managing Simultaneous Events

- Normally hospitals confront one incident at a time
- Sometimes problems come in multiples
  - Earthquake w/gas leak in the facility
  - Flooding and water loss in the facility
- This command model *does not* change any feature of HICS. It does allow for all agencies with responsibility for the incident, including the hospital, to participate in the decision-making process
Managing Simultaneous Events

- Area Command concept would have each involved facility having its own Incident Command structure that reports to a unified Area Command structure.

- The Area Command structure would include all but the Operations Section because those activities are best coordinated at each building.
Review

- It is important to understand the role, responsibility and command considerations for the following:
  - Operations Section
  - Planning Section
  - Logistics Section
  - Finance and Administration Section

- It is important to quickly build a command staff.
- Command staff should be assigned as needed to trained persons.
- Job Action Sheet (JAS) have been designed for each command position.
- Incident Response Guides have been developed to provide response guidance.

The hospital must integrate with unified command, and the...
Review: Module 11
Key Points

- Scenarios can be applied to emergency operations planning.
- Scenario-specific Incident Planning Guides (IPGs) and Incident Response Guides (IRGs) contain elements that assist with planning and training.
- Materials can be revised as needed based on hospital assessment of their circumstances.