Appendix F
Incident Response Guides (IRGs)

Active Shooter
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Incident Response Guide: Active Shooter

Mission

To protect patients, staff, and visitors during an active shooter incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.

Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

☐ Ensure the safety of patients, staff, and visitors

☐ Notify law enforcement, staff, patients, and visitors of the threat

☐ Contain the scene and minimize the number of potential victims

☐ Coordinate the hospital response with the law enforcement incident command system

☐ Return to normal operations as quickly as possible

Immediate Response (0 – 10 minutes)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Ensure notification of all staff, patients, and visitors of the threat using mass notification, overhead page, radios, and phones, as appropriate.	
			Notify law enforcement and provide details of the event.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Activate the Emergency Operations Plan and Active Shooter Plan.	
			Activate the Hospital Command Center and the applicable Hospital Incident Management Team positions. Ensure the location of the Hospital Command Center (and the routes to and from it) is in an offsite location or in a secured area away from any danger posed by the shooter.	
			Establish a Liaison with law enforcement upon their arrival.	
			Establish operational periods, objectives, and a regular briefing schedule. Consider the use of the Incident Action Plan Quick Start for initial documentation of the incident.	
	Public Information Officer		Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander as directed.	

| | Liaison Officer | | Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital. | |
| | Safety Officer | | Ensure the safety of patients, families, visitors, and staff during evacuation procedures. | |

Immediate Response (0 minutes – 10 minutes)				
Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Ensure all staff have basic information about current location of shooter, designated escape routes, and safe zones.	
			Place the emergency department on diversion.	
			Initiate the shelter-in-place of all patients who are non-ambulatory.	
			Assist in the evacuation of other personnel as directed.	

			Initiate external lockdown of the hospital as approved by the Incident Commander: ☐ Deny all entry; direct those seeking medical care to nearest hospital ☐ Deny all exits; direct those trying to leave the hospital to a designated safe holding area ☐ Coordinate movement within the campus with law enforcement and Incident Commander	
	Security Branch Director		Consider activation of a Law Enforcement Interface Unit Leader to coordinate activities and information with responding law enforcement.	
			Establish communications with responding law enforcement.	
			Provide law enforcement with the shooter's description, armament, and last known location.	
			Provide law enforcement with surveillance camera footage, hospital maps, blueprints, master keys, card access, search grids, and other data as requested.	
			As directed, utilize access control system and closed circuit cameras to aid the law enforcement assault teams and internal responses (shelter-in-place or evacuations) relative to the shooter's location.	
			Assist with the safe evacuation of patients, staff, and visitors as directed.	

			Coordinate the overall response to ensure effective communications to and from potential victims within the hospital relative to the shooter's location, and shelter-in-place or evacuation response actions as directed.	
Planning	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Situation Unit Leader		Consolidate all reports regarding the location and description of the shooter. Ensure the real time dissemination of this critical information to all parties as directed.	

Intermediate Response (10 minutes – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Suspend all nonessential services.	
			Inform agency executives, Board of Directors, corporate headquarters and others as appropriate, of ongoing operations and incident status.	
	Public Information Officer		Designate and establish a media staging area in coordination with law enforcement and the Incident Commander.	
			Establish contact with media and inform them of the media staging area; provide briefings as directed.	
			Provide approved messages to media, patients, visitors, and staff as directed.	
	Liaison Officer		Notify the Department of Health Services and licensing agencies of the incident.	

			Ensure continued updates of appropriate information to community partners, local authorities, and others as directed.	
	Safety Officer		Complete HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Intermediate Response (10 minutes – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue to coordinate the evacuation of patients and personnel as directed and as needed.	
			Treat and evacuate wounded victims as directed and when deemed safe to do so.	
	Infrastructure Branch Director		Monitor critical systems such as medical gases, water, electricity and others as appropriate for potential disruption caused by stray gunfire penetrations.	
	Security Branch Director		As directed, utilize the access control system and closed circuit television to aid law enforcement in the clearing of the hospital.	
			Maintain the external lockdown of the hospital.	
Planning	**Section Chief**		Establish operational periods, incident objectives and the Incident Action Plan in collaboration with the Incident Commander.	
			Begin planning for alternate care sites for evacuated patient care areas that may not be immediately available.	
	Resources Unit Leader		Initiate staff and equipment tracking.	
	Situation Unit		Document victim information, witness information, and patient movement.	

	Leader		Continue to provide situation reports to all parties as requested and as needed.	
			Initiate patient and bed tracking using HICS 254.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) and appropriate external Incident Command Post or jurisdictional authority to ensure safe patient relocation, if necessary.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Track hours associated with the emergency response.	

Extended Response (2 hours - 8 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		With the Public Information Officer, prepare to speak with the media, stakeholders, staff, patients, and visitors as coordinated with the field-level Incident Command Post or jurisdictional authority.	
	Public Information Officer		Continue media briefings and updates as directed; work within the Joint Information Center, if available. Continue to provide approved messaging to media, patients, visitors, and staff.	
	Liaison Officer		Ensure continued updates of appropriate information to community partners, local authorities, and others as directed.	
	Safety Officer		Update the Safety Plan for extended operations based on modifications in entry and exit points, visiting hours, entry onto campus, etc.	

Extended Response (2 hours - 8 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Determine the need to cancel or postpone procedures, appointments, and visiting hours based on the projected length and impact of the incident.	
	Medical Care Branch Director		Where approved, return evacuated patients to their respective patient care areas.	
			Arrange for the transfer of patients from displaced patient care areas to approved alternate care sites.	
	Security Branch Director		Modify the external lockdown of the hospital, as directed, to maintain the integrity of the crime scene, yet allow limited access.	
	Patient Family Assistance Branch Director		Ensure the debriefing of, and support for, families of affected patients.	
Planning	**Section Chief**		Plan for the next operational period and hospital shift change, if any; hospital and campus entry and exit relative to lockdown; impact on canceled procedures and appointments, etc. Work with law enforcement to ensure continued security of hospital and ongoing operations.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure a Demobilization Plan is being readied.	
	Situation Unit Leader		Continue tracking the movement and disposition of patients, staff, and visitors.	
			Continue documenting the victim, witness, and patient information.	
	Documentation Unit Leader		Ensure complete documentation of all postponed and canceled appointments and procedures.	
Logistics	**Support Branch Director**		Coordinate victim support services and establish those services in a safe zone as approved by the Incident Commander.	

Demobilization/System Recovery (8 hours – 24 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		With the Public Information Officer and Joint Information System, prepare to speak with media.	
			Ensure patients, staff, and visitors have access to behavioral health services.	
	Public Information Officer		Develop an information release for media; work with law enforcement on details to be released; ensure the family of any wounded or deceased person is made aware prior to the media release of information.	
	Liaison Officer		Ensure that all impacted persons and community partners are notified of incident resolution in accordance with local policies and procedures.	
	Safety Officer		Provide incident documentation to the Documentation Unit Leader.	

Demobilization/System Recovery (8 hours – 24 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Oversee the restoration of normal operations.	
	Medical Care Branch Director		Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
			Arrange for the transfer of patients from alternate care sites back to reopened patient care areas.	
	Infrastructure Branch Director		Repair or replace any systems damaged by stray gunfire penetrations.	
	Security Branch Director		Demobilize the hospital lockdown as directed.	
	Patient Family Assistance Branch Director		Plan for the safe and confidential reunification of incident victims with family members.	

Planning	**Section Chief**		Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers ☐ First responders	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Situation Unit Leader		Provide incident documentation to the Documentation Unit Leader.	
	Documentation Unit Leader		Ensure that all documentation produced during the response and recovery is correlated and available for after action review.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Identify issues and necessary actions to return to normal operations, ensuring all cancellations and postponements are included.	
			Complete the Demobilization Plan and distribute it as per policy.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available.	
	Support Branch Director		Ensure the debriefing of affected personnel.	
			Plan for the safe and confidential reunification of staff victims with family members.	

			Ensure behavioral health services are made available to staff.	
Finance/ Administration	**Section Chief**		Compile final response and recovery costs and expenditure summary and submit to the Incident Commander.	
	Compensation / Claims Unit Leader		Provide a summary of incident's projected costs due to modification in operations.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Active Shooter Plan
- ☐ Shelter-in-Place Plan
- ☐ Evacuation Plan
- ☐ Lockdown Plan
- ☐ Employee Health monitoring and treatment Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Emergency Patient Registration Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Security Access Control System

Security Closed Circuit Television (CCTV) System

Hospital and campus floor plans, maps, and blueprints

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director		X	X	X
Security Branch Director	X	X	X	X
Patient Family Assistance Branch Dir.			X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader			X	X
Demobilization Unit Leader				X
Logistics Section Chief		X	X	X
Support Branch Director		X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Compensation/Claims Unit Leader				X

Incident Response Guide: Chemical Incident

Mission

To provide a safe environment for patients, staff, and visitors within the hospital following a chemical incident that may or may not impact the safety of the hospital or availability of services; and to provide the safe continuation of care for patients, visitors, and those seeking care post-incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Provide safe and effective decontamination of incoming contaminated patients
- ☐ Protect patients, staff, and the hospital from contamination and safely restore normal operations
- ☐ Communicate effectively with the local Emergency Operations Center and emergency response partners

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Receive notification of incident from local officials. Notify the emergency department of incoming casualties that are possibly contaminated.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Activate the Emergency Operations Plan, Chemical Incident Plan, Hospital Incident Management Team, Medical-Technical Specialists, and Hospital Command Center.	
			In conjunction with Medical-Technical Specialist: Chemical, determine threat to the hospital and the need for shelter-in-place or hospital evacuation.	
			Establish operational periods, incident objectives, and regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Consider limiting or ceasing nonessential services.	
			Consider activation of ambulance diversion status.	
	Public Information Officer		Develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	

			Contact appropriate authorities and experts to provide hospital status and request support and recommendations for chemical decontamination.	
	Safety Officer		Monitor safe activation of the Chemical Incident Plan and the Decontamination Plan.	
			Monitor safe and consistent use of appropriate personal protective equipment by staff.	
			Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital and implement corrective actions to address; complete HICS 215A.	
	Medical-Technical Specialist: Chemical		Assist in obtaining specific information regarding chemical agent such as antidotes, treatment, decontamination procedures, etc.	
			Provide expert input in the Incident Action Planning process.	
			Assist the Incident Commander in determining the threat to the hospital and the need for shelter-in-place or hospital evacuation.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Implement the Chemical Incident Plan.	
			Implement the Evacuation, Shelter-in-Place, or Hospital Abandonment Plan, as directed by the Incident Commander.	
	Medical Care Branch Director		Conduct an inpatient and outpatient census and prioritize for safe discharge or cancellation of appointments and procedures.	
			Identify evacuation priorities and transfer requirements.	
			Determine inpatient and outpatient capacity required to handle patient surge in shelter-in-place conditions.	
			Provide safe medical care to patients remaining in the hospital.	

	HazMat Branch Director		Implement the hospital's Chemical Incident Plan: ☐ Establish triage and decontamination areas with a clear perimeter and direction on ingress and egress ☐ Provide rapid triage and disposition of potentially contaminated patients, non-contaminated patients, media, family members, etc. ☐ Implement staff monitoring and rotation through the decontamination area ☐ Consult with Medical-Technical Specialist: Chemical, and internal and external consultants to ascertain treatment protocols ☐ Relocate medications and antidotes to clinical care and decontamination areas ☐ Consider the need for evidence collection	
	Security Branch Director		Activate security policy and procedure to: ☐ Secure the hospital and campus ☐ Establish access and egress routes ☐ Implement crowd and traffic control protocols ☐ Establish and secure areas for collection of contaminated belongings and valuables	
	Infrastructure Branch Director		As directed, implement the hospital's Shelter-In-Place Plan, including shutdown of heating, ventilation, and air conditioning system or sealing of the hospital.	
			Conduct a damage, structural integrity, and utilities assessment of the hospital.	
			Monitor hospital air quality for safe occupation.	
Planning	**Section Chief**		Establish operational periods, incident objectives and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Initiate personnel and materiel tracking.	
	Situation Unit Leader		Gather situational assessment and response data from internal and external sources.	
			Initiate patient and bed tracking in collaboration with Operations Section (HICS 254–Disaster Victim/Patient Tracking).	

Logistics	Section Chief		Activate the Support Branch to provide the logistics needs of hospital staff and operations.	
	Support Branch Director		Activate Labor Pool and Credentialing Unit.	
			Initiate staff call-in systems, if instructed to do so and if it is safe for arriving staff.	
			Inventory equipment, supplies, and medications on hand and prepare to ration materiel as needed.	
			Anticipate increased need for medical and surgical supplies, medications, and equipment and take actions to obtain when possible.	
	Labor Pool and Credentialing Unit		Determine numbers and capability of onsite and call in staff along with solicited and unsolicited volunteers.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Review the overall impact of the ongoing incident on the hospital with Command Staff and Section Chiefs.	
			Reevaluate need to shelter-in-place versus evacuate.	
			Monitor that communications and decision making are coordinated with external agencies and area hospitals, as appropriate.	
			Direct implementation of any and all additional response plans required to address the incident.	
			Consider deploying a representative to the local Emergency Operations Center.	
	Public Information Officer		Conduct briefings to patients, staff, people seeking shelter, and media to update them on incident and hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	
			Assist with notification of patients' families about the incident and inform them about the likelihood of evacuation, if required.	

	Liaison Officer		Maintain contact with local Emergency Operations Center, area hospitals, and regional medical health coordinator to relay status and critical needs and to receive community updates.	
	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect patients, staff, visitors, and hospital.	
			Monitor that victim decontamination is in compliance with established decontamination practices.	
			Update HICS 215A as required.	
			Continue to monitor proper use of personal protective equipment and decontamination procedures.	
	Medical-Technical Specialist: Chemical		Support the Operations Section as needed, by coordinating information regarding specific decontamination and treatment procedures; provide direct oversight of decontamination operations as directed.	
			Continue to provide expert input into the Incident Action Planning process.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Monitor continuation of medical mission activities.	
	Medical Care Branch Director		Continue patient, staff, and hospital monitoring for chemical exposure, and provide appropriate follow up as required.	
			Evaluate and update staff scheduling to accommodate decontamination team support and scheduling.	
			Activate Fatality Management Plan and management of contaminated remains.	

	Infrastructure Branch Director		Continue to monitor hospital air quality.	
			Monitor impact of alterations in heating, ventilation, and air conditioning system for ability to maintain operations and comfortable environment.	
	Security Branch Director		Implement procedures for patient valuables management and evidence collection in cooperation with law enforcement.	
			Maintain hospital security, including restrictions in entry, egress, traffic, and crowd control.	
	HazMat Branch Director		Monitor decontamination response and project needs for additional staff, supplies and equipment.	
			Monitor proper wastewater and expendable materials disposal.	
	Patient Family Assistance Branch Director		Establish a patient information center in cooperation with the Liaison Officer.	
Planning	**Section Chief**		Revise and update Incident Action Plan, including planning for supply, staffing, and other needs.	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed equipment tracking.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Provide for patient, staff, and visitor food and water needs.	
	Support Branch Director		Initiate employee monitoring for chemical exposure and provide appropriate follow up care.	
			Establish an Employee Family Care Unit, if required.	
			Continue staff call-in, if safe to do so, and provide additional staff to impacted areas.	
Finance/ Administration	**Section Chief**		Coordinate with Risk Management for additional insurance and documentation needs.	
	Time Unit Leader		Track the hours associated with the emergency response.	

| | Procurement Unit Leader | | Facilitate the procurement of needed supplies, equipment, and contractors. | |
| | Cost Unit Leader | | Track response expenses and expenditures. | |

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Reassess the incident objectives and Incident Action Plan; revise them as indicated by the response priorities and overall mission.	
			Continue regular briefing of Command Staff and Section Chiefs.	
			Reevaluate the hospital's ability to continue its medical mission.	
			Plan for a return to normal services in coordination with Command Staff and Section Chiefs.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and people seeking shelter.	
			Communicate regularly with the Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, other area hospitals, and regional medical health coordinator to relay status and critical needs and to receive incident and community updates.	
	Safety Officer		Continue to oversee safety measures and use of personal protective equipment for staff during demobilization of decontamination response.	
	Medical-Technical Specialist: Chemical		Continue to support the Operations Section as needed by coordinating information regarding specific decontamination and treatment procedures.	
			Continue to provide expert input into the Incident Action Planning process.	

			Monitor the movement of the chemical plume (if applicable), consult with local health department and emergency management and advise the Incident Commander if the external area is safe for discontinuation of shelter-in-place.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Monitor the continuation of medical mission activities, including patient care and hazardous materials (HazMat) activities.	
	Medical Care Branch Director		Continue patient monitoring for chemical exposure and provide appropriate follow up care as required.	
	Infrastructure Branch Director		Continue to monitor hospital air quality.	
			With Medical -Technical Specialist: Chemical and when shelter-in-place is suspended, conduct an external inspection of the hospital for damage and determine need for outside decontamination.	
			Continue infrastructure monitoring, maintenance, and air quality monitoring in collaboration with the Safety Officer.	
	Security Branch Director		Continue to ensure hospital security, traffic, and crowd control.	
			Monitor the enforcement of hospital policies and cooperation with local, state, and federal law enforcement agencies when interviewing patients and collecting evidence.	
	HazMat Branch Director		Provide for hospital and equipment decontamination where appropriate.	
Planning	**Section Chief**		Update and revise the Incident Action Plan in collaboration with Command Staff and Section Chiefs.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	

	Situation Unit Leader		Continue to update status boards and other communication devices with latest hospital and community status.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor and address the health status of staff that participated in, supported, or assisted in decontamination activities.	
			Restock and repair all supplies and equipment used in the response.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Procurement Unit Leader		With the Logistics Support Branch, facilitate the procurement of supplies, equipment, and medications for response and patient care.	
	Compensation/ Claims Unit Leader		Assess and implement risk management and claims procedures for reported staff and patient exposures or injuries.	
	Cost Unit Leader		Continue to track response costs and expenditures and prepare regular reports for the Incident Commander.	

Demobilization/System Recovery				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Determine the termination of event or "all clear" in collaboration with Command Staff, Section Chiefs, local law enforcement, and Hazmat officials.	
			Oversee and direct demobilization and system recovery operations with restoration of normal services.	
			Ensure that the process is mobilized to complete response documentation for submission for reimbursement.	
	Public Information Officer		Conduct final media briefing and assist with updating staff, patients, people seeking shelter, families, and others of termination of the incident.	

	Liaison Officer		Communicate the final hospital status and termination of the incident to regional medical health coordinator, local Emergency Operations Center, area hospitals, and local emergency medical services.	
	Safety Officer		Monitor the proper disposal of contaminated waste and wastewater.	
			Assist with monitoring the completion of hospital repairs and decontamination, in conjunction with the Operations Section.	
			Monitor and maintain a safe environment during the return to normal operations.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		With Infrastructure Branch, monitor and manage the decontamination of the hospital.	
	Medical Care Branch Director		Coordinate patient care services returning to normal operations.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Restore heating, ventilation, and air conditioning systems to normal service.	
			With the Safety Officer, continue to monitor the disposal of contaminated waste and wastewater.	
			Conduct or facilitate hospital repairs and return of the hospital to normal operating conditions.	
			Complete a hospital damage report, including the progress of repairs, and estimated timelines for restoration of hospital to normal operating conditions.	
	Security Branch Director		Return entry and egress restrictions, traffic flow, and security personnel to normal services.	

	HazMat Branch Director		Ensure that all personnel, supplies, and equipment utilized in the response have been properly decontaminated and stored.	
			With Infrastructure Branch, monitor and manage the decontamination of the hospital.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, describing : ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, correlate, and archive all electronic and written documentation generated in the event response.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available.	
	Support Branch Director		Initiate long term monitoring of employees exposed to chemicals and participating in decontamination or patient care activities, including provision of behavioral health services, as required.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheets for appropriate tasks.	
	Compensation/ Claims Unit Leader		Contact insurance carriers to assist in documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	

			Compile a final response and recovery costs and expenditures and estimated lost revenues summary and submit it to Planning Section Chief for inclusion in the After Action Report.	
	Cost Unit Leader			

Documents and Tools

Emergency Operations Plan, including:
- ☐ Chemical Incident Plan
- ☐ Evacuation, Shelter-in-Place, and Hospital Abandonment Plan
- ☐ Decontamination Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Employee Health Monitoring and Treatment Plan
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Emergency Patient Registration Plan
- ☐ Risk Communication Plan
- ☐ Isolation protocols
- ☐ Interoperable Communications Plan
- ☐ Centers for Disease Control (CDC) Medical Management Guidelines for the specified chemical
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Access to HazMat/Terrorism/CBRNE annexes of local Emergency Operations Plan

Hospital and campus floor plans and maps

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Medical-Technical Specialist: Chemical	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
HazMat Branch Director	X	X	X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader				X
Logistics Section Chief	X	X	X	X
Service Branch Director		X	X	X
Support Branch Director	X	X	X	X
Labor Pool & Credentialing Unit Leader	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader			X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Earthquake

Mission

To provide a safe environment for patients, staff, and visitors either within the hospital or while evacuating the hospital following an earthquake that impacts the structural integrity of the hospital or availability of services. To provide the continuation of care for patients, visitors, and those seeking care post-incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Provide for patient care and management
- ☐ Provide for the safety of patients, staff, families, and visitors
- ☐ Provide for continuing operational status of the hospital or safe evacuation from the hospital

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Activate Emergency Operations Plan, Earthquake Plan, Hospital Incident Management Team, and the Hospital Command Center.	
			With input of Operations Section, determine the need for partial or full hospital evacuation.	
			Establish operational periods, objectives, and a regular briefing schedule. Consider the use of the Incident Action Plan Quick Start for initial documentation of the incident.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Contact the media to gather situational assessment.	
			Monitor media outlets for updates on the incident and possible impacts to the hospital. Communicate the information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
			Communicate with other hospitals to determine their situation status, ability to accept patients if they are transferred from you, or if your hospital's evacuation and abandonment is ordered.	
	Safety Officer		Identify safety hazards and mitigation strategies based on hospital assessment; complete HICS 215A for distribution.	
			Notify the Incident Commander and Operations Section Chief of any internal or external areas that are unsafe for occupancy or use.	

| | | | With the Infrastructure and Security Branch Directors, ensure that unsafe areas are restricted by signage or barrier tape, or by posting staff to monitor entry points. | |
| | | | Monitor the Infrastructure Branch for compliance with safety equipment and actions during damage assessment and search procedures. | |

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Initiate surge and response specific treatment plans: ☐ Activate triage and treatment areas and teams ☐ Assess injuries to current patients, visitors, and staff ☐ Activate the Surge Plan ☐ Initiate the discharge of patients if community infrastructure allows ☐ Activate the Fatality Management Plan ☐ Assess scheduled outpatient appointments and procedures for postponement	
	Infrastructure Branch Director		Assess damage to hospital infrastructure, including: ☐ Status of all utilities ☐ Ability to sustain operations with current impact on infrastructure and utilities ☐ Activate utility contingency plans ☐ Activate Memorandums of Understanding as needed for generator and fuel support, water and sewage services, and medical gas deliveries ☐ Safety status of external sites including landing zones, exterior shelter sites, all buildings on campus, parking structures, fences and gates, external lighting, roadways, and sidewalks ☐ Status of negative pressure isolation rooms	
			With Safety Officer and Security Branch, identify areas of hospital and campus to be secured against access by patients, staff, and visitors; ensure notification of Command Staff for dissemination of information	

			Provide situational specific information to Public Information Officer for messaging to all staff.	
			Determine the need for subject matter expertise (e.g., structural or seismic engineer) and request personnel.	
	Security Branch Director		Secure all entry and exit points.	
			Assess the status of all alarms, cameras, and security systems internal and external to the hospital.	
			With the Safety Officer and Infrastructure Branch, identify areas of hospital and campus to be secured against access by patients, staff, and visitors; ensure notification of Command team for dissemination of information.	
			Activate search teams if needed; integrate efforts with local public safety personnel.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Gather internal situation status including supply and equipment status, current staff and visitor census.	
	Situation Unit Leader		Gather internal situation status including patient census and bed status.	
			Initiate the gathering of situational status, hospital census data, and infrastructure status for inclusion in Incident Action Plan.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Assess the status of information technology systems; initiate repairs and downtime procedures if necessary.	
	Support Branch Director		Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Inspect all onsite supplies and equipment for inventory and for damage and necessary repairs.	

			Assess all onsite communications equipment for operational status; activate contingency plans as needed.	
Finance/ Administration	**Section Chief**		Track all costs including those associated with personnel time, loss of revenue, repairs, acquisition of supplies and equipment, and altered operations.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Activate the Evacuation Plan if needed.	
			Consider alterations in the provision of patient care services.	
	Public Information Officer		Continue briefings to patients, staff, visitors, and media as appropriate.	
	Liaison Officer		Continue ongoing communications and information sharing with local response partners, public safety, and emergency management officials.	
			Provide information regarding the hospital's operational status to public safety and healthcare partners as approved by Incident Commander.	
			Communicate with local emergency management and utility providers to determine the projected length of outage, if applicable.	
	Safety Officer		Monitor ongoing operations to ensure the safety of patients, staff, and visitors as well as response personnel.	
			Ensure that safe work practices, including use of personal protective equipment, are utilized in search and rescue operations and at alternate care sites.	
			Assess onsite caches of chemicals and other hazardous materials; initiate measures to render safe any spills or damages. Update HICS 215A based on the evaluation.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		If evacuation is required: ☐ Prioritize areas for evacuation based on the Safety Officer's evaluation of the threat to life For partial (lateral or vertical) evacuation: ☐ Prepare and ensure transfer of patient records, medications, and valuables to transfer location ☐ Provide patient information as appropriate ☐ If evacuation is from secondary fire or explosion, evacuation must be to a fire compartment at least two compartments away (horizontally or vertically) from the fire or explosion ☐ Reassign personnel to ensure adequate staffing in area receiving patients For complete evacuation: ☐ Prepare and ensure the transfer of patient records, medications, and valuables to holding or assembly areas ☐ Confirm the transfer and timeline with the receiving hospital, providing patient information as appropriate ☐ Establish safe holding or assembly areas to place patients, patient belongings, and staff until transferred ☐ Reassign staff to accompany patients to alternate locations to ensure adequate staffing for patient care	
			Continue patient care services; expand triage and treatment teams as needed.	
			As needed, activate crisis standards of care guidelines for patient services.	
			Activate Fatality Management Plan, if appropriate.	
	Infrastructure Branch Director		Continue to monitor the need for partial or complete hospital evacuation.	
			Consolidate damage reports and initiate repairs.	
	Patient Family Assistance Branch Director		Activate the patient information center.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Continue to gather hospital status information as well as external community status information and advise the Command Staff as indicated.	
			Begin a projection of the situational status and impact for a minimum of 96 hours of operations without community support.	
	Resources Unit Leader		Track staff and equipment; develop projected usage patterns.	
	Situation Unit Leader		Track patients and beds; develop projected usage patterns.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Activate the labor pool to assess personnel resources, receive volunteers, and provide personnel support to operations as needed.	
			Establish sheltering and feeding services for staff, family members, and if necessary, people seeking shelter.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Continue to track personnel hours associated with the emergency response.	
	Procurement Unit Leader		Activate the policy and procedures to procure additional supplies and equipment.	
	Compensation / Claims Unit Leader		Activate the documentation of all damages, prepare insurance and other claim reports, and work with state and federal partners on documentation and tracking of all costs.	
	Cost Unit Leader		Continue tracking of all costs and project costs for continued operations without community support.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Review and revise the Incident Action Plan based on the continued assessment of hospital, status of patient care operations, and community impact from the event.	

			Continue to assess the hospital status based on information from Operations Section; determine need for increased evacuation or, if possible, repatriation of clinical sites.	
			Activate the Business Continuity Plan.	
	Public Information Officer		Continue media and staff briefings as indicated.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Communicate with outside response partners, healthcare organizations, mutual aid providers, and local officials on status of community healthcare infrastructure, community status, projected impacts, and availability of mutual aid.	
	Safety Officer		Continue monitoring of operations for site safety.	
			Initiate a reassessment of hospital and campus if aftershocks occur.	
	Medical Technical Specialist: Seismic or Structural Engineer		Assess the entire hospital and campus for seismic safety and provide assessment data, safety issues, repair needs and long term impacts to the Incident Commander.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue the monitoring of patient care services and the need for alteration of service delivery.	
			Identify additional supply, equipment, and personnel needs to maintain patient care services.	
	Infrastructure Branch Director		Continue or reactivate a damage assessment based on hospital size, occurrence of aftershocks, and impact on infrastructure.	
	Security Branch Director		Assess the event impact on security systems and the ability to maintain safe and secure operations.	

Section	Officer	Time	Action	Initials
	Patient Family Assistance Branch Director		Assess the need for continued operations based on long-term impacts to the hospital and community.	
Planning	Section Chief		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue staff, equipment, and materials tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
			Maintain and update the situational status boards, Incident Action Plan, and other documentation tools for timeliness and accuracy of information received.	
	Documentation Unit Leader		Collect and archive all data and paperwork generated during response and recovery actions.	
Logistics	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Reassess the status of communications and information technology services if aftershocks occur.	
	Support Branch Director		Assess the status of onsite supplies and equipment and ability to maintain services for up to 96 hours without community support.	
Finance/ Administration	Section Chief		Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damages, etc.	
	Cost Unit Leader		Continue tracking of expenses and expenditures (e.g., personnel, equipment, and supplies).	

Demobilization/System Recovery				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Initiate the repatriation of all evacuated patients, staff, and services.	
			Determine the ability to resume pre-incident services, including elective procedures and appointments, and direct activation of recovery plans for clinical operations.	
			Activate the Demobilization Plan and initiate system recovery.	

			Determine the ability to resume normal operations based on input from all sections, community providers, and regulatory agencies.	
	Public Information Officer		Provide a closing briefing to the media.	
			Notify patients, staff, and visitors of the return to normal operations.	
	Liaison Officer		Notify external partners and stakeholders of the operational status, including the repatriation of patients and the return to normal operations.	
	Safety Officer		Provide a final briefing to Command Staff.	
			Determine the need for continued alterations in operations to ensure a safe workplace.	
			Assess if all areas used in expansion of services are safe for the return to normal operations.	
			Prepare final HICS 215A for inclusion in Demobilization Plan.	

Demobilization/System Recovery				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Ensure that all documentation, including damage assessments, repair costs, and tracking materials, are submitted to the Planning Section.	
	Medical Care Branch Director		Ensure all patients have been repatriated, discharged, or transferred.	
			Deactivate all sites used to support clinical operations and return them to pre event status, including cleaning and repairs as needed.	
			Deactivate the triage and treatment areas for return to normal services.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Prepare a final report of damage assessment and a plan for repairs, as needed.	

			Complete a damage report, progress of repairs, and estimated timelines for restoration of hospital to pre-incident condition.	
	Business Continuity Branch Director		If record keeping included use of paper based records, ensure all clinical information is entered into electronic medical records.	
	Patient Family Assistance Branch Director		Ensure a notification of status to all family members; demobilize patient notification center.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and a hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Situation Unit Leader		Deactivate the patient and bed tracking units and provide a final report to Demobilization Unit.	
	Documentation Unit Leader		Ensure all electronic and paper documents created in event response are collected and archived.	
			Prepare a summary of the status and location of all patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Ensure the documentation of all data, actions, and situational status is addressed and incorporated into the Demobilization Plan.	
Logistics	**Section Chief**		Inventory the Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	

			Deactivate nontraditional areas used for sheltering and feeding and return to normal use.	
	Support Branch Director		Assess all deployed supplies and equipment for necessary repairs, cleaning, and restocking.	
			Prepare a report of staff injury and illness for follow up by employee health provider.	
Finance/ Administration	**Section Chief**		Document all costs, including claims and insurance reports, lost revenue, and expanded services, and provide report to Command Staff.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Earthquake Plan
- ☐ Evacuation Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Search and Rescue policy and procedure
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Utility Failure Plan
- ☐ Emergency Patient Registration Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Paper forms for down-time documentation, data entry, etc.

Access to hospital organization chart

Hospital and campus floor plans, maps, and evacuation routes

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Medical-Technical Specialist: Seismic or Structural Engineer			X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director				X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader			X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Evacuation, Shelter-in-Place, & Hospital Abandonment

Mission

To provide a safe environment for patients, staff, and visitors within the hospital or during evacuation following an incident that impacts the structural integrity or service availability of the hospital.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Provide for the safety of patients, staff, visitors, and families
- ☐ Provide for patient care and management
- ☐ Conduct safe and rapid evacuation or shelter-in-place of the hospital
- ☐ Plan for safe patient and staff repatriation and service restoration

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine the need for complete or partial evacuation versus shelter-in-place.	
			Activate Emergency Operations Plan, the Hospital Incident Management Team, and Hospital Command Center. Activate the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan, and Medical-Technical Specialists as needed.	
			Determine timeline and criteria for discontinuation of nonessential services and procedures.	
			Establish the operational period, objectives, and a regular briefing schedule. Consider the use of the Incident Action Plan Quick Start for initial documentation of the incident.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			Inform patients, staff, visitors, and families of the situation status and provide regular updates.	
			Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), including requesting supplies, equipment, or personnel not available in the hospital.	

Section	Branch/Unit	Time	Action	Initials
			Notify and regularly communicate with outside agencies about the hospital's status and organizational needs.	
			Communicate with other hospitals to determine their situation status, ability to accept patients if evacuation or hospital abandonment is ordered.	
	Safety Officer		Assist with safe evacuation or shelter-in-place of patients, staff, and visitors.	
			Oversee immediate stabilization of the hospital.	
			Initiate HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	
			Recommend immediate evacuation areas based on hazard to life.	
			Recommend assembly areas based on location and route safety and immediate access to transportation vehicles.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Implement the type of evacuation, as determined in cooperation with the Incident Commander: ☐ Shelter-in-place versus evacuation ☐ Immediate versus delayed evacuation ☐ Partial versus complete evacuation	
			If shelter-in-place is required: ☐ Establish shelter locations in cooperation with Incident Commander and Safety Officer ☐ Monitor that all patients, staff, and visitors are safely in shelter areas ☐ Secure and seal shelter areas	
			If evacuation is required: ☐ Prioritize areas for evacuation based on Safety Officer's evaluation of threat to life ☐ Identify evacuation priorities and transfer requirements	

	Medical Care Branch Director		For partial evacuation: ☐ Prepare and ensure transfer of patient records, medications, and valuables to transfer location ☐ Provide patient information as appropriate ☐ If evacuation is from a fire or explosion, evacuation must be to a fire compartment at least two fire compartments away (horizontally or vertically) from the fire or explosion ☐ Reassign personnel to ensure adequate staffing in area receiving patients	
			For complete evacuation: ☐ Prepare and ensure the transfer of patient records, medications, and valuables to holding and assembly area ☐ Confirm the transfer and timeline with the accepting hospital, providing patient information as appropriate ☐ Establish safe holding and assembly area to place patients, staff, and belongings until transfer ☐ Reassign staff to accompany patients moved to alternate facilities; ensure adequate staffing for patient care	
			Implement manual documentation procedures for patient care and incident management documentation, as required.	
	Infrastructure Branch Director		Discontinue nonessential services and initiate utility shutdowns.	
	Security Branch Director		Secure the hospital, limit entry of nonessential personnel, and implement limited visitation policy.	
			Provide additional personnel to ensure security of the evacuation staging sites.	
	Business Continuity Branch		Activate Business Continuity Plans and procedures	
	Patient Family Assistance Branch Director		Oversee patient family notifications of evacuation, shelter-in-place, transfer, or early discharge.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and an Incident Action Plan in collaboration with the Incident Commander.	

			Initiate patient tracking using HICS 254.	
	Situation Unit Leader		Conduct a patient census and identify potential discharges, in coordination with Operations Section.	
	Documentation Unit Leader		Monitor the complete documentation of activities, decisions, and actions.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Implement emergency support procedures to sustain critical services (e.g., power, water, communications) until evacuation can be accomplished.	
	Support Branch Director		Distribute appropriate equipment throughout the hospital (e.g., portable lights, flashlights, blankets, etc.).	
			Relocate hazardous materials and other materials requiring increased security, as time allows.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Implement established pay codes for personnel to track hours associated with the response.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue to implement operational periods, update incident objectives and Incident Action Plan.	
			Evaluate the hospital's capability to provide safe patient care and the need for additional evacuation.	
			Prepare for system recovery and demobilization.	
	Public Information Officer		Conduct briefings to media and patients, to update them on hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	

Section	Branch/Unit	Time	Action	Initials
	Liaison Officer		Maintain contact with local Emergency Operations Center, other area hospitals, local emergency medical services and regional medical health coordinator to relay status and critical needs and to receive community updates.	
			Assist with and facilitate procurement activities from outside agencies for supplies, equipment, medications, and personnel.	
	Safety Officer		Maintain safety of patients, staff, and visitors to best possible extent.	
			Conduct regular assessments and update HICS 215A.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Continue or implement Evacuation, Shelter-in-Place, or Hospital Abandonment Plan, as appropriate.	
			Prepare for demobilization and system recovery.	
	Medical Care Branch Director		Monitor patients, families, and visitors for adverse effects on health and for psychological stress.	
	Infrastructure Branch Director		Conduct regular hospital and infrastructure evaluations and assessments and respond immediately to damage or problems.	
			Monitor hospital damage and initiate repairs, as long as it does not hinder evacuation or shelter-in-place of the hospital.	
			Initiate salvage operations of damaged areas and relocated equipment from evacuated areas to secure areas or other hospitals.	
	Security Branch Director		Continue hospital security, crowd, and traffic control.	
	Business Continuity Branch Director		Continue to implement Business Continuity Plans and procedures.	
	Patient Family Assistance Branch Director		Continue, in cooperation with Public Information Officer, family notification of patient location and status.	

			Continue operational periods and incident objectives, and modify the Incident Action Plan in collaboration with the Incident Commander.	
Planning	**Section Chief**			
	Resources Unit Leader		Initiate staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
			Plan for the next operational period and shift change, including staff patterns, location of labor pool, hospital and campus entry and exit in view of curtailed services, and the impact on canceled procedures and appointments, etc.	
	Documentation Unit Leader		Continue to monitor the complete documentation of activities, decisions, and actions.	
	Demobilization Unit Leader		Prepare the Demobilization Plan.	
Logistics	**Section Chief**		Continue or implement the Evacuation, Shelter-in-Place and Hospital Abandonment Plan.	
			Prepare for demobilization and system recovery.	
	Service Branch Director		Provide continuing communications system support and information technology.	
			Ensure ongoing communications are available at staging areas and evacuation sites.	
	Support Branch Director		Provide for staff food, water, and rest periods.	
			Monitor staff for adverse effects of health and psychological stress; provide behavioral health support services for staff.	
			Obtain supplemental staffing, as needed. Provide staff for patient care and evacuation.	
			Conduct equipment, supply, medication, and personnel inventories, and obtain additional supplies to sustain hospital during evacuation or shelter-in-place. Route requests for additional resources not available in the hospital through the Liaison Officer to outside agencies.	
			Monitor, report, and follow up on staff injuries.	

Section	Officer	Time	Action	Initials
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Continue to track hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate the procurement of supplies and resources in cooperation with the Logistics Support Branch.	
	Compensation/ Claims Unit Leader		Begin to collect, when safe, documentation of structural and infrastructure damage, and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Track the estimates of lost revenue due to hospital evacuation.	
			Track the costs and expenditures of response and evacuation.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue regular briefings and action planning meetings, and modify incident objectives as needed to meet current situation.	
			Notify or update Chief Executive Officer, Board of Directors, and other internal authorities of ongoing operations and status of patients and families.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, and families.	
			Communicate regularly with Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, other area hospitals, local emergency medical services, and regional medical health coordinator to relay status and critical needs and to receive incident and community updates.	
	Safety Officer		Maintain safety of patients, staff, and families to best possible extent.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Recommend when to resume normal activities and services.	
	Medical Care Branch Director		Continue patient care and management activities for patients waiting for evacuation.	
			Provide behavioral health support to patients and families, as needed.	
	Infrastructure Branch Director		Assess and secure utility systems (power, water, gases, and medical gases).	
			Conduct frequent hospital reassessment and initiate hospital repairs and restoration plans.	
	Security Branch Director		Secure all evacuated areas, equipment, supplies, and medications.	
	Business Continuity Branch Director		Continue business continuity actions.	
	Patient Family Assistance Branch Director		Continue to provide family notifications of evacuation, shelter-in-place, transfer, or early discharge.	
Planning	**Section Chief**		Update and revise the Incident Action Plan.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue personnel and equipment tracking, including resources transferred to other hospitals.	
			Discuss staff utilization and salary practices during the evacuation and closure of the hospital with Human Resources.	
	Situation Unit Leader		Collate and report actions, decisions, and activities of the response.	
			Continue patient and bed tracking, including those transferred to other hospitals.	

			Plan for the next operational period and shift change, including staff patterns, location of labor pool, hospital and campus entry and exit in view of curtailed services, and the impact on canceled procedures and appointments, etc.	
	Documentation Unit Leader		Collect documentation of the activities, decisions, and actions.	
	Demobilization Unit Leader		Continue to prepare the Demobilization Plan.	
Logistics	**Section Chief**		Recommend, in collaboration with Operations Section, when to resume normal activities and services.	
	Service Branch Director		Maintain information technology security measures.	
	Support Branch Director		Support the return of supplies, equipment, medications, food, and water.	
			Provide food, water, rest periods, and behavioral health support for staff.	
Finance/ Administration	**Section Chief**		Continue operational periods and incident objectives, and modify the Incident Action Plan in collaboration with the Incident Commander.	
	Time Unit Leader		Continue to track the hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate the procurement of supplies and resources in cooperation with the Logistics Support Branch.	
	Compensation/ Claims Unit Leader		Contact insurance carriers to assist in the documentation of structural and infrastructure damage, and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Continue to track and monitor response and hospital repair costs and expenditures.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		In cooperation with local authorities, assess hospital status and determine whether criteria are met for partial or complete reopening of hospital.	

			Declare termination of the incident and order reopening of hospital and repatriation of patients.	
			Activate the Demobilization Plan.	
			Oversee restoration of normal hospital operations.	
	Public Information Officer		Conduct a final media briefing and assist with updating patients, staff, families, and others of the termination of the incident.	
	Liaison Officer		Communicate the final hospital status and termination of the incident to regional medical health coordinator, local Emergency Operations Center, local emergency medical services, area hospitals, and officials.	
	Safety Officer		Monitor and maintain a safe environment during the return to normal operations.	
			Assist with the completion of hospital repairs, in conjunction with the Operations Section.	
			Oversee the resolution of response actions that impacted normal operations; ensure fire doors and alarms are in working order.	

Demobilization/System Recovery				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Resume visitation and nonessential services in coordination with the Safety Officer.	
	Medical Care Branch Director		Discontinue ambulance diversion, if applicable.	
			Restore patient care and management activities, including the normal staffing plan.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Consider activation of a damage assessment team.	
			Complete the hospital damage report, progress of repairs, and estimated timelines for restoration of hospital to pre-incident condition.	

	Security Branch Director		Monitor that entry and exit points are open and functioning.	
			Maintain hospital security and traffic control.	
	Business Continuity Branch Director		Monitor and assist with the restoration of utilities and communications.	
			If record keeping included the use of paper based records, ensure all clinical information is entered into electronic medical records.	
	Patient Family Assistance Branch Director		Provide behavioral health support and information about community services to patients and families, as needed.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, organize, secure, and file incident documentation.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Monitor that all impacted clinical and support operation issues are relayed to appropriate sections for resolution.	
			Monitor that all clinical and support resources are returned to their normal operating function and location.	

Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Complete documentation and follow up for personnel injuries as appropriate.	
			Restock supplies, equipment, medications, food, and water to pre event inventories.	
			Provide staff debriefing and behavioral health support.	
Finance/ Administration	**Section Chief**		Submit final cost and expenditure report to the Incident Commander for approval and inclusion in After Action Report.	
	Compensation/ Claims Unit Leader		Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damages.	
	Cost Unit Leader		Compile a summary of the final response and recovery costs and expenditures and estimated lost revenues, and submit it to Finance Section Chief.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Evacuation, Shelter-in-Place, and Hospital Abandonment Plan
- ☐ Damage Assessment procedures
- ☐ Employee Health monitoring and treatment Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Discharge policy
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Emergency Patient Registration Plan
- ☐ Emergency Procurement policy
- ☐ Hospital and campus floor plans, maps, blueprints, and evacuation routes
- ☐ Utility Failure Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director	X	X	X	X
Patient Family Assistance Branch Dir.	X	X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader	X	X	X	X
Demobilization Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader	X	X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Explosive Incident

Mission

To safely and effectively respond to a pre detonation, ongoing, and post detonation explosive incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Ensure the safety of patients, staff, and visitors
- ☐ Initiate and maintain a coordinated response with law enforcement, public safety, regulatory officials, hazardous materials responders, and others
- ☐ Maintain clinical operations within the constraints of the response and recovery phases

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Confirm the accuracy and validity of the incident or threat.	
			Activate Emergency Operations Plan, Explosive Incident Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Approve and activate partial or complete hospital evacuation to ensure safety of patients, staff, and visitors.	
			Establish a liaison role with law enforcement or public safety response agencies who arrive to assist hospital response.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Establish operational periods, objectives, and regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
	Public Information Officer		Activate the Risk Communication Plan and media staging site.	
			Maintain communication with patients, staff, and families regarding the current situation and what is being done to address it.	
			Develop information release for media; work with law enforcement or public safety officials on details to be released; ensure families of impacted patients and staff are aware prior to release of information.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	

	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
			Liaise with law enforcement as applicable.	
	Safety Officer		Oversee the safe movement of patients, staff, and visitors from hazardous areas.	
			Provide incident specific information and intelligence if the incident involves hazardous materials or if incident may impact combustible or explosive agents on site.	
			Oversee the selection of relocation sites, Hospital Command Center, external command posts, media center and staging areas to ensure safe distance from the incident site.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Activate and oversee the evacuation of patient care areas when ordered by Incident Commander.	
			Identify evacuation priorities and transfer requirements.	
			With Logistics Section, determine and acquire supply and equipment for patients in relocated areas.	
			Identify procedures and appointments that will be impacted if partial or complete hospital evacuation is ordered.	
			With Liaison Officer and Public Information Officer, ensure notification of all impacted patients and visitors.	

	Infrastructure Branch Director		Identify and secure a safe perimeter from incident location (e.g., suspicious package, hazardous material leak, etc.).	
			Provide incident specific information to the Hospital Command Center and public safety, including Material Safety Data Sheet for identified chemicals or gases, current inventory of chemicals or gases, life safety restrictions, and policies in place.	
			Provide complete hospital blueprints, grids, and schematics to the Hospital Command Center and to law enforcement for search and response.	
			Determine the need for and impact of shutdown of infrastructure systems (e.g., medical gases, water, heating, ventilation, air conditioning, and power, etc.) as warranted by impact and response actions.	
	Security Branch Director		With Safety Officer and Infrastructure Branch, ensure a safe and secure perimeter.	
			Secure the hospital as indicated by threat and response actions.	
			Ensure activation of search procedures and collection of data.	
			Activate a Law Enforcement Interface Unit Leader to coordinate activities and information with responding law enforcement.	
			Provide access to camera surveillance, visitor logs, threat reports, bomb threat call logs, and incident specific policy and procedures.	
			Identify the need for additional staff to augment the response.	
	Law Enforcement Interface Unit Leader		Refer to the Job Action Sheet for appropriate tasks.	
	HazMat Branch Director		Determine if the impacted or threatened area is vulnerable to a hazardous materials spill or explosion.	
			Provide situation specific information to responding agencies (e.g., Material Safety Data Sheet, inventories, etc.).	

			Provide decontamination support, if needed.	
			Assist with safe perimeter management, if needed.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan, in collaboration with the Incident Commander.	
			Assess current staffing levels and project staffing needs and shortages for the next operational period, in collaboration with Operations Section.	
			Review all surgeries, outpatient appointments, and procedures for cancellation or rescheduling, and make recommendations to the Incident Commander, with Operations Section.	
	Resources Unit Leader		If partial or complete evacuation is ordered, initiate staff and materials tracking.	
	Situation Unit Leader		Collect and collate information from all tracking efforts and project needs.	
			If partial or complete evacuation is ordered, initiate patient and bed tracking using HICS 254.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Ensure deployment of interoperable communications equipment for use with outside response agencies.	
			Determine and activate alternate communication sources if routine systems are suspended.	
	Support Branch Director		Assist and support the evacuation of patients to pre identified areas.	
			Identify the transportation needs for evacuation, and secure the needed support.	
			Activate the labor pool to determine personnel resource capabilities.	
			Notify providers of regularly scheduled deliveries of a hospital lockdown, if ordered.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		With law enforcement or public safety responders, continue information sharing for coordinated response.	
			Establish a schedule to regularly update and revise initial Incident Action Plan, in collaboration with Planning Section.	
			Consider deploying a hospital representative to the local Emergency Operations Center, if applicable.	
	Public Information Officer		Maintain communications with media, staff, patients, and visitors in accordance with policy and in conjunction with law enforcement or other public safety officials.	
			Ensure notification of all persons scheduled for outpatient services.	
	Liaison Officer		Maintain communications with external partners for local, regional, and state bed availability, updating hospital situation status and critical issues and needs.	
			Continue to liaise with law enforcement.	
	Safety Officer		Oversee current evacuation or expansion of evacuated areas.	
			Ensure response areas and staging and evacuation sites are within a safe perimeter; expand the area if needed.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Prepare to expand the evacuation, if ordered.	
	Medical Care Branch Director		Continue patient care and management activities: ☐ Provide triage and observation of all patients waiting for further care ☐ Coordinate with Planning Section to provide crisis standard of care guidelines and prioritization of resources, if applicable	

Section	Officer	Time	Action	Initials
Planning	**Security Branch Director**		Ensure that search procedures are complete and all data and results are shared with law enforcement, hazardous materials (HazMat) responders, and the Safety Officer.	
	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Gather and maintain information on status of situation, results of actions taken, and impact on clinical and nonclinical operations	
			Continue patient and bed tracking.	
Logistics	**Section Chief**		Continue to provide support and services to evacuated patients, visitors, and staff.	
	Support Branch Director		Provide food, water, and rest periods for staff.	
			Rapidly investigate and document injuries of employees; provide appropriate follow up.	
			Consider activation of or continue to maintain a Labor Pool to assist with search procedures.	
			Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
Finance/ Administration	**Section Chief**		Track costs associated with incident, including lost revenue. Identify all costs related to infrastructure repair if damages occur during the incident.	
	Time Unit Leader		Track hours associated with the emergency response.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Determine return to normal operations in conjunction with law enforcement.	
			Initiate repatriation of patients and staff when the situation is deemed safe.	

			Maintain communications with patients, staff, visitors, and media in collaboration with law enforcement or Joint Information Center.	
Public Information Officer			Address social media issues as warranted; use social media for messaging as situation dictates.	
Liaison Officer			Maintain communications with external partners and key stakeholders.	
Safety Officer			Work with law enforcement, hazardous materials (HazMat) team, or other response agencies to ensure continued safe practices and need for alteration in operations to maintain safety.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	Section Chief		Ensure that all documentation, including damage assessments, repair costs, and materials tracking are submitted to Planning Section.	
	Medical Care Branch Director		Continue to monitor patient care services, any disruptions in service delivery, and the need for expansion of evacuation.	
	Infrastructure Branch Director		Conduct frequent hospital reassessments, and initiate hospital repairs and restoration plans.	
	Security Branch Director		Continue to provide security for the site and the operational response; augment security staff as needed.	
			Continue the collaboration with law enforcement and HazMat response to monitor impact of response on clinical services.	
Planning	Section Chief		Maintain and update the Incident Action Plan based on continued response actions and alterations in service delivery.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
Logistics	Section Chief		Provide staff and visitor rest areas, food and hydration, and communication services, if the incident warrants.	

			Track all incident related costs including lost revenue, procurement of supplies and equipment, and utilization of non-traditional areas for service delivery.	
Finance/ Administration	**Section Chief**		Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damage, etc.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine the ability to resume normal operations with law enforcement.	
			Communicate the current hospital status to the Chief Executive Officer, Board of Directors, and other appropriate internal and external officials.	
			Establish priorities for restoring normal operations using the hospital's Business Continuity Plan.	
			Monitor patients, staff, and visitors for adverse effects based on the incident.	
	Public Information Officer		Prepare and execute a final briefing to patients, staff, visitors, and media.	
	Liaison Officer		Notify all external partners, response agencies, regulatory authorities, and stakeholders of the incident resolution.	
	Safety Officer		Ensure that all operations have returned to normal within safe operating practice.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Safely close all alternate care sites or non-traditional patient care areas.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	

			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Assess the hospital for the potential impact of the incident and initiate repair and restoration of normal operations.	
			Oversee the resolution of response actions that impacted normal operations. Ensure that fire doors and alarms are in working order.	
			Conduct or continue damage assessment surveys.	
			Ensure completion of hospital repairs.	
			Complete a hospital damage report, including the progress of repairs, and estimated timelines for restoration of hospital to pre-incident condition.	
	Security Branch Director		Ensure the resumption of normal services and security systems.	
			Attend the debriefing and after action review with local responding law enforcement.	
Planning	**Section Chief**		Finalize and distribute Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and Section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, organize, secure, and file incident documentation.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	

Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available.	
	Support Branch Director		Deactivate the labor pool, when indicated.	
			Monitor the health status of staff; provide appropriate medical and behavioral health follow up.	
			Collect unused supplies distributed to alternate care sites and non-traditional patient care areas. Restock and redistribute all supplies and medications.	
			Repair and return borrowed equipment after proper cleaning and disinfection.	
Finance/ Administration	**Section Chief**		Contact insurance carriers to assist in documentation of structural and infrastructure damage, and initiate reimbursement and claims procedures.	
			Finalize all expense and time reports, summarize the costs of the response and recovery operations, and submit to Planning Section for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Explosive Incident Plan
- ☐ Evacuation, Shelter-in-Place, & Hospital Abandonment Plan
- ☐ Search Procedures
- ☐ Hazardous Materials Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Utility Failure Plan
- ☐ Emergency Patient Registration Plan
- ☐ Hospital campus blueprints, grids, and maps
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Law Enforcement Interface Unit Leader	X	X	X	X
HazMat Branch Director	X	X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader				X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X

Incident Response Guide: Hostage or Barricade Incident

Mission

To safely manage an incident involving a person with a weapon who has taken one or more hostages or has barricaded themselves within the hospital.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

☐ Ensure the safety of patients, staff, and visitors

☐ Maintain communications with staff, patients, visitors, and the media

☐ Coordinate response, release of information, and ongoing operations with law enforcement

☐ Provide behavioral health support and stress management services to patients, staff, and visitors

☐ Return to normal operations as quickly as possible

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Confirm a hostage or barricade incident has occurred.	
			Activate Emergency Operations Plan, Hostage or Barricade Incident Plan, Lockdown Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Notify law enforcement and provide details of the event.	
			Suspend or postpone nonessential services.	
			Establish a liaison role with law enforcement upon their arrival.	
			Establish operational periods, objectives, and regular briefing schedule. Consider the use of an Incident Action Plan Quick Start for initial documentation of the incident.	
	Public Information Officer		Designate and establish a media staging area in coordination with law enforcement and the Incident Commander.	
			Establish contact with media and inform them of the media staging area; provide briefings as directed.	
			Develop information release for media; work with law enforcement on details to be released; ensure families of impacted patients and staff are aware prior to release of information.	
			Provide approved messages as directed, utilize social media to disseminate information to patients, staff, families, and stakeholders.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	

Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area Hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
		Liaise with law enforcement as applicable	
Safety Officer		Complete HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Activate behavioral health services and deploy to needed areas.	
			Activate hospital diversion; notify emergency medical services authority and ambulance providers.	
			Identify evacuation priorities and transfer requirements.	
	Security Branch Director		Activate staging area for law enforcement.	
			Evacuate the area immediately surrounding the incident site.	
			Secure the hospital and campus. ☐ Direct all persons trying to leave the hospital or campus to a designated safe holding area. ☐ Coordinate movement with law enforcement. ☐ Provide notification of all persons including patients, visitors, and vendors who may be arriving; coordinate with Public Information Officer.	
			Activate Law Enforcement Interface Unit Leader position to coordinate with responding law enforcement agencies.	

			Provide key information to law enforcement, including: ☐ Existing restraining orders ☐ Employee or patient information ☐ Witness information ☐ Activation of plans ☐ Campus and hospital blueprints ☐ Surveillance camera footage ☐ Any other information requested	
			Provide interoperable communications to law enforcement. Provide law enforcement with communications to contact Security Branch Director or Law Enforcement Interface Unit Leader.	
	Law Enforcement Interface Unit Leader		Provide law enforcement with surveillance camera footage, hospital maps, blueprints, master keys, card access, search grids, and other data as requested.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
	Situation Unit Leader		Initiate tracking of patients, staff, and visitors; provide tracking data to law enforcement in coordination with the Security Branch Director or Law Enforcement Interface Unit Leader.	
	Documentation Unit Leader		Gather critical information, policies activated, blueprints, search grids, and other critical data for inclusion in the Incident Action Plan.	
Logistics	**Section Chief**		Activate the Support Branch to provide the logistical needs of the hospital staff and law enforcement personnel.	
	Support Branch Director		Gather information on planned or expected deliveries or pickups for the day; provide information to Security Branch or Law Enforcement Interface Unit Leader.	
			Notify operators of planned deliveries or pickups of the need to postpone or reschedule.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Cost Unit Leader		Ensure documentation of activities, events, cancellations, etc., for tracking of financial loss and impact.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Continue to assess the impact of the event on clinical and nonclinical operations; consider additional cancellations or postponements.	
	Public Information Officer		Continue media briefings and updates as directed; work within the Joint Information Center, if available. Continue to provide approved messaging to media, patients, visitors, and staff.	
	Liaison Officer		Maintain communications with local officials and hospitals to provide updated situational assessment and impact on continued operations.	
	Safety Officer		Conduct ongoing analysis of response actions for safety; implement corrective actions and update HICS 215A.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Reassess evacuations and the need for extended evacuation to maintain safety.	
	Medical Care Branch Director		Continue clinical and nonclinical operations under current restrictions in movement and entry to hospital campus.	
			Provide ongoing behavioral health services to all impacted persons.	
	Patient Family Assistance Branch Director		Establish a patient information center in collaboration with Liaison Officer. Provide support to families of patients as needed	
Planning	**Section Chief**		Prepare the Incident Action Plan for the next operational period; engage all sections to provide updates in staffing and alterations in strategies and tactics.	
	Resources Unit Leader		Initiate staff and equipment tracking.	
	Situation Unit		Update and revise the status boards, Incident Action Plan, and other documentation tools.	

Section	Officer	Time	Action	Initials
	Leader		Continue patient and bed tracking	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Ensure ongoing access to necessary supplies and equipment to support any relocated services.	
			Assess the impact of postponed or rescheduled deliveries and pickups on clinical and nonclinical operations; provide information to the Planning Section for documentation and revision of the Incident Action Plan.	
			Consider activation of the labor pool based on current and projected manpower needs; consider staffing for oncoming shifts if the campus remains in lockdown.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Track hours associated with the emergency response.	
	Cost Unit Leader		Identify all costs related to infrastructure repair if damages occur during the incident.	
			Track costs and expenditures of the response; include estimates of lost revenue.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue to monitor and assess the response actions by the hospital and law enforcement.	
			Continue the collaboration with law enforcement.	
	Public Information Officer		Continue scheduled briefings and notifications to patients, families, stakeholders, and media within a Joint Information Center.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Safety Officer		Continue monitoring the response to ensure the safety of patients, staff, visitors, and response partners.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Review all canceled appointments and procedures. Determine the ability to reschedule as well as resources needed to expand services, if necessary.	
			Contact patients whose care was postponed; determine their clinical status and the timeframe necessary for evaluation.	
	Security Branch Director		Identify the necessary staffing to maintain enhanced security response and campus lockdown.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Demobilization Unit Leader		Identify issues and necessary actions to return to normal operations, ensuring all cancellations and postponements are included.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Continue to project impact of postponed deliveries and pickups on clinical and nonclinical operations.	
			Work with the Operations Section to identify necessary supplies and equipment for routine operations and any expansion of operations to restore postponed appointments and procedures.	
Finance/ Administration	**Section Chief**		Continue to assess the financial impact of the response.	
	Procurement Unit Leader		Work with the Logistics Section to determine the need to acquire supplies from nontraditional vendors if deliveries cannot be rescheduled.	
	Cost Unit Leader		Determine the cost of the impact of cancelled or postponed services, deliveries, etc.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Confirm with law enforcement that the hostage or barricade incident is resolved.	
			Ensure that all patients, staff, and visitors are notified of the status of the incident.	
			Communicate to all Command and General Staff that the incident is resolved. Begin to identify personnel and activities for demobilization.	
	Public Information Officer		Schedule media briefing; work within the Joint Information Center and law enforcement.	
			Determine appropriate personnel to address media; coordinate hospital and law enforcement speakers.	
			Use social media to notify patients, staff, visitors, and stakeholders that incident is resolved.	
	Liaison Officer		Notify all local hospitals, response partners, and stakeholders that incident is resolved.	
	Safety Officer		Ensure that any operational response changes undertaken to provide for the safety of patients, staff, visitors, and response partners are returned to normal operations. Update the HICS 215A.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Initiate activities to restore normal operations; work with the Planning Section to identify activities that were altered for restoration to normal.	
			Restore visiting hours if suspended; determine the need to expand normal hours and ensure behavioral health services are available as needed for patients and visitors.	
	Medical Care Branch Director		Arrange for the transfer of patients from alternate cares site back to reopened patient care areas.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	

			Repatriate transferred patients, if applicable.	
	Security Branch Director		Demobilize the hospital lockdown as directed.	
	Patient Family Assistance Branch Director		Ensure the debriefing of, and support for, families of affected patients.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Ensure that all documentation produced during the response and recovery is correlated and available for after action review.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Work with all sections to ensure that postponed or altered services are identified and addressed.	
			Complete the Demobilization Plan and distribute it as per policy.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Provide sufficient space for law enforcement to interview impacted patients and staff in coordination with the Security Branch Director or Law Enforcement Interface Unit Leader.	

			Ensure behavioral health services are made available to staff.	
			Ensure all affected personnel are debriefed.	
			Reschedule all canceled deliveries and pickups; notify the Planning and Operations Sections of any delays that may impact services.	
			Work with the Finance Section to procure additional supplies and equipment, activate emergency contracts or use noncontract vendors, as needed.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Compensation / Claims Unit Leader		Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damage, etc.	
			Ensure claims related to the event are addressed and investigated; report all claims to Incident Commander and other hospital services per policy.	
	Cost Unit Leader		Complete an assessment of all costs incurred during the response, the loss of revenue, and the costs of recovery.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Hostage or Barricade Incident Plan
- ☐ Shelter-in-Place Plan
- ☐ Evacuation Plan
- ☐ Lockdown Plan
- ☐ Employee Health monitoring and treatment Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan
- ☐ Discharge policy
- ☐ Emergency procurement policy

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Security Access Control System

Security Closed Circuit Television (CCTV) System

Hospital and campus floor plans, maps, and blueprints

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Law Enforcement Interface Unit Leader	X	X	X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader	X	X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader			X	X
Compensation/Claims Unit Leader				X
Cost Unit Leader	X	X	X	X

Incident Response Guide: Infectious Disease

Mission

To effectively and efficiently identify, triage, isolate, treat, and track a surge of potentially infectious patients and staff, and to manage the uninjured, asymptomatic persons, family members, and media.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

☐ Identify, triage, isolate, and treat infectious patients

☐ Protect patients and staff from exposure and injury

☐ Assure safety and security for patients, staff, visitors, and the hospital

☐ Admit a large number of infectious patients while protecting other (uninfected) patients

Immediate Response (0 – 2 hours)

Section	Officer/Specialist	Time	Action	Initials
Command	**Incident Commander**		Receive notification of incident from local emergency medical services; notify the emergency department of possible incoming infectious patients.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Activate the Emergency Operations Plan, Infectious Disease Plan, Surge Plan, Infectious Patient Transport Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Establish operational periods, objectives, and regular briefing schedule. Consider the use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Appoint Command Staff, Section Chiefs, and Medical-Technical Specialist: Infectious Disease.	
	Public Information Officer		In conjunction with Joint Information Center, develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Establish contact with local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, and area hospitals to determine incident details, community status, estimates of casualties, request needed supplies, equipment, and personnel, and to identify the infectious agent.	
			Communicate regularly with Incident Commander and Section Chiefs regarding operational needs and the integration of hospital functions with local response.	

Section	Branch/Unit	Time	Action	Initials
	Safety Officer		Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital using HICS 215A and implement corrective actions to address.	
			Monitor safe and consistent use of appropriate personal protective equipment by staff.	
	Medical-Technical Specialist: Infectious Disease		Verify from the emergency department attending physician and affected outpatient sites, in collaboration with local emergency medical services, the following information and report to the Incident Commander: ☐ Number and condition of patients affected, including asymptomatic people presenting ☐ Type of biological or infectious disease involved (case definition) ☐ Medical problems present in addition to the biological or infectious disease involved ☐ Measures taken (e.g., cultures, supportive treatment) ☐ Potential for, and scope of, communicability	
			Provide guidance on appropriate personal protective equipment and isolation precautions.	
			Provide expert input in the Incident Action Planning process.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Provide just-in-time training for both clinical and nonclinical staff regarding the status of the event, precautions they should take, and rumor control.	
			Notify the emergency department of possible numbers of incoming infectious patients, in consultation with the Liaison Officer who is in communication with local emergency medical services.	

			Implement Infectious Disease Plan, including: ☐ Location for offsite triage, as appropriate ☐ Proper rapid triage of people presenting requesting evaluation, coordinated with security, if necessary ☐ Staff implementation of infection precautions, and higher level precautions for high risk procedures. (e.g., suctioning, bronchoscopy, etc.), as per current Centers for Disease Control and Prevention (CDC) guidelines ☐ Proper monitoring of isolation rooms and isolation procedures ☐ Limitation of patient transportation within hospital for essential purposes only ☐ Restriction of number of clinicians and ancillary staff providing care to infectious patients	
	Medical Care Branch Director		Evaluate and determine health status of all persons prior to hospital entry.	
			Ensure safe collection, transport, and processing of laboratory specimens.	
			Identify evacuation priorities and transfer requirements.	
			Review patient census and determine if discharges and appointment cancellations are required.	
			Provide personal protective equipment to personnel with immediate risk of exposure (e.g., conducting outside duties, conducting screening and triage, interacting with infectious patients).	
			Prepare for fatalities, if necessary.	
			Activate Emergency Patient Registration Plan as required.	
	Security Branch Director		Activate the Security Plan to: ☐ Secure the hospital to prevent infectious patients from entering the hospital except through designated route ☐ Establish ingress and egress routes ☐ Implement crowd and traffic control protocols	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in coordination with the Incident Commander.	

Section	Officer/Specialist	Time	Action	Initials
	Resources Unit Leader		Track dispersal of external pharmaceutical cache(s) such as the Strategic National Stockpile.	
			Initiate personnel and materials tracking.	
	Situation Unit Leader		Initiate patient and bed tracking (Disaster Victim/Patient Tracking – HICS Form 254).	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Service Branch		Prepare for receipt of external pharmaceutical cache(s) such as the Strategic National Stockpile.	
	Support Branch		Implement distribution plans for mass prophylaxis and immunizations for employees, their families, and others.	
			Anticipate an increased need for medical supplies; antivirals, IV fluids, and pharmaceuticals; oxygen, ventilators, suction equipment, and respiratory protection; and for respiratory therapists, transporters, and other personnel.	
			With Planning Section, determine staff supplementation needs and activate Labor Pool.	

Intermediate Response (2 – 12 hours)				
Section	**Officer/Specialist**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Review the overall impact of the ongoing incident on the hospital with Command and General staff.	
			Monitor that communications and decision making processes are coordinated with local Emergency Operations Center and area hospitals, as appropriate.	
			Direct implementation of any and all additional response plans required to address the incident.	
			Consider deploying a hospital representative to the local Emergency Operations Center.	
	Public Information Officer		Conduct briefings to patients, staff, people seeking shelter, and media to update them on incident and hospital status.	

			Coordinate risk communication messages with the Joint Information Center, if able.	
			Assist with notification of patients' families about the incident and inform them of the likelihood of transfer, if required.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, local emergency medical services, local health department, regional medical health coordinator, and area hospitals to relay status and critical needs and to receive community updates.	
			Keep local emergency medical services advised of any health problems and trends identified, in cooperation with Infection Control.	
	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect staff, patients, visitors, and hospital.	
			Continue to monitor proper use of personal protective equipment and isolation procedures.	
	Medical-Technical Specialist: Infectious Disease		Support Hospital Incident Management Team as needed; consult appropriately with other internal and external experts.	
			Support Operations Section as needed by coordinating information regarding specific disease identification and treatment procedures and staff prophylaxis procedures.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Monitor continuation of medical mission activities. Conduct disease surveillance, including number of affected patients and personnel.	
			Continue patient, staff, and hospital monitoring for infectious exposure, and provide appropriate follow up care as required.	
			Continue patient management activities, including patient cohorting, isolation, and personal protective equipment practices.	

			Consult with Infection Control for disinfection requirements for equipment and hospital.	
			Implement Fatality Management Plan and assess capacity for refrigeration and security of decedents, if necessary.	
	Business Continuity Branch Director		Refer to Job Action Sheet for appropriate tasks.	
	Patient Family Assistance Branch Director		Establish a patient information center.	
Planning	**Section Chief**		Update and revise the incident objectives and the Incident Action Plan for the upcoming operational period in cooperation with Command Staff and Section Chiefs.	
	Resources Unit Leader		Continue staff, materials, and equipment tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Coordinate activation of staff vaccination or Mass Vaccination and Prophylaxis Plan with Operations Section.	
			Monitor health status of staff exposed to infectious patients, and report to Operations Section.	
			Consider temporarily reassigning staff recovering from flu to appropriate duties; reassign staff at high risk for complications of flu (e.g., pregnant women, immunocompromised persons) to low risk duties (no infectious patient care or administrative duties only).	
			Continue to assess surge capacity and need for supplies (equipment, blood products, medications, supplies) in cooperation with Operations Section. Obtain supplies as required and available or continue supply rationing.	
			Continue staff call in (if safe and as needed) and provide additional staff to impacted areas.	
			Facilitate procurement of supplies, equipment, and medications for response and patient care.	

	Service Branch Director		Provide for staff food, water, rest periods, and behavioral health support.	
Finance/ Administration	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Track hours associated with the incident response.	
	Procurement Unit Leader		Facilitate procurement of needed supplies, equipment, and contractors.	
	Compensation / Claims Unit Leader		Track and follow up with employee illnesses and absenteeism issues.	
			Implement risk management and claims procedures for reported staff and patient exposures or injuries.	
	Cost Unit Leader		Track response expenses and expenditures.	

Extended Response (greater than 12 hours)

Section	Officer/Specialist	Time	Action	Initials
Command	**Incident Commander**		Reassess incident objectives and Incident Action Plan and revise as indicated by the response priorities and overall mission.	
			Plan for return to normal services in coordination with Command Staff and Section Chiefs; consider consulting with emergency medical services and other community hospitals regarding their status and plans.	
			Reevaluate the hospital's ability to continue its medical mission.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and people seeking shelter.	
			Communicate regularly with the Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain established contacts with outside agencies to relay status and critical needs.	
			Keep local emergency medical services advised of any health problems and trends identified.	

			Continue to oversee safety measures and use of personal protective equipment for patients, staff, and visitors.	
	Safety Officer		Assess the crowd control plan and any other safety issues with appropriate staff.	
	Medical-Technical Specialist: Infectious Disease		Continue to support Hospital Incident Management Team with current information and projected impact.	
			Continue to support Operations Section as needed by coordinating information regarding specific infectious agent identification and treatment procedures.	
			Continue to provide expert input into Incident Action Planning process.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Monitor continuation of medical mission activities, including patient care and isolation activities.	
			Continue patient monitoring for infectious exposure and provide appropriate follow up care as required.	
	Infrastructure Branch Director		Ensure proper disposal of infectious waste, including disposable supplies and equipment.	
			Continue infrastructure maintenance and support, including continuing to monitor hospital air quality.	
Planning	**Section Chief**		Update and revise the Incident Action Plan in collaboration with Command Staff and Section Chiefs.	
			Ensure that updated information and intelligence is incorporated into Incident Action Plan.	
	Resources Unit Leader		Monitor supply and equipment levels and notify Logistics and Operations Section of identified needs.	
	Demobilization Unit Leader		Ensure the Demobilization Plan is being readied.	

Section	Officer	Time	Action	Initials
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor the health status of staff that participated, supported, or assisted in disinfection activities, and provide appropriate medical care and follow up.	
			Continue to facilitate procurement of supplies, equipment, and medications for response and patient care.	
Finance/ Administration	**Section Chief**		Coordinate with Risk Management for additional insurance and documentation needs, consider taking photographs where applicable.	
	Cost Unit Leader		Continue to track response costs and expenditures, and prepare regular reports for the Incident Commander.	

Demobilization/System Recovery				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Determine termination of event and ability to return to normal operations.	
			Oversee and direct demobilization operations with restoration of normal services.	
			Ensure that process is mobilized to complete response documentation for submission for reimbursement.	
	Public Information Officer		Conduct final media briefing and assist with updating staff, patients, families, and others of termination of incident and restoration of normal services.	
	Liaison Officer		Communicate final hospital status and termination of the incident to local emergency medical services and any established outside agency contacts.	
	Safety Officer		Monitor and maintain a safe environment during return to normal operations.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Submit all section documentation to Planning Section for compilation in After Action Report.	
	Medical Care Branch Director		Return patient care and services to normal operations.	
	Infrastructure Branch Director		Ensure that deployable isolation equipment or alterations in air pressure flow are returned to pre-incident status.	
	Security Branch Director		Return traffic flow and security forces to normal services.	
Planning	**Section Chief**		Finalize and distribute Demobilization Plan.	
			Conduct debriefings or hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report, Corrective Action, and Improvement Plans for submission to the Incident Commander, and include: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
			Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute as appropriate.	
Logistics	**Section Chief**		Submit all section documentation to Planning Section for compilation in After Action Report.	
	Support Branch Director		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
			Inventory levels of personal protective equipment and work with Finance Section to replenish necessary supplies.	

Finance/ Administration	Section Chief		Contact insurance carriers to identify requirements for documentation of any damage or losses, and initiate reimbursement and claims procedures.	
			Finalize all expense and time reports and summarize the costs of the response and recovery operations to submit to Planning Section for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Infectious Disease Plan
- ☐ Surge Plan
- ☐ Infectious Patient Transport Plan
- ☐ Mass Vaccination and Prophylaxis Plan
- ☐ Risk Communication Plan
- ☐ Fatality Management Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Employee health monitoring and treatment plan
- ☐ Behavioral Health Support Plan
- ☐ Centers for Disease Control and Prevention Guidelines for specific agent identification and treatment
- ☐ Mass Casualty Plan
- ☐ Infection control and isolation protocols
- ☐ Security Plan
- ☐ Business Continuity Plan
- ☐ Emergency Patient Registration Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 254 – Disaster Victim/Patient Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Hospital Incident Management Team Activation: Infectious Disease

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Medical-Technical Specialist: Infectious Disease	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director			X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director		X	X	X
Patient Family Assistance Branch Director		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Information Technology (IT) Failure

Mission

To provide for business continuity and availability of essential automated systems for the hospital in the event of a massive or sustained information technology failure, cybersystems compromise, or deliberate attack.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Maintain patient care capabilities
- ☐ Isolate and repair affected information technology systems
- ☐ Notify affected end user supervisory personnel and provide directed guidance on information technology systems use
- ☐ Restore automated systems and services

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Activate the Emergency Operations Plan, Information Technology Failure Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
			Consider limiting or ceasing nonessential services.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Prepare an initial risk communications for staff and patients regarding the cybersystems situation and recommend actions until the system is restored.	
			Update internet, intranet, and social media with the hospital's status and any alteration in services.	
			Notify key staff including house supervisors, Chief of Staff, Business Continuity Branch Director, support services, and others designated in the Business Continuity Plan as it applies to cybersystem disruptions.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate this information via regular briefings to the Section Chiefs and the Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital.	
			If the disruption is deliberate and targeted, contact local law enforcement, the Federal Bureau of Investigation (FBI) Cyber Division, and the state cyber terrorism division, as appropriate.	

Section	Branch/Unit	Time	Action	Initials
	Safety Officer		Provide for the safety of patients, staff, and visitors in areas impacted by the automated system shutdowns.	
			Initiate the HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Determine if personnel and resources are available to successfully complete the Operations Section strategies and tactics as outlined in the Incident Action Plan. If not, contact Logistics Section to request additional personnel or resources.	
	Medical Care Branch Director		Provide for the continuation of patient care and management activities, including the documentation of medication administration, patient care, and supply use.	
			Implement downtime patient care documentation and critical diagnostic and support systems until systems can be restored.	
	Infrastructure Branch Director		Direct an inspection of critical monitoring functions that may be affected by the incident.	
			Conduct a risk assessment of affected environmental systems (e.g., heating, ventilation, air conditioning, and utilities) and implement plans to maintain affected systems that support hospital operations.	
	Security Branch Director		Provide for security of the hospital, including manual patrols and controls of ingress and egress.	
	Business Continuity Branch Director		Work closely with the Infrastructure Branch to implement the Business Continuity Plan.	
			Assess the degree of cybersystem intrusion or disruption. Recommend any interim measures and corrective actions.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	

	Situation Unit Leader		Determine the affect of system interruptions on the ability to gather and share incident information and impacts.	
	Documentation Unit Leader		Collect and collate manual documentation of the incident.	
Logistics	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Implement emergency internal communication and reporting mechanisms.	
			Isolate and repair, replace, or remove affected systems from the hospital network; establish restoration priorities in accordance with the Business Continuity Plan.	
			Provide for the integrity of system backup data and begin planning for system restoration.	
	Support Branch Director		Implement manual inventory and resupply processes, including medication distribution.	
			Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Obtain and distribute supplies, equipment, medications, and food and water to sustain operations.	

Intermediate/Extended Response (2 to greater than 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Conduct regular briefings and situation updates with Command Staff and Section Chiefs to determine the situation status and timelines for restoration of services.	
			Continue to implement operational periods and update incident objectives within the Incident Action Plan.	
	Public Information Officer		Establish a central information center as needed to address all staff or patient care issues that may arise as a result of the disruption.	

			Update patients, staff, and visitors on situation status.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Continue to update local emergency management and other officials regarding situation and hospital status.	
	Safety Officer		Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital; recommend corrective actions and update HICS 215A as required.	

Intermediate/Extended Response (2 to greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Prepare for demobilization and system recovery.	
			Recommend, in collaboration with Operations Section, when to resume normal activities and services.	
			Evaluate the need to shelter-in-place or evacuate patients to ensure safety.	
	Medical Care Branch Director		Continue patient care and management; identify patient care systems that are affected during the course of the restoration process.	
	Infrastructure Branch Director		Assess affected environmental systems and modify response actions as necessary.	
	Security Branch Director		Continue hospital security as well as traffic and crowd control.	
	Business Continuity Branch Director		Continue to implement the Business Continuity Plan and procedures.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being implemented.	
	Resources Unit Leader		Initiate staff and equipment tracking.	

Section	Officer	Time	Action	Initials
	Situation Unit Leader		Update and revise the Incident Action Plan.	
			Initiate patient and bed tracking.	
	Documentation Unit Leader		Collect documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare for demobilization and system recovery.	
Logistics	Section Chief		Recommend, in collaboration with Operations Section, when to resume normal activities and services.	
	Service Branch Director		Provide alternate documentation systems and support hardware (i.e., providing laptops and printers to affected areas for temporary use until systems are fully restored).	
			Monitor computer systems for new cyber threats.	
			Plan for migration of manual documentation to electronic processes after systems are restored.	
	Support Branch Director		Continue to obtain needed supplies, equipment, medications, food and water. Route requests for additional resources not available in the hospital through the Liaison Officer to outside agencies.	
Finance/ Administration	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Consider alternate methods to ensure payroll processing and documentation of hours worked.	
			Track hours associated with the emergency response.	
	Cost Unit Leader		Monitor and track costs related to the disruption of information technology systems including the compromise of automated systems.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	Incident Commander		Declare incident termination.	
			Monitor full system recovery and the return to normal operations.	

	Public Information Officer		Issue a final media update with hospital status and appropriate service disruption information, in collaboration with the Incident Commander.	
	Liaison Officer		Communicate final hospital status and termination of the incident to the regional medical health coordinator, local Emergency Operations Center, area hospitals, local emergency medical services, and officials.	
	Safety Officer		Monitor the safe restoration of services and systems.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Monitor the restoration of normal operations; coordinate with the Planning Section to ensure cancelled procedures and appointments are addressed.	
	Medical Care Branch Director		Restore patient care and management activities, including normal staffing plan.	
			Notify risk management and legal services of any actual or potential protected health information compromises or violations.	
	Security Branch Director		Re-establish security systems that may have been impacted by the incident.	
	Business Continuity Branch Director		Monitor and assist with restoration of information technology systems, utilities, and communications.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	

			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: □ Summary of the incident □ Summary of actions taken □ Actions that went well □ Actions that could be improved □ Recommendations for future response actions	
	Documentation Unit Leader		Collect, organize, secure, and file incident documentation.	
			Prepare a summary of the status and location of all patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Monitor that the status of all impacted clinical and support operations are relayed to the appropriate sections for resolution.	
Logistics	**Section Chief**		Monitor the restoration of normal operations; coordinate with the Planning Section.	
			Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Service Branch Director		Prepare a summary report of corrective actions and recommendations for updating and improving diagnostic and protective cyber services.	
	Support Branch Director		Provide behavioral health support and information about community services to staff, as needed.	
Finance/ Administration	**Section Chief**		Compile a final summary of response and recovery costs and expenditures and estimated lost revenue. Submit to the Planning Section Chief for inclusion in the After Action Report.	
	Time Unit Leader		Ensure receipt of all personnel time sheets and documentation needed for the recovery of costs.	
	Compensation/ Claims Unit Leader		Contact insurance carriers to assist with initiating reimbursement and claims procedures.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Information Technology (IT) Failure Plan
- ☐ IT systems diagnostics (e.g., antivirus, spyware, firewall)
- ☐ IT systems malfunction alert notification process
- ☐ Business Continuity Plan
- ☐ Memoranda of Understanding with appropriate entities
- ☐ Paper charts and electronic medical record downtime procedures
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Security Plan
- ☐ Utility Failure Plan
- ☐ Discharge Policy
- ☐ Hospital and campus maps, blueprints and floor plans
- ☐ Emergency Procurement Policy
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Paper forms for downtime documentation, data entry, etc.

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director	X	X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader	X	X	X	X
Demobilization Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Compensation/Claims Unit Leader				X
Cost Unit Leader		X	X	X

Incident Response Guide: Mass Casualty Incident

Mission

To ensure a safe environment for staff, patients, visitors, and the facility when the number of patients severely challenges or exceeds the capability and capacity of the hospital.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Identify, triage, and treat patients
- ☐ Provide safe and appropriate patient care, based on scope of response
- ☐ Maintain patient tracking
- ☐ Provide continuity of care for non-incident patients
- ☐ Maintain communications with healthcare and public safety response partners

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Activate Emergency Operations Plan, Mass Casualty Incident Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Establish operational periods, objectives, and regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Conduct media briefings and situation updates, in conjunction with Incident Commander.	
			Maintain communication with patients, staff, and families regarding current situation and what's being done to address the situation.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
			Communicate with local emergency medical services for local, regional, and state bed availability.	
	Safety Officer		Complete HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	
			If nontraditional areas are used for patient care and other services, ensure they follow health and safety standards.	

| | | | Direct implementation of safety practices (e.g., sharps disposal, linen control, trash control, biohazard materials control, electrical safety, water, temperature, etc.) in nontraditional areas. | |

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Review hospital census and determine if patient discharges and appointment cancellations are required.	
			Establish a staffing plan for medical direction and nursing care in alternate care sites or nontraditional patient care areas.	
			Identify inpatients for immediate discharge or transfer to other facilities and direct staff to expedite patient discharges.	
			Establish a patient discharge area to free beds until patients can be discharged or transferred and transported.	
			Provide for the rapid clearing and turnover of patient care beds and areas to expedite patient discharge and admission.	
			Consider extending outpatient hours to accommodate additional patient visits.	
			Consider cancellation of all planned surgeries and outpatient procedures.	
			Prepare for fatalities in conjunction with Medical Examiner or Coroner and local emergency medical services.	
	Security Branch Director		Consider use of facility lockdown to restrict access.	
			Consider establishing alternate traffic routing to facilitate triage and arrival of multiple victims.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Assess, in collaboration with Operations Section, current staffing and project staffing needs or shortages for the next operational period.	
			Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with Incident Commander.	
			In conjunction with Operations Section, review all surgeries, outpatient appointments, and procedures for cancellation or rescheduling, and make recommendations to Incident Commander.	
	Resources Unit Leader		Initiate personnel and materiel tracking.	
	Situation Unit Leader		Initiate patient and bed tracking in collaboration with Operations Section (HICS 254–Disaster Victim/Patient Tracking).	
			Gather situational assessment and response data from internal and external sources.	
			Collect and collate patient, bed, personnel, and materiel tracking status and project future resource needs.	
Logistics	**Section Chief**		Coordinate with Planning and Operations Sections to determine, obtain, and transport additional supplies, equipment, medications, and personnel as required.	
	Support Branch Director		Establish Labor Pool and Credentialing Unit if needed.	
			Register, credential, assign, and mobilize solicited and unsolicited volunteers per Volunteer Utilization Plan.	
			Assist the Operations Section with establishing alternate care or nontraditional care sites.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Update hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Monitor and ensure that communications and decision-making are coordinated with external agencies and healthcare facilities, as appropriate.	

			Establish a schedule to regularly update and revise the initial Incident Action Plan, in collaboration with the Planning Section.	
	Public Information Officer		Continue to provide information to patients, staff, visitors, families, and media regarding situation status and facility measures taken to meet demand.	
			Coordinate information release with the Joint Information Center.	
	Liaison Officer		Continue to communicate with local emergency medical services regarding local, regional, and state bed availability and updating on hospital situation status and critical issues or needs.	
	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect patients, staff, visitors, and the facility.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue patient care and management activities. ☐ Provide re-triage and observation of all patients waiting for further care ☐ Provide crisis standards of care guidelines, if necessary, and prioritization of resources (coordinate with Planning Section)	
			Expedite patient discharge medication processing and dispensing.	
	Patient Family Assistance Branch Director		Establish a family reunification area and provide support staff to facilitate the flow of information.	
			Consider activating a patient information center.	
Planning	**Section Chief**		Update and revise the Incident Action Plan, and distribute to Command Staff and Section Chiefs.	
			Coordinate with Operations Section for continued consideration of canceling or rescheduling surgeries and elective procedures.	

Section	Officer	Time	Action	Initials
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed equipment tracking.	
	Demobilization Unit Leader		Begin planning for demobilization and system recovery.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Continue to call in additional staff to supplement operations, as directed.	
			Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Obtain needed supplies, equipment, and medications to support patient care activities.	
			Establish an employee dependent care area, as appropriate.	
			Rapidly investigate and document injuries or employees exposed to illness; provide appropriate follow-up.	
Finance/ Administration	**Section Chief**		Implement procedures to authorize expedited procurement of emergent supplies, equipment, and medications to meet patient care and facility needs.	
			Track all costs and expenditures of response and estimate lost revenues due to canceled procedures and surgeries and other services.	
	Time Unit Leader		Track hours associated with the emergency response.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Establish priorities for restoring normal operations using the facility's Business Continuity Plan.	
	Public Information Officer		Conduct briefings for media, in cooperation with the Joint Information Center.	

| | | | Address social media issues as warranted; use social media for messaging as situation dictates. | |
| | **Liaison Officer** | | Communicate facility status, report of patient conditions and location to emergency medical services. | |

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Review current patient census, capability to continue services, and timeframe to return to normal operations. Provide recommendations to Incident Commander.	
	Patient Family Assistance Branch Director		Provide behavioral health support and community services information for patients and families.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Documentation Unit Leader		Collect, organize, secure, and file incident documentation.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor health status of staff, and provide appropriate medical and behavioral health follow-up.	
			Collect unused supplies distributed to alternate care and non-traditional care sites. Restock and redistribute all supplies and medications.	
Finance/ Administration	**Section Chief**		Continue to track all costs and expenditures of response and estimate lost revenues due to canceled procedures and surgeries and other services.	
	Time Unit Leader		Continue to track hours associated with the emergency response.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Approve the Demobilization Plan.	
	Public Information Officer		Conduct final briefings for media, in cooperation with the Joint Information Center.	
			Close the patient information center, if activated.	
	Liaison Officer		Communicate facility status, final report of patient condition and location to local emergency medical services	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Deactivate alternate care sites and nontraditional patient care areas and safely close.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Business Continuity Branch Director		If record keeping included use of paper-based records, ensure all clinical information is entered into electronic medical records.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan that includes: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	

			Collect, organize, secure, and file incident documentation.	
	Documentation Unit Leader		Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by Incident Commander, distribute to appropriate external agencies.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
Finance/ Administration	**Section Chief**		Compile summary of final response and recovery cost and expenditures, and estimated lost revenues.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Mass Casualty Incident Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Lockdown Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Emergency Patient Registration Plan
- ☐ Risk Communication Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Hospital Incident Management Team Activation: Mass Casualty Incident

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director				X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader			X	X
Demobilization Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X

Incident Response Guide: Missing Person

Mission

To manage the process of locating and recovering a lost or abducted person, whether infant, child, or an adult from the hospital.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Ensure the safety of patients, staff, and visitors while initiating search procedures
- ☐ Coordinate with law enforcement in the response to and recovery of a missing person
- ☐ Provide behavioral health support to patients, staff, and families

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Confirm that a missing person incident has occurred.	
			Activate Emergency Operations Plan, the Missing Person Plan, Lockdown Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Notify law enforcement and provide details of the incident.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
	Public Information Officer		Establish a media staging area; coordinate its location with law enforcement.	
			Establish information release and messaging within the Joint Information Center.	
			As indicated, use social media to inform patients, staff, families, and stakeholders.	
			Develop information for release to the media with law enforcement. Ensure the family of the lost or abducted person is aware prior to the release of any information.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, public safety officials, and healthcare coalition coordinator), to determine incident details, community status, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital.	

			Coordinate with law enforcement to issue an "Amber Alert."	
	Safety Officer		Ensure the safety of patients, staff and visitors during hospital and campus search procedures.	
			Complete HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Monitor patient care activities.	
	Security Branch Director		Secure the hospital and campus: ☐ Deny entry or exit to all but known responders ☐ Direct all persons trying to leave the building or campus to a holding site ☐ Coordinate movement with law enforcement	
			Ensure activation of search procedure: ☐ Assign staff to conduct a floor-to-floor and room-by-room search ☐ Coordinate all search results and provide information to law enforcement on arrival ☐ Provide all staff involved in search with basic information about missing or abducted patient	
			Activate the Law Enforcement Interface Unit Leader to coordinate activities and information with responding law enforcement.	
			Conduct staff and family interviews to gather information and evidence in conjunction with law enforcement.	
			Provide interoperable communications to law enforcement if available; if not available, provide law enforcement with communications equipment to contact Security Branch Director or Law Enforcement Interface Unit Leader.	

Section	Officer	Time	Action	Initials
	Law Enforcement Interface Unit Leader		Provide law enforcement with patient information including: ☐ Height, weight, hair color, etc. ☐ Any available photos ☐ Distinguishing features ☐ Clothing worn, articles carried ☐ Medical equipment in use, etc.	
			Provide law enforcement with surveillance camera footage, hospital maps, blueprints, master keys, card access, search grids, and other data as requested.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with Command and General staff.	
	Situation Unit Leader		Gather critical information, policies activated, blueprints, search grids, and other critical data for inclusion in the Incident Action Plan.	
			Initiate the tracking of patients, staff, and visitors. Provide tracking data to law enforcement in coordination with the Security Branch Director or Law Enforcement Interface Unit Leader.	
Logistics	**Section Chief**		Activate the Support Branch to provide the logistics needs of hospital staff and law enforcement personnel.	
	Support Branch Director		Gather information on planned or expected deliveries or pickups for the day; provide this information to the Security Branch or Law Enforcement Interface Unit Leader.	
			Notify operators of planned deliveries or pickups of the need to postpone or reschedule.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Determine the need to cancel or postpone procedures, appointments, and visiting hours based on the projected length of the incident.	
			Activate Medical-Technical Specialists if needed (e.g., Risk Management, Legal).	
			Ensure patients, staff, visitors, and senior leadership are briefed on the incident and any alterations in services.	

Section	Branch/Unit	Time	Action	Initials
	Public Information Officer		Continue media briefings and updates; work within the Joint Information Center if available.	
			Update social media sites if in use for incident.	
	Liaison Officer		Continue to update key stakeholders and local officials of the incident and the status of response.	
	Safety Officer		Conduct an ongoing analysis of executed response actions for safety issues; implement corrective actions and update HICS 215A.	
			Ensure the safety of patients, staff, and visitors during the closure of entry and exit points; coordinate with law enforcement as needed.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		If the lost or abducted patient is an infant or child, consider moving the family away from the patient room to a secure location.	
			Plan for the safe and confidential reunification of the lost or missing patient with family members; ensure clinical staff is available for immediate patient assessment.	
	Security Branch Director		In consultation with law enforcement, determine the need to continue the search and the use of hospital staff at entry points. If staff are released, ensure briefing of personnel.	
			Work with law enforcement to ensure continued security of hospital and ongoing operations.	
	Patient Family Assistance Branch Director		Provide behavioral health services to the impacted families of patients.	
			In collaboration with Medical Care Branch, provide a safe location for the patient's family to ensure confidentiality while providing access to information and services; assign a staff member to remain with family members.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Continue to revise and update Incident Action Plan.	
			Plan for the next operational period and shift change, including staff patterns, location of labor pool if activated, hospital campus entry and exit in view of lockdown, impact on canceled procedures and appointments, etc.	
	Situation Unit Leader		Continue patient and bed tracking.	
	Resources Unit Leader		Initiate staff and equipment tracking.	
	Documentation Unit Leader		Ensure complete documentation of all postponed or canceled appointments and procedures.	
Logistics	**Section Chief**			
			If the campus lockdown continues, consider the impact on scheduled deliveries and pickups.	
Finance/ Administration	**Section Chief**		Track costs and expenditures of the response; include estimates of lost revenue.	
	Time Unit Leader		Begin to track hours associated with the emergency response.	

Extended Response (greater than 12 hours)				
Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Continue to monitor operations, consider the length of onsite operations, and determine the need for expanded postponement of procedures.	
			With the Public Information Officer, prepare to speak with patients, staff, visitors, and stakeholders.	
	Public Information Officer		Continue to hold regularly scheduled media briefings in conjunction with Joint Information Center.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Ensure continued updates of appropriate information to partner organizations, local authorities, and others as determined by Incident Commander.	

	Safety Officer		Update safety plan for extended operations based on modifications in entry and exit points, visiting hours, entry onto campus, etc., and ensure updated plan is incorporated into the Incident Action Plan.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Assess impact on clinical operations of restricted movement, delayed vendor deliveries and pickups.	
	Security Branch Director		Continue to assess impact on clinical operations of modifications to entry and exit points.	
			Modify security procedures as needed and in conjunction with law enforcement.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
Logistics	**Section Chief**		With Operations Section, assess impact on clinical operations of delayed vendor deliveries and pickups.	
			When approved by Incident Commander, reschedule all delayed deliveries and pickups.	
Finance/ Administration	**Section Chief**		Continue to record the ongoing and projected costs from modifications in normal operations.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Ensure notification to all impacted persons of the missing person incident resolution.	
			Approve the Demobilization Plan.	
			Oversee the hospital's return to normal operations.	
			With the Public Information Officer and Joint Information Center, prepare to speak with media.	
	Public Information Officer		Conduct media briefing to provide incident resolution; work with Joint Information Center.	

			Ensure that all stakeholders and response partners are notified of incident resolution.	
	Liaison Officer		Notify appropriate regulatory officials of the termination of the incident.	
	Safety Officer		Oversee the resolution of response actions that impacted operations; ensure entry and exit points are open and functioning. Ensure that fire doors and alarms are in working order.	
			Schedule and oversee a test of the hospital alarm systems.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Initiate activities to restore normal operations; work with the Planning Section to identify activities that were altered for restoration to normal.	
			Restore visiting hours if suspended; determine the need to expand normal hours and ensure behavioral health services are available as needed for patients and visitors.	
	Medical Care Branch Director		Ensure that impacted patient care areas that may have been out of service due to evidence collection are returned to service.	
	Security Branch Director		Restore normal security operations and demobilize non security personnel staffing, if activated.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Ensure that all impacted clinical and support operations are relayed to appropriate sections for resolution.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	

			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
Logistics	**Section Chief**		Oversee the resumption of scheduled deliveries and pickups. Communicate delays in deliveries with the Operations and Planning Section.	
			Provide a cost summary due to delays in deliveries, additional charges, rescheduled pickups, etc., with the Finance Section.	
			Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available.	
Finance/ Administration	**Section Chief**		Compile a final response and recovery costs and expenditure summary and submit it to the Incident Commander.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Missing Persons Response Plan/Child Abduction Response Plan/Infant Abduction Response Plan
- ☐ Search policy and procedures
- ☐ Behavioral Health Support Plan
- ☐ Lockdown Plan
- ☐ Security Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist

Job Action Sheets

Access to hospital organization chart

Security Closed Circuit Television (CCTV) System

Hospital and campus floor plans, maps, and blueprints

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Law Enforcement Interface Unit Leader	X	X	X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X

Incident Response Guide: Radiation Incident

Mission

To provide a safe environment for patients, staff, and visitors within the hospital following a radiation incident that may or may not impact the safety and structural integrity of the hospital or availability of services; and to provide the safe continuation of care for patients, visitors, and those seeking care post-incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Provide safe and effective decontamination of incoming contaminated patients
- ☐ Protect patients, staff, and the hospital from contamination and safely restore normal operations
- ☐ Communicate effectively with the local Emergency Operations Center and emergency response partners

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Receive notification of the incident. Notify the emergency department of incoming casualties that are possibly contaminated with radiation.	
			Activate the Emergency Operations Plan, Radiation Incident Plan, Decontamination Plan, Hospital Incident Management Team, and Hospital Command Center.	
			In conjunction with Medical-Technical Specialist: Radiological or Radiation Safety Officer, determine threat to the hospital any need for shelter-in-place or hospital evacuation.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Establish operational periods, incident objectives, and regular briefing schedule. Consider use of Incident Action Plan Quick Start form for initial documentation of the incident.	
			Consider limiting or closing nonessential services.	
			Consider activation of ambulance diversion status.	
	Public Information Officer		Develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital.	
			Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), including requesting supplies, equipment, or personnel not available in the facility.	

Section	Branch/Unit	Time	Action	Initials
			Contact appropriate authorities and experts to provide hospital status, and to request support and recommendations for radiological contamination.	
	Safety Officer		Monitor safe activation of the Radiation Incident Plan and the Decontamination Plan.	
			Evaluate for potential secondary hospital contamination and contain any detected contaminated areas within the hospital.	
			Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital and implement corrective actions to address; complete HICS 215A.	
			Monitor safe and consistent use of appropriate personal protective equipment by all staff.	
	Medical-Technical Specialist: Radiological		Assist in obtaining specific information regarding radiological agent such as antidotes, treatment, decontamination procedures, etc.	
			Provide expert input in the Incident Action Planning process.	
			Assist the Incident Commander in determining the radiological threat to the hospital and the need for shelter-in-place or hospital evacuation.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	Section Chief		Implement the Radiation Incident Plan.	
			Implement Shelter-in-Place or Evacuation Plan as directed by the Incident Commander.	
	Medical Care Branch Director		Conduct an inpatient and outpatient census and prioritize patients for safe discharge or cancellation of appointments and procedures.	
			Identify evacuation priorities and transfer requirements.	
			Determine patient capacity required to handle patient surge in shelter-in-place conditions.	

			Prepare for fatalities, including contaminated remains, in conjunction with medical examiner and coroner and local emergency management.	
	Infrastructure Branch Director		As directed, implement the hospital's Shelter-In-Place Plan, including heating, ventilation, and air conditioning shutdown, and sealing of the hospital.	
			Conduct a damage, structural integrity, and utilities assessment of the hospital.	
			Monitor hospital air quality for safe occupation.	
	Security Branch Director		Secure the hospital to prevent contaminated individuals from entering or leaving.	
			Establish and maintain a limited number of ingress and egress routes.	
			Establish and secure areas for collection of contaminated belongings and valuables.	
	HazMat Branch Director		Implement the hospital's Decontamination Plan: ☐ Establish triage and decontamination areas with a clear perimeter and directions on ingress and egress ☐ Provide rapid triage and disposition of potentially contaminated patients, non-contaminated patients, media, family members, etc. ☐ Access radiation monitoring equipment for use in decontamination operations ☐ Implement staff monitoring in and rotation through the decontamination area ☐ Consult with Medical-Technical Specialist: Radiological, Radiation Emergency Assistance Center/Training Site (REAC/TS) and Radiation Emergency Medical Management (REMM), and internal and external agencies or consultants to ascertain treatment protocols ☐ Relocate medications and antidotes to clinical care and decontamination areas ☐ Consider the need for evidence collection	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Initiate personnel and materials tracking.	

Section	Officer	Time	Action	Initials
	Situation Unit Leader		Initiate patient and bed tracking.	
Logistics	**Section Chief**		Activate the Support Branch to provide the logistics needs of hospital staff and operations.	
	Support Branch		Manage labor pool and solicited or unsolicited volunteers.	
			Initiate staff call-in systems, if instructed and if it is safe to do so.	
			Inventory equipment, supplies, and medications on hand and prepare to ration materials as needed.	
			Anticipate an increased need for medical and surgical supplies, medications, and equipment and take actions to obtain when possible.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Reevaluate need to shelter-in-place versus evacuate.	
			Coordinate communications and decision making with external agencies and area hospitals as appropriate.	
			Direct implementation of any and all additional response plans required to address the incident.	
			Consider deploying a hospital representative to the local Emergency Operations Center.	
	Public Information Officer		Conduct briefings to media, patients, staff, visitors, and persons seeking shelter to update them on incident and hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	
			Assist with notification of patients' families about the incident and the likelihood of evacuation, if required.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, local emergency medical services, regional medical resources, and area hospitals to relay status and critical needs, and to receive community	

			updates.	
	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect patients, staff, visitors, and the hospital.	
			Continue to monitor proper use of personal protective equipment and decontamination procedures.	
	Medical-Technical Specialist: Radiological		Support the Operations Section, as needed, by coordinating information regarding specific decontamination and treatment procedures; provide direct oversight to decontamination operations as directed.	
			Continue to provide expert input into the Incident Action Planning process.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Monitor continuation of medical mission activities.	
	Medical Care Branch Director		Continue patient, staff, and hospital monitoring for radiation exposure, and provide appropriate follow up as required.	
			Evaluate and update staff scheduling to accommodate decontamination team supplementation.	
			Activate the Fatalities Management Plan and management of contaminated remains.	
	HazMat Branch Director		Assess the need for continued decontamination and monitoring activities based on current and projected event status.	
	Patient Family Assistance Branch Director		Establish a patient information center in cooperation with the Liaison Officer.	
			With Public Information Officer, assist with the notification of patients' families about incident and the likelihood of evacuation, if required.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Revise and update Incident Action Plan, including planning for supplies, staffing, and other needs.	
	Resources Unit Leader		Continue personnel and materials tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Continue to assess surge capacity and need for personnel and supplies (e.g., equipment, blood products, medications, etc.) in cooperation with Operations Section. Obtain supplies as required and available or continue supply rationing.	
			Initiate employee monitoring for radiation exposure and provide appropriate follow up care.	
			Establish Employee Family Care Unit, if required.	
			Continue staff call-in (if safe to do so) and provide additional staff to impacted areas.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Initiate tracking of hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate procurement of needed supplies, equipment, and contractors.	
	Compensation/Claims Unit Leader		Assess and implement risk management and claims procedures for reported staff and patient exposures or injuries.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Reassess incident objectives and Incident Action Plan; revise as indicated by the response priorities and overall mission.	
			Continue regular briefing of Command Staff and Section Chiefs.	
			Reevaluate the hospital's ability to continue its medical mission.	

			Plan for return to normal services in coordination with Command Staff and Section Chiefs.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and persons seeking shelter.	
			Communicate regularly with the Joint Information Center to update hospital status and coordinate public information messages.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, regional medical resources, and area hospitals to relay status and critical needs, and to receive incident and community updates.	
	Safety Officer		Continue to oversee safety measures and use of personal protective equipment for patients, staff, and visitors.	
			Monitor radiation exposures and decontamination operations.	
			Update HICS 215A with revised use of personal protective equipment, access to hospital and decontamination areas.	
	Medical-Technical Specialist: Radiological		Continue to support the Operations Section as needed by coordinating information regarding specific decontamination and treatment procedures.	
			Continue to provide expert input into the Incident Action Planning process.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Monitor the continuation of medical mission activities, including patient care and hazardous materials (HazMat) activities.	
			Ensure that all documentation, including damage assessments, repair costs, and materials tracking are submitted to Planning Section.	
	Medical Care Branch Director		Continue patient monitoring for radiation exposure and provide appropriate follow up care as required.	
	Infrastructure Branch		Continue infrastructure monitoring and air monitoring in collaboration with Safety Officer.	

	Director		When safe and with Medical-Technical Specialist: Radiological, conduct an external inspection of the hospital for damage and determine need for decontamination of outside the hospital.	
			Complete a hospital damage report, progress of repairs, and estimated timelines for restoration of hospital to pre-incident condition.	
	Security Branch Director		Continue to ensure hospital security, traffic, and crowd control.	
			Monitor enforcement of hospital policies and cooperation with local, state, and federal law enforcement agencies when interviewing patients and collecting evidence.	
	Hazmat Branch Director		Provide for hospital and equipment decontamination where appropriate.	
Planning	**Section Chief**		Update and revise the Incident Action Plan in collaboration with the Command Staff and Section Chiefs.	
			Ensure that updated information and intelligence is incorporated into Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Situation Unit Leader		Update status boards and other communication devices with latest hospital and community status.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor and address the health status of staff that participated in, supported, or assisted in decontamination activities.	
			Restock and repair all supplies and equipment used in the response.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Procurement Unit Leader		Facilitate procurement of needed supplies, equipment, and contractors.	
	Compensation/Claims Unit Leader		Assess and implement risk management and claims procedures for reported staff and patient exposure injuries.	

			Continue to track response costs and expenditures and prepare regular reports for the Incident Commander.	
	Cost Unit Leader			

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine termination of event or "all clear" in collaboration with Command Staff, Section Chiefs, local law enforcement, and HazMat officials.	
			Oversee and direct demobilization and system recovery operations with restoration of normal services.	
			Ensure that processes are mobilized to complete the response documentation for submission for reimbursement.	
	Public Information Officer		Conduct final media briefing and assist with updating staff, patients, people seeking shelter, families, and others of termination of the incident.	
	Liaison Officer		Communicate the final hospital status and termination of the incident to regional medical health coordinator, local Emergency Operations Center, local emergency medical services, and area hospitals.	
	Safety Officer		Monitor proper disposal of contaminated waste and wastewater.	
			Assist with monitoring completion of hospital repairs and decontamination, in conjunction with Operations Section.	
			Monitor and maintain a safe environment during return to normal operations.	
			Monitor safety practices related to patient care and services returning to normal operations.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Medical Care Branch Director**		Coordinate patient care services returning to normal operations.	
	Infrastructure Branch Director		Restore heating, ventilation, and air conditioning systems to normal service.	
			Continue to monitor proper disposal of contaminated waste and wastewater.	
			Conduct or facilitate hospital repairs and return of hospital to normal operating conditions.	
	Security Branch Director		Return entry and egress restrictions, traffic flow, and security personnel to normal services.	
			Submit all section documentation to Planning Section for compilation in an After Action Report.	
	HazMat Branch Director		Ensure that all personnel, supplies, and equipment utilized in the response have been properly decontaminated and stored.	
			With Infrastructure Branch Director, monitor and manage decontamination of hospital.	
			Finalize and distribute Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, correlate, and archive all electronic and written documentation generated in the event response.	

			Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute to appropriate external agencies.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Initiate long term monitoring of employees exposed to radiation or that participated in decontamination or patient care activities, including provision of behavioral health services, as required.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheets for appropriate tasks.	
	Compensation / Claims Unit Leader		Contact insurance carriers to assist in documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Compile final summary of response and recovery costs, expenditures and estimated lost revenues; submit to Planning Section Chief for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Radiation Incident Plan
- ☐ Decontamination Plan
- ☐ Shelter-in-Place Plan
- ☐ Evacuation Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Employee Health Monitoring and Treatment Plan
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Hospital Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Emergency Patient Registration Plan
- ☐ Risk Communications Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Access to HazMat/Terrorism/CBRNE annexes of local Emergency Operations Plan

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Medical-Technical Specialist: Radiological	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
HazMat Branch Director	X	X	X	X
Patient Family Assistance Branch Director		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader				X
Logistics Section Chief	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader			X	X

Incident Response Guide: Severe Weather with Warning

Mission

To provide for the safety of patients, visitors, and staff during a severe weather emergency such as ice storms, snowstorms, rain, flooding, extreme heat and cold, etc.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

☐ Provide for the safety of patients, staff, families, and visitors
☐ Initiate hospital protective actions
☐ Provide patient care and management

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Activate Emergency Operations Plan, the Severe Weather Plan, the Hospital Incident Management Team, and Hospital Command Center. Activate the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan, as needed.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
			Determine timeline and criteria for discontinuation of nonessential services and procedures.	
	Public Information Officer		Inform patients, staff, and families of situation status and provide regular updates.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital.	
			Obtain the most current and projected weather information from local and national sources.	
			Communicate with other hospitals to determine situation status, and their ability to accept patients if transferred or if a hospital evacuation is ordered.	
	Safety Officer		Advise the Infrastructure Branch regarding hospital hardening and protective measures.	
			Recommend safe areas for immediate shelter-in-place to protect life.	

			Monitor for the safe shelter-in-place of patients, staff, and visitors.	
			Initiate HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	
			Evaluate safety issues related to current patient care services, hospital census, and operational considerations for next 24 hours.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Determine if personnel and resources are available to successfully complete the Incident Action Plan. If not, contact Logistics for additional personnel or resources.	
	Medical Care Branch Director		Assess patients for risk and prioritize care and resources, as appropriate.	
			At the storm's onset, evacuate any patients, staff and visitors from impacted areas to safety.	
			Identify evacuation priorities and transfer requirements.	
			Assess the impact of the storm on continued outpatient services; determine the need for cancellations or rescheduling.	
			Assess the impact of the storm on home care services and the need to cancel visits, the movement of patients to inpatient hospitals, and subsequent impact on health status.	
			Review evacuation policy and procedures and determine whether identified evacuation sites are feasible in consideration of storm, transportation routes, and resources for movement.	
	Infrastructure Branch Director		Implement emergency plans and procedures as needed (heating, ventilation and air conditioning, utilities, communications, etc.).	
			Oversee the immediate stabilization of the hospital infrastructure and initiate protective measures.	
			Maintain utilities and communications with service providers, activating alternate systems as needed.	

			Implement emergency support procedures to sustain critical services (i.e., power, water, medical gases and communications).	
	Security Branch Director		Secure the hospital and implement restricted access procedures.	
	Business Continuity Branch Director		Initiate Business Continuity Plans and procedures.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and develop the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Gather internal situation status including supply and equipment status, and current staff and visitor census.	
	Situation Unit Leader		Activate HICS 254 for patients and injured visitors that are relocated to another hospital during and after the storm.	
			Gather internal situation status including patient census and bed status.	
			Identify potential discharges, in coordination with Operations Section.	
			Assess the community impact of the storm to determine direct and indirect effects on staff, transportation, power, etc.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Implement emergency support procedures to sustain communications and information technology.	
			Obtain and distribute food and water to sustain operations.	
	Support Branch Director		Obtain and distribute supplies, equipment, medications to sustain operations.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Implement established pay codes for personnel to track hours associated with storm.	

Intermediate and Extended Response (2 to greater than 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Evaluate the hospital's capability to provide safe patient care and need for evacuation.	
	Public Information Officer		Conduct briefings to patients, staff, and persons seeking shelter as well as the media to provide updates on storm and hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain contact with the local Emergency Operations Center, other area hospitals, local emergency medical services, and regional medical health coordinator to relay status and critical needs and to receive storm and community updates.	
	Safety Officer		Continue to monitor weather reports and conditions.	
			Communicate potentially unsafe conditions to the Incident Commander for evaluation for continuation of care or closure.	
			Maintain the safety of patients, staff, families and individuals seeking shelter to the best possible extent.	
			Update the HICS 215Aas required.	

Intermediate and Extended Response (2 to greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Continue or implement evacuation or shelter-in-place, as needed.	
			Ensure that all documentation, including damage assessments, repair costs and tracking materials are submitted to the Planning Section.	

	Medical Care Branch Director		If partial (lateral or vertical) evacuation is required: ☐ Prepare and ensure transfer of patient records, medications, and valuables to transfer location ☐ Provide patient information as appropriate ☐ If evacuation is from secondary fire or explosion, evacuation must be to a fire compartment at least two compartments away (horizontally or vertically) from the fire or explosion ☐ Reassign personnel to ensure adequate staffing in area receiving patients If complete evacuation is required: ☐ Prioritize areas for evacuation based on Safety Officer's evaluation of the threat to life ☐ Prepare and ensure transfer of patient records, medications, and valuables to holding or assembly area ☐ Confirm transfer and timeline with receiving hospital, providing patient information as appropriate ☐ Establish safe holding or assembly area to place patients, patient belongings, and staff until transferred ☐ Reassign staff to accompany patients to alternate locations to ensure adequate staffing for patient care	
			Maintain patient care services, including those provided in evacuation sites.	
			Monitor patients and visitors for adverse effects on health and for psychological stress.	
	Infrastructure Branch Director		Conduct regular hospital and infrastructure evaluations and assessments and respond immediately to damage or problems.	
	Security Branch Director		Continue hospital security and maintain restricted access; determine the need for expansion.	
	Patient Family Assistance Branch Director		Assist with the notification of patients' families regarding the situation and inform them of the likelihood of evacuation, if required.	
			Determine the need to provide shelter and support for families and dependents of patients.	

Planning	**Section Chief**		Continue operational periods, incident objectives, and revise the Incident Action Plan in collaboration with the Incident Commander. Ensure that updated information and intelligence is incorporated into the Incident Action Plan.	
			Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue patient and bed tracking.	
	Situation Unit Leader		Continue to monitor situation status and update status boards.	
			Continue staff and equipment tracking.	
	Documentation Unit Leader		Collect and collate completed documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare for demobilization and system recovery.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Provide for continuing communication systems and information technology functionality.	
			Continue to obtain and distribute food and water to sustain operations. Route requests for additional resources not available in the hospital through the Liaison Officer to outside agencies.	
	Support Branch Director		Continue to obtain needed supplies, equipment, and medications. Route requests for additional resources not available in the hospital through the Liaison Officer to outside agencies.	
			Obtain supplemental staffing, as needed, and continue to provide staff for patient care and evacuation.	
			Monitor staff for adverse effects on health and for psychological stress; provide behavioral health support services for staff.	
			Consider providing family members and dependents a secure haven during the severe weather event.	
			Monitor, report, follow up on, and document staff or patient injuries.	

Section	Officer	Time	Action	Initials
			Provide transportation services for internal operations and patient evacuation.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Implement established pay codes for personnel to track hours associated with the storm.	
			Continue to track hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate procurement of supplies, etc., in cooperation with Logistics Support Branch.	
	Compensation / Claims Unit Leader		Begin to collect, when safe, documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Track and monitor all expenditures, response, storm damage, and repair costs.	
			Track estimates of lost revenue due to hospital storm damage and response.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine hospital status and declare termination of the incident.	
			Approve the Demobilization Plan.	
	Public Information Officer		Conduct a final media briefing and assist with updating patients, staff, families, and persons seeking shelter of termination of incident.	
	Liaison Officer		Communicate the final hospital status and termination of the incident to the regional medical health coordinator, the local Emergency Operations Center, area hospitals, local emergency medical services, and officials.	
			Assist with the repatriation of transferred patients.	
			Assist with updating key stakeholders and others of the termination of the incident.	

| | Safety Officer | | Monitor and maintain a safe environment during the return to normal operations. | |
| | | | Ensure applicable regulatory agencies are notified of alterations in life safety, safe workplace issues, or environment of care issues. | |

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		With Planning Section, reschedule canceled surgeries, procedures, elective admissions, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
			Provide behavioral health support and information about community services to patients and families, as needed.	
	Infrastructure Branch Director		Monitor that fire doors and alarms are in working order.	
			Conduct or continue damage assessment surveys.	
			Ensure completion of hospital repairs and coordinate with Planning and Finance/Administration Sections.	
			Complete the hospital damage report, progress of repairs, and estimated timelines for restoration of the hospital to pre-incident condition.	
	Security Branch Director		Monitor that entry and exit points are open and functioning.	
	Business Continuity Branch Director		If record keeping included use of paper based records, ensure all clinical information is entered into electronic medical records.	
	Patient Family Assistance Branch Director		Notify families of repatriated patients or patients permanently transferred to other hospitals.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	

			Conduct debriefings and hot wash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Ensure that issues impacting clinical and support operations are relayed to appropriate sections for resolution.	
			Implement the Demobilization Plan.	
Logistics	**Section Chief**		Release temporary staff and other personnel to normal positions.	
			Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Service Branch Director		Monitor and assist with restoration of communications and Information Technology Services.	
	Support Branch Director		Restock supplies, equipment, medications, food and water to pre-incident inventories.	
			Complete documentation and follow up of personnel injury or line-of-duty death as appropriate.	
Finance/ Administration	**Section Chief**		Review the summary of final response and recovery costs, expenditures and estimated lost revenues; submit to the Planning Section Chief for inclusion in the After Action Report.	

			Contact insurance carriers to initiate reimbursement and claims procedures.	
	Compensation / Claims Unit Leader		Coordinate with Risk Management for additional insurance and documentation needs, including images of damages.	
	Cost Unit Leader		Compile a final summary of response and recovery costs, expenditures, and estimated lost revenues; submit it to the Finance Section Chief.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Severe Weather Plan
- ☐ Evacuation, Shelter-in-Place, and Hospital Abandonment Plan
- ☐ Employee Health Monitoring and Treatment Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Hospital damage assessment procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Utility Failure Plan
- ☐ Emergency Patient Registration Plan
- ☐ Hospital and campus maps, blueprints and floor plans
- ☐ Discharge Policy
- ☐ Emergency Procurement Policy
- ☐ Volunteer Utilization Plan
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director	X	X	X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader	X	X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Staff Shortage

Mission

To maintain continuity of operations in the event of staff shortage due to strikes, patient surge, or infectious disease outbreaks.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Maintain security of the hospital, patients, staff, and visitors
- ☐ Maintain ongoing patient care
- ☐ Provide for supplemental staffing from outside resources
- ☐ Communicate the situation status to patients, staff, and the public

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Activate the Emergency Operations Plan, Staff Shortage Plan, Hospital Incident Management Team, and Hospital Commander Center.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Develop staff, patient, and community response messages to convey hospital preparations, services, and response.	
			Inform patients, staff, and families of situation status and provide regular updates.	
			Assist with notification of patients' families about the incident and inform them of the likelihood of transfer, if required.	
			Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders.	
			As indicated, establish a media briefing area.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, ambulance providers, and healthcare coalition coordinator), to determine incident details, community status, and establish contacts for requesting assistance with patient transfers, if indicated, or personnel not available in the hospital.	

			Communicate with other hospitals to determine their situation status, surge capacity, patient transfer, and bed availability.	
	Safety Officer		Ensure the safety of patients, staff, families, and visitors.	
			Complete the HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Review patient census and determine if discharges and appointment cancellations are required.	
			Assess patients for risk and to prioritize care and resources, as appropriate.	
			Identify priorities and transfer requirements.	
			Initiate ambulance diversion, if able.	
			Determine staff skill set required to continue patient care, and complete assessment of remaining staff to perform in alternate roles.	
	Security Branch Director		Secure the hospital and establish safe passage routes for patients, staff, visitors, and vendors.	
			Establish traffic and crowd control procedures.	
			Prepare for civil disturbances and protests.	
	Business Continuity Branch Director		Activate the Business Continuity Plan.	
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
			Initiate a plan for "just in time" new employee screening and orientation.	
			Coordinate with Logistics to arrange temporary housing for new staff as the situation warrants.	
	Situation Unit Leader		Prepare for patient tracking in the event of patient transfers.	

Logistics	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Direct all departments to adjust staffing schedules and to send to labor pool all staff above minimum necessary to maintain critical operations.	
			Obtain supplemental staffing.	
			Prepare an alternate mechanism to accept vendor deliveries if union workers refuse to cross picket lines.	
			Coordinate transportation services (ambulances, air medical services, and other transportation) to ensure safe staff and patient transit or relocation.	
Finance/ Administration	Section Chief		Implement time and cost accounting procedures, and prepare to estimate revenue losses.	
			Monitor costs associated with temporary staff utilization.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	Incident Commander		Obtain an assessment of staffing, equipment, and supply needs and the overall impact from the ongoing work stoppage on patient care, remaining staff, and the hospital.	
			Activate Medical-Technical Specialists if needed (e.g., Risk Management, Legal).	
			Monitor labor relations and progress of negotiations.	
	Public Information Officer		Continue media briefings and updates as warranted.	
			Continue with briefings and situation updates with staff, patients, and families; manage rumors.	
			Continue to update social media sites, if in use for the incident.	
	Liaison Officer		Continue communications with area hospitals and facilitate patient transfers.	

	Safety Officer		Conduct an ongoing analysis of exiting response actions for safety issues; implement corrective actions, and update the HICS Form 215A.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue the evaluation of patients and patient care; reevaluate the need to reduce or cancel nonessential services.	
			Reevaluate the need to continue ambulance diversion.	
			Reevaluate staffing needed to maintain essential services and to provide patient care.	
			Evaluate staff working in alternate roles and all supplemental staff.	
	Security Branch Director		Continue to provide hospital security and crowd control.	
Planning	**Section Chief**		Plan for the next operational period and hospital shift change, including: ☐ Staff patterns ☐ Location of labor pool ☐ Hospital and campus entry and exit in view of curtailed services, and potential demonstrators ☐ Impact of canceled procedures and appointments	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
	Documentation Unit Leader		Ensure complete documentation of all postponed and canceled appointments or procedures.	
Logistics	**Section Chief**		Ensure behavioral health support to staff remaining on the job and performing alternate roles.	
	Service Branch Director		Provide for continuing communications systems and information technology systems functionality.	

Section	Officer	Time	Action	Initials
Finance/ Administration	**Section Chief**		Activate additional positions within Finance/Administration Section based on the status of operations.	
	Time Unit Leader		Continue to track hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate contracting for resources and services.	
	Cost Unit Leader		Track all costs, expenditures, and lost revenue.	

Extended Response (greater than 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Continue to monitor operations, consider the length of onsite operations, and determine the need for expanded postponement of procedures.	
			With the Public Information Officer, prepare to speak with the patients, staff, visitors, media and stakeholders.	
	Public Information Officer		Continue to hold regularly scheduled media and staff briefings.	
			Update social media with approved information.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Ensure continued updates of appropriate information to community partners, local authorities, and others as determined by the Incident Commander.	
	Safety Officer		Continue to oversee safety measures for extended operations based on modifications in entry and exit points, visiting hours, entry onto campus, etc.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue evaluation of patients and patient care, and begin to plan for restoration of normal staffing and services.	

Section	Officer	Time	Action	Initials
	Infrastructure Branch Director		Assess the impact of limited staffing on the ability to maintain the hospital infrastructure and a safe environment.	
	Security Branch Director		Assess the impact of limited staffing on ability to maintain a secure environment.	
	Business Continuity Branch Director		Assess the impact of limited staffing on ability to continue business operations.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan.	
	Situation Unit Leader		Ensure appropriate documentation of ongoing activities, including alterations in schedules, utilization of outside resources and patient tracking.	
	Demobilization Unit Leader		Ensure the Demobilization Plan is being readied.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Prepare to release temporary staffing personnel.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Cost Unit Leader		Continue to record ongoing and projected costs from postponements and modifications in operations.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Declare cessation of staff shortage and termination of the incident.	
			Activate the Demobilization Plan.	
			Oversee the hospital's return to normal operations.	
			With the Public Information Officer, prepare formal messaging to the media.	
	Public Information Officer		Conduct a final media briefing and assist with updating patients, staff, families, and others of the termination of the incident.	
	Liaison Officer		Communicate final hospital status and termination of the incident to local emergency medical services and any established outside agency contacts.	

			Monitor and maintain a safe environment during the return to normal operations.	
	Safety Officer		Ensure entry and exit points are open and functioning; ensure fire doors and alarms are in working order.	

Demobilization/System Recovery				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Plan for the return of staff and the release of temporary staff, in collaboration with the Logistics Section and the Demobilization Unit.	
			Discontinue ambulance diversion if applicable.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Security Branch Director		Return security operations to pre-incident status.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Ensure that all impacted clinical and support operations are relayed to appropriate sections for resolution.	
			Conduct debriefing and address appreciation to supplemental staffing personnel.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	

	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	
			Prepare a summary of the status and location of all patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Release temporary staff and other personnel to normal positions.	
Finance/ Administration	**Section Chief**		Finalize all expense and time reports, and summarize the costs of the response and recovery operations to submit to the Planning Section for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Staff Shortage Plan
- ☐ Emergency Operations Plan
- ☐ Employee Health Monitoring and Treatment Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Security Plan
- ☐ Volunteer Utilization Plan
- ☐ Discharge Policy
- ☐ Memoranda of Understanding with appropriate agencies
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director			X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director	X	X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader		X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Service Branch Director		X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Tornado

Mission

To provide a safe environment for patients, staff, and visitors within the hospital before and after a tornado impacts the campus, structural integrity of the buildings and availability of normal operational services. To provide the continuation of care for patients, visitors and those seeking care post incident including the potential for full or partial evacuation.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

☐   Provide for the safety of patients, staff, and visitors
☐   Initiate hospital protection actions
☐   Provide for patient care and management

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Activate Emergency Operations Plan, the Tornado , the Hospital Incident Management Team, and Hospital Command Center. Activate the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan, as needed.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
			Determine timeline and criteria for discontinuation of nonessential services and procedures.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Inform patients, staff, families, and visitors of situation status and provide regular updates.	
			Update internet, intranet, and social media with hospital status and alteration in services.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate the information via regular briefings to Section Chiefs and the Incident Commander.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital.	
			Obtain the most current and projected weather information from local sources.	
			Communicate with other hospitals to determine situation status, ability to accept patients if transfer, hospital abandonment, or evacuation is ordered.	
	Safety Officer		Advise the Infrastructure Branch regarding hospital hardening and protective measures.	

Section	Branch/Unit	Time	Action	Initials
			Recommend safe areas for immediate shelter-in-place to protect life.	
			Monitor the safe shelter-in-place of patients, staff, and visitors.	

Immediate Response (0 – 2 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Discontinue nonessential services.	
			Determine if personnel and resources are available to successfully complete the Incident Action Plan. If not, contact Logistics to request additional personnel or resources.	
	Medical Care Branch Director		Move patients, staff, and visitors away from windows, skylights, and exterior walls.	
			Assess patients for risk and to prioritize care and resources as appropriate.	
			Identify evacuation priorities and transfer requirements.	
			During warning, relocate ambulatory patients, staff, and visitors to the hospital's tornado shelter area. When patients cannot be moved, consider protective measures and staff to stay with patients.	
			After storm impact, evacuate any patients, staff, and visitors from impacted areas to safety.	
	Infrastructure Branch Director		Implement emergency plans and procedures as needed (heating, ventilation, and air conditioning, utilities, communications, etc.).	
			Oversee the immediate stabilization of the hospital and initiate hospital protective measures.	
			Implement emergency support procedures to sustain critical services (e.g., power, water, medical gases, and communications).	
			Maintain utilities and communications with service providers, activating alternate systems as needed.	
	Security Branch Director		Initiate hospital access restrictions.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Gather internal situation status including supply and equipment status, and current staff and visitor census.	
	Situation Unit Leader		Assess community impact of storm to determine direct or indirect effects on staff, transportation, power, etc.	
			Activate HICS 254 tracking for patients and injured visitors that are relocated to another hospital during and after the storm.	
			Confirm patient census and bed status. Identify potential discharges in conjunction with the Operations Section.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Implement emergency support procedures to sustain communications and information technology.	
	Support Branch Director		Distribute appropriate equipment throughout the hospital (portable lights, flashlights, blankets, etc.).	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Evaluate the hospital's capability to provide safe patient care and the need for evacuation.	
	Public Information Officer		Conduct briefings to patients, staff, persons seeking shelter, as well as the media to provide updates on storm and hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	
	Liaison Officer		Maintain contact with the local Emergency Operations Center, other area hospitals, and regional medical health coordinator to relay status and critical needs and to receive storm and community updates.	

			Assist with and facilitate the procurement of supplies and equipment from outside agencies.	
	Safety Officer		Continue to monitor weather reports and conditions.	
			Communicate potentially unsafe conditions to the Incident Commander for evaluation for continuation of care or closure.	
			Maintain safety of patients, staff, people seeking shelter, and families to the best possible extent.	
			Initiate the HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Intermediate Response (2 – 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Coordinate or implement the transfer of evacuated patients and establish alternate care sites as required.	
	Medical Care Branch Director		In coordination with the Logistics Section, provide transportation services for internal operations and patient evacuation.	
	Infrastructure Branch Director		Conduct regular hospital and infrastructure evaluations and assessments, and respond immediately to damage or problems.	
	Security Branch Director		Continue hospital security, traffic, and crowd control.	
	Business Continuity Branch Director		Implement Business Continuity Plans and procedures.	
	Patient Family Assistance Branch Director		Assist with notification of patients' families regarding the situation and inform them of the likelihood of evacuation, if required.	
			Provide assistance to persons seeking shelter, as needed.	
Planning	**Section Chief**		Continue operational periods and incident objectives, and revise the Incident Action Plan in collaboration with the Incident Commander.	

	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Conduct a hospital census and identify potential discharges, in coordination with the Operations Section.	
			Plan for the next operational period and shift change, including staff patterns, location of labor pool, hospital campus entry and exit in view of curtailed services, and the impact on canceled procedures and appointments, etc.	
			Continue patient and bed tracking.	
	Documentation Unit Leader		Monitor complete documentation of activities, decisions, and actions.	
	Demobilization Unit Leader		Prepare the Demobilization Plan.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Provide for continuing communications systems and information technology systems functionality.	
			Plan for food and water for patients, staff, visitors, and persons seeking shelter.	
	Support Branch Director		Conduct equipment, supply, medication, and personnel inventories and obtain additional supplies to sustain hospital for a minimum of 96 hours after the storm. Route requests for additional resources not available in the hospital through the Liaison Officer to outside agencies.	
			Coordinate the transportation services (ambulance, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Designate staff rest and sleeping areas for patients, staff, visitors, and persons seeking shelter.	
			Continue to provide staff for patient care and evacuation, and obtain supplemental staffing as needed.	
			Monitor staff for adverse effects on health and for psychological stress; provide behavioral health support services for staff.	

Section	Officer	Time	Action	Initials
			Monitor, report, follow up on, and document staff or patient injuries.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Implement established pay codes for personnel to track hours associated with the incident, and track all hours.	
	Procurement Unit Leader		Facilitate procurement of supplies, etc., in cooperation with Logistics Support Branch.	
	Compensation/ Claims Unit Leader		Begin to collect, when safe, documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Track and monitor all expenditures, response purchases, storm damage, and repair costs.	
			Track estimates of lost revenue due to hospital storm damage and response.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue regular briefings and Incident Action Planning meetings, and modify incident objectives as needed to meet the current situation.	
			Determine when to resume normal activities and services.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and persons seeking shelter.	
			Communicate regularly with Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as the situation dictates.	
	Liaison Officer		Maintain contact with the local Emergency Operations Center, other area hospitals, local emergency medical services, and regional medical health coordinator to relay status and critical needs and to receive storm and community updates.	

			Maintain safety of patients, staff, families, and persons seeking shelter, to best possible extent.	
Safety Officer				
			Update the HICS 215A, as required.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Recommend when to resume normal activities and services.	
	Medical Care Branch Director		Provide behavioral health support to patients, families, and persons seeking shelter, as needed.	
	Infrastructure Branch Director		Complete a hospital damage report, progress of repairs, and estimated timelines for restoration of the hospital to pre-incident condition.	
	Security Branch Director		Maintain hospital security and limited access.	
	Business Continuity Branch Director		Continue business continuity measures, as required.	
	Patient Family Assistance Branch Director		Once weather threat is over and it is safe to do so, begin repatriation of persons seeking shelter and evaluate need to continue child and dependent care.	
Planning	**Section Chief**		Continue regular briefings and action planning meetings, and modify incident objectives as needed to meet current situation.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Update and revise the Incident Action Plan.	
			Prepare plans to provide housing and other assistance for those staff displaced by the storm.	
			Continue patient and bed tracking.	
	Documentation Unit Leader		Collect documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare to implement the demobilization plan.	

Section	Officer		Action	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Maintain internal and external communication systems and redundant communication systems.	
			Provide food, water, and rest periods for staff.	
	Support Branch Director		Continue to monitor and ration, if necessary, onsite inventories of supplies, equipment, medications, food, and water.	
			Provide behavioral health support to staff, as needed.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Continue to track hours associated with the response.	
	Procurement Unit Leader		Facilitate the procurement of supplies in cooperation with the Logistics Support Branch.	
	Compensation/ Claims Unit Leader		Contact insurance carriers to assist in documentation of structural and infrastructure damage, and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Continue to track and monitor response and hospital repair costs and expenditures.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine hospital status and declare termination of the incident.	
			Approve the Demobilization Plan.	
	Public Information Officer		Conduct a final media briefing and assist with updating patients, staff, families, and persons seeking shelter of termination of incident.	
	Liaison Officer		Communicate final hospital status and termination of the incident to regional medical health coordinator, local Emergency Operations Center, area hospitals, corporate offices, and officials.	
	Safety Officer		Monitor and maintain a safe environment during the return to normal operations.	

			Ensure applicable regulatory agencies are notified of alterations in life safety, safe workplace issues, or environment of care issues.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Discontinue ambulance diversion, if applicable.	
			Ensure that all documentation, including damage assessments, repair costs, and tracking materials, are submitted to the Planning Section.	
	Medical Care Branch Director		Restore patient care and management activities, including normal staffing plans.	
			With the Planning Section, reschedule canceled surgeries, procedures, elective admissions, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Oversee the resolution of response actions that impacted normal operations. Monitor that fire doors and alarms are in working order.	
			Conduct or continue damage assessment surveys.	
			Ensure completion of hospital repairs: coordinate with Planning and Finance/Administration Sections.	
			Complete a hospital damage report, progress of repairs, and estimated timelines for restoration of hospital to pre-incident condition.	
	Security Branch Director		Monitor that entry and exit points are open and functioning.	
	Patient Family Assistance Branch Director		Notify families of repatriated patients or patients permanently transferred to other hospitals.	
Planning	Section Chief		Finalize and distribute the Demobilization Plan.	

			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	
			Prepare a summary of the status and location of all patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
	Demobilization Unit Leader		Ensure that issues impacting clinical and support operations are relayed to appropriate sections for resolution.	
			Implement the Demobilization Plan.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Service Branch Director		Monitor and assist with restoration of communications and Information Technology Services.	
	Support Branch Director		Restock supplies, equipment, medications, food, and water to pre-incident inventories.	
			Provide staff debriefing and behavioral health support.	
			Complete documentation and follow up of personnel injury as appropriate.	
Finance/ Administration	**Section Chief**		Compile a final response and recovery cost and expenditure and estimated lost revenues summary, and submit to Planning Section Chief for inclusion in After Action Report.	

			Contact insurance carriers to initiate reimbursement and claims procedures.	
	Compensation/ Claims Unit Leader		Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damages.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Tornado Plan
- ☐ Evacuation, Shelter-in-Place, and Hospital Abandonment Plan
- ☐ Employee Health monitoring and treatment Plan
- ☐ Surge Plan
- ☐ Triage Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Hospital Damage Assessment procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Security Plan
- ☐ Fatality Management Plan
- ☐ Volunteer Utilization Plan
- ☐ Utility Failure Plan
- ☐ Discharge policy
- ☐ Emergency Procurement policy
- ☐ Emergency Patient Registration Plan
- ☐ Hospital and campus maps, blueprints and floor plans
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Check-Out
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director		X	X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader		X	X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X

Incident Response Guide: Utility Failure

Mission

To safely manage patient care through effective and efficient hospital operations during the loss of a major utility within the hospital.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.
Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- ☐ Identify extent of outage and consider evacuation
- ☐ Maintain patient care capabilities
- ☐ Minimize impact on hospital operations and clinical services
- ☐ Communicate the situation status to patients, staff, and the public

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Activate the hospital Emergency Operations Plan, Utility Failure Plan, the Hospital Command Center and appropriate Hospital Incident Management Team positions.	
			Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident.	
			Determine the need for shelter-in-place or evacuation and activate appropriate incident response plans.	
			Consider limiting nonessential services.	
			Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Activate the Risk Communication Plan and media staging area.	
			Prepare a media release to inform the community about the utility outage.	
			Maintain communication with patients, staff, and families regarding the current situation and what is being done to address it.	
			Conduct a hospital census and identify possible discharges, transfers and surgery or procedure cancellations.	
			Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and the Incident Commander.	

	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital.	
			Communicate with other hospitals to determine situation status, ability to accept patients if transfer, hospital abandonment, or evacuation is ordered.	
	Safety Officer		Complete the HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)				
Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Implement the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan as needed and in cooperation with the Incident Commander.	
	Medical Care Branch Director		Request diversion if needed.	
			Identify evacuation priorities and transfer requirements.	
			Implement downtime documentation procedures for patient care and incident management documentation as required.	
			Conduct a hospital census and determine discharges, transfers, and surgery or procedure cancellations.	
			Assess patients for risk and prioritize care and resources, as appropriate.	
	Infrastructure Branch Director		Implement emergency support procedures to sustain critical services (i.e., power, water, medical gasses, communications) until utility restoration can be accomplished.	
			Activate damage assessment teams to determine the impact and severity of utility outage.	
	Security Branch Director		Initiate emergency procedures to support hospital and campus security in response to a utility outage.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader		Prepare for personnel and equipment tracking.	
	Situation Unit Leader		Monitor and document all actions and activities.	
			Prepare for patient tracking including patient transfers.	
Logistics	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Assess the impact of the utility outage on communications and information technology systems.	
			Initiate backup documentation systems if electronic systems are not functioning.	
	Support Branch Director		Respond to requests for supplies and equipment; distribute appropriate equipment throughout the hospital (e.g., portable lights, flashlights, blankets).	
Finance/ Administration	**Section Chief**		Activate vendor Memoranda of Understanding.	
			Track all costs and expenditures of response, and estimate lost revenues due to canceled procedures, surgeries, and other services.	

Intermediate Response (2 – 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Obtain assessment of staffing, equipment, and supply needs and the overall impact from the ongoing utility outage on patient care, remaining staff, and the hospital.	
			Activate Medical-Technical Specialists if needed (e.g., Risk Management, Legal).	
	Public Information Officer		Continue media briefings and updates.	
			Continue briefings and situation updates with patients, staff, and families.	

			Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders.	
	Liaison Officer		Continue to update local emergency management and the Emergency Operations Center of situation status and critical issues, and to request assistance as needed.	
			Continue communications with area hospitals and facilitate patient transfers.	
	Safety Officer		Conduct ongoing analysis of exiting response actions for safety issues, implement corrective actions, and update the HICS 215A.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Continue the evaluation of patients and patient care; reevaluate the need to curtail or cancel nonessential services.	
			Reevaluate staffing needed to maintain essential services and to provide patient care.	
			Evaluate staff working in alternate roles and all supplemental staff.	
			Reevaluate the need to continue ambulance diversion.	
	Infrastructure Branch Director		Continue to assess extent of damage or outage; if possible, provide the Incident Commander and Section Chiefs with projected length of the service interruption.	
			Initiate repairs as required.	
	Security Branch Director		Continue to provide hospital security; develop plans to alter security services if phone or power is interrupted.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Prepare the Incident Action Plan for the next operational period; engage all sections to provide updates on staffing and alterations in strategies and tactics.	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
	Documentation Unit Leader		Ensure complete documentation of all postponed and canceled appointments and procedures.	
<mark>**Logistics**</mark>	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Continue to provide staff for essential operations.	
			Monitor, report, follow up on, and document patient or staff injuries.	
Finance/ Administration	**Section Chief**		Refer to the Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Track hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate contracting for resources and services.	
	Cost Unit Leader		Track costs, staff hours, expenditures, and lost revenue.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue to monitor operations, consider the length of onsite operations, and determine the need for expanded postponement of procedures.	
			With the Public Information Officer, prepare to speak with patients, staff, visitors, media, and stakeholders.	
			Update the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information		Continue to hold regularly scheduled media briefings in conjunction with the Joint Information Center.	

| | Officer | | Address social media issues as warranted; use social media for messaging as situation dictates. | |
| | **Safety Officer** | | Update the HICS Form 215A for extended operations. Ensure an updated safety plan is incorporated into the Incident Action Plan. | |

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Continue the evaluation of patients and the ability to provide patient care, and begin to plan for the restoration of utilities.	
			Ensure that all documentation, including damage assessments, repair costs, and tracking materials, are submitted to the Planning Section.	
	Medical Care Branch Director		Continue the evaluation of patients and patient care, and begin to plan for restoration of normal staffing and services.	
	Infrastructure Branch Director		Continue to provide regular updates to Section Chiefs on repairs, restoration of services, or continued service interruptions.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue equipment and personnel tracking, including resources transferred to other hospitals.	
	Situation Unit Leader		Continue patient and bed tracking, including resources transferred to other hospitals.	
	Documentation Unit Leader		Ensure appropriate documentation of ongoing activities.	
			Collect and collate documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare for demobilization and system recovery.	
Finance/ Administration	**Section Chief**		Continue to record ongoing and projected costs from postponements and modifications in operations.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine hospital status and declare termination of the incident.	
			Approve the Demobilization Plan.	
			Oversee the hospital's return to normal operations.	
			Assess if criteria for partial or complete reopening of hospital are met, and order reopening and repatriation of patients.	
			With the Public Information Officer prepare to speak with the media.	
	Public Information Officer		Conduct a final media briefing to provide incident resolution; work with the Joint Information Center.	
	Liaison Officer		Maintain contact with the local Emergency Operations Center, other area hospitals, local emergency medical services, and regional medical health coordinator to relay status and critical needs to receive incident and community updates.	
			Continue monitoring of the utility failure impact to hospital and home care services; coordinate information with the Operations Section.	
	Safety Officer		Ensure entry and exit points are open and functioning.	
			Ensure fire doors and alarms are in working order.	
			Monitor and maintain a safe environment during the return to normal operations.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Oversee the restoration of normal patient care operations.	
	Medical Care Branch Director		Discontinue ambulance diversion, if applicable.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	

			Repatriate evacuated or transferred patients.	
	Infrastructure Branch Director		Complete a hospital damage report, including the progress of repairs, and estimated timelines for restoration to pre-incident condition.	
			Schedule and oversee a test of the hospital alarm systems.	
	Security Branch Director		Maintain hospital security and traffic control.	
	Business Continuity Branch Director		Oversee the restoration of essential services including internet connectivity and communications. Oversee the entry of information and data into electronic records if necessary.	
			If record keeping included the use of paper based records, ensure all clinical information is entered into electronic medical records.	
	Patient Family Assistance Branch Director		Provide behavioral health support and information about community services for patients and families, if needed.	
Planning	**Section Chief**		Finalize and distribute the Demobilization Plan.	
			Ensure that the status of all impacted clinical and support operations are relayed to appropriate sections for resolution.	
			Conduct debriefings and a hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions	
	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	

			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Release temporary staff and other personnel to normal positions.	
			Complete documentation and follow up of personnel injuries if needed.	
Finance/ Administration	**Section Chief**		Compile a final summary of all response and recovery costs and expenditures, and estimated lost revenues. Submit to the Planning Section Chief for inclusion in the After Action Report.	
	Compensation/Claims Unit Leader		Contact insurance carriers to initiate reimbursement and claims procedures.	
			Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damage, etc.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Utility Failure Plan
- ☐ Emergency Operations Plan
- ☐ Evacuation, Shelter-in-Place and Hospital Abandonment Plan
- ☐ Alternate Care Site plan
- ☐ Business Continuity Plan
- ☐ Memoranda of Understanding with appropriate entities
- ☐ Discharge Policy
- ☐ Paper charts and electronic medical record downtime procedures
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Hospital and campus maps, blueprints and floor plans
- ☐ Risk Communication Plan
- ☐ Interoperable Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 –Facility System Status Report
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Job Action Sheets

Access to paper forms for documentation, data entry, etc.

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director				X
Patient Family Assistance Branch Dir.				X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief	X	X	X	X
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader				X
Cost Unit Leader		X	X	X

Incident Response Guide: Wildland Fire

Mission

To ensure a safe environment for staff, patients, visitors, and the hospital when a wildland fire may or may not impact the safety and structural integrity of the hospital or availability of services; and to provide the safe continuation of care for patients, visitors, and those seeking care when a wildland fire is in the area.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as an aid in reviewing hospital plans for wildland fire response.

Objectives

☐ Ensure the continued safety of patients, staff, and visitors

☐ Ensure the continuation of patient care services during and after a wildland fire event including patient and staff evacuation if required

☐ Protect the physical environment when a wildland fire threatens your hospital and the region

Immediate Response (0 – 2 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Receive and assess the situational status from external authorities.	
			Activate the hospital Emergency Operations Plan, including Wildland Fire Plan, Shelter-in-Place, and Evacuation Plan.	
			Activate the Hospital Command Center and applicable Hospital Incident Management Team positions.	
			Establish operational periods, objectives and a regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Determine timeline and criteria for discontinuation of nonessential services and procedures.	
			Determine the need to alter current operations to ensure the safety of patients, staff, and visitors, as well as the physical environment.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Monitor media outlets for updates on the incident and possible impacts on the hospital.	
			Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
			Update internet, intranet, and social media with hospital status and alteration in services.	

	Liaison Officer		Establish contact with local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, and area hospitals to determine incident details, community status, estimates of casualties, request needed supplies, equipment, and personnel.	
	Safety Officer		Recommend safe areas for immediate shelter-in-place to protect life.	
			Assess the physical environment for potential health hazards such as smoke, ash, and debris.	
			Initiate HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Evaluate current patient care services, hospital census, and operational considerations for next 24 hours.	
	Medical Care Branch Director		Determine possible health hazards of wildland fire.	
			Implement ambulance diversion if warranted.	
			Assess impact of wildland fire on continued outpatient services; determine need for cancellations or rescheduling.	
			Assess impact of wildland fire on home healthcare services, need to cancel visits, movement of patients to inpatient facilities, and impact on health status.	
	Infrastructure Branch Director		Monitor physical status of hospital and all buildings on campus.	
			Monitor internal air quality and impact of external fire on heating, ventilation, and air conditioning systems.	
			Maintain utilities and communications with service providers, activating alternate systems as needed.	

Section	Officer	Time	Action	Initials
Planning	**Section Chief**		Monitor and document situational status.	
			Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
			Review evacuation policy and procedure, and determine whether identified evacuation sites are feasible in consideration of wildland fire, transportation routes, and resources for movement.	
	Resources Unit Leader		Gather internal situation status including supply and equipment status, current staff and visitor census.	
	Situation Unit Leader		Gather internal situation status including patient census and bed status.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Identify the transportation needs for evacuation, and secure the needed support.	
			Evaluate current supply status; determine and document status in event planned deliveries are interrupted due to wildland fire.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Continue to monitor progress of wildland fire and potential threat to hospital and the region.	
			Continue to monitor status of fire and hospital and of outpatient and home healthcare services; authorize alterations in service delivery based on safety of patients and staff.	
			Reevaluate need to activate the Evacuation Plan if warranted.	
			Maintain contact with external authorities for up to date status of fire and progress in suppression.	
	Public Information Officer		Continue to monitor media sources for up to date information on the wildfire.	

			Establish contact with Joint Information Center for coordination of messaging to public.	
			Notify media and staff of evacuation when initiated.	
	Liaison Officer		Contact local healthcare partners and hospitals regarding status and plans to alter service or evacuate.	
	Safety Officer		Monitor status of the hospital for health and safety hazards; update safety actions as needed.	
			Assess evacuation staging sites, identify needed alterations and update HICS 215A.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Notify all clinical and support staff of evacuation order, if given, whether partial or complete.	
			Identify locations, personnel, and equipment to support evacuation of patients, staff, and visitors. Activate additional units if needed (personnel, vehicles, equipment).	
	Staging Manager		Assess staging areas for appropriate locations; confirm with Safety Officer.	
			Provide staff and equipment support to evacuation when requested.	
	Medical Care Branch Director		If evacuation is required: ☐ Prioritize areas for evacuation based on Safety Officer's evaluation of threat to life For partial (lateral or vertical) evacuation: ☐ Prepare and assure transfer of patient records, medications, and valuables to transfer location ☐ Provide patient information as appropriate ☐ If evacuation is from fire or explosion, evacuation must be to a fire compartment at least two fire compartments away (horizontally	

			or vertically) from the fire or explosion ☐ Reassign personnel to assure adequate staffing in area receiving patients For complete evacuation: ☐ Prepare and assure transfer of patient records, medications, and valuables to holding or assembly area ☐ Confirm transfer and timeline with accepting hospital, providing patient information as appropriate ☐ Establish safe holding or assembly area to place patients, patient belongings, and staff until transferred ☐ Reassign staff to accompany patients to alternate facilities to assure adequate staffing for patient care	
			Discharge patients when safe and appropriate.	
			Move patients and staff to appropriate locations.	
			Implement manual documentation procedures for patient care and incident management documentation as required.	
	Security Branch Director		Secure the hospital, restrict visitors, and limit entry of nonessential personnel.	
			Provide additional personnel to ensure security of staging areas and evacuation sites.	
	Patient Family Assistance Branch Director		Assist with notification of patients' families about the situation and information regarding likelihood of evacuation, if required.	
			Determine the need to provide shelter support for families of patients.	
Planning	**Section Chief**		Activate patient and materiel tracking units if the Evacuation Plan is activated.	
			Update and revise the Incident Action Plan.	

	Resources Unit Leader		Track staff and equipment.	
	Situation Unit Leader		Track patients and beds.	
	Documentation Unit Leader		Monitor complete documentation of activities, decisions, and actions.	
Logistics	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Service Branch Director		Ensure ongoing communications are available at staging areas and evacuation sites.	
			Provide for continuing communications systems and information technology and information systems functionality.	
	Support Branch Director		Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Monitor, report, follow up on, and document staff or patient injuries.	
Finance/ Administration	**Section Chief**		Activate policy and procedure for documentation of costs associated with event and evacuation, if required.	
	Time Unit Leader		Track hours associated with the emergency response.	
	Cost Unit Leader		Track and monitor response and hospital repair costs and expenditures.	

Extended Response (greater than 12 hours)				
Section	**Officer**	**Time**	**Action**	**Initials**
Command	**Incident Commander**		Continue regular briefings and action planning meetings, and modify incident objectives as needed to meet current situation.	

			Update hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			If no evacuation occurred, determine when to resume normal activities and services, and prepare for demobilization and system recovery.	
			If evacuation of patients occurred, determine safe situation for repatriation.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, and families.	
			Communicate regularly with Joint Information Center to update hospital status and coordinate public information messages.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, and area hospitals in accordance with local policies and procedures to relay status and critical needs, and to receive incident and community updates.	
	Safety Officer		Maintain safety of patients, staff, and families to best possible extent.	
			Communicate potentially unsafe conditions to the Incident Commander for evaluation for continuation of care or closure.	
			Conduct frequent hospital reassessment, and monitor hospital repairs.	

Extended Response (greater than 12 hours)				
Section	**Branch/Unit**	**Time**	**Action**	**Initials**
Operations	**Section Chief**		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Maintain patient care services, including those provided in evacuation sites.	
			Monitor patients and visitors for adverse effects on health and for psychological stress.	

	Patient Family Assistance Branch Director		Continue to provide family notifications of evacuations, transfers, and early discharges.	
	Security Branch Director		Continue hospital security and restricted visitation.	
			Secure all evacuated areas, equipment, supplies, and medications.	
	Infrastructure Branch Director		Regularly perform hospital damage assessments.	
			Continue monitoring of air quality; heating, ventilation, and air conditioning systems; and other filtration systems for potential impact due to smoke and ash.	
	Business Continuity Branch Director		If record keeping included use of paper based records, ensure all clinical information is entered into electronic medical records.	
Planning	**Section Chief**		Ensure that updated information and intelligence is incorporated into Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue equipment and personnel tracking, including resources transferred to other hospitals or alternate care sites.	
	Situation Unit Leader		Update and maintain all situation and status boards.	
			Continue patient and bed tracking, including those transferred to other hospitals.	
	Documentation Unit Leader		Collect and collate documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare for demobilization and system recovery.	
Logistics	**Service Branch Director**		Monitor status of information technology and information systems, communications, and impact of fire on functionality.	
			Provide food, water, and rest periods for staff.	
	Support Branch Director		Monitor the health status of staff; provide appropriate medical and behavioral health follow up.	

			Support evacuation and transfer of supplies, equipment, medications, food, and water.	
Finance/ Administration	**Section Chief**		Coordinate with risk management for additional insurance and documentation needs, including photographs of damages, etc.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	**Incident Commander**		Determine hospital status and declare termination of the incident.	
			Oversee restoration of normal hospital operations.	
			Assess if criteria for partial or complete reopening of hospital is met, and order reopening and repatriation of patients.	
			Approve the Demobilization Plan.	
	Public Information Officer		Notify families of repatriated patients or patients permanently transferred to other hospitals.	
			Conduct final media briefing and assist with updating staff, patients, families, persons seeking shelter, and others of termination of incident.	
	Liaison Officer		Communicate hospital status and termination of the incident to local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, area hospitals, corporate offices, and officials.	
			Continue monitoring of fire status and geographic impact to hospital and home healthcare services; coordinate information with Operations Section.	
	Safety Officer		Monitor and maintain a safe environment during return to normal operations.	
			Ensure applicable regulatory agencies are notified of alterations in life safety, safe workplace issues, or environment of care issues.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	**Section Chief**		Repatriate evacuated patients, if applicable.	
	Medical Care Branch Director		Discontinue ambulance diversion, if applicable.	
			With Planning Section, reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
			Determine ability to resume home healthcare services, if applicable, based on geographic assessment of fire status, ability to access homes, and safety of patients, staff.	
	Security Branch Director		Maintain hospital security and traffic control.	
	Business Continuity Branch Director		Use downtime procedures as situation warrants.	
Planning	**Section Chief**		Finalize and distribute Demobilization Plan.	
			Conduct debriefings and hotwash with: ☐ Command Staff and section personnel ☐ Administrative personnel ☐ All staff ☐ All volunteers	
			Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: ☐ Summary of the incident ☐ Summary of actions taken ☐ Actions that went well ☐ Actions that could be improved ☐ Recommendations for future response actions.	
	Situation Unit Leader		Deactivate the patient and bed tracking units and provide a final report to Demobilization Unit.	

	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	
			Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute as appropriate.	
	Demobilization Unit Leader		Ensure the documentation of all data, actions, and situational status is addressed and incorporated into the Demobilization Plan.	
Logistics	**Section Chief**		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Restock supplies, equipment, medications, food, and water to pre-incident inventories.	
Finance/ Administration	**Section Chief**		Compile summary of final response and recovery costs and expenditures, including estimated lost revenue; and submit to Planning Section Chief for inclusion in the After Action Report.	
			Contact insurance carriers to initiate reimbursement and claims procedures.	
	Cost Unit Leader		Compile summary of final response and recovery costs and expenditures including estimated lost revenues; submit to Finance/Administration Section Chief.	
	Time Unit Leader		Ensure receipt of all personnel time sheets and documentation needed for recovery of costs and lost revenue.	

Documents and Tools

Emergency Operations Plan, including:
- ☐ Wildland Fire Plan
- ☐ Evacuation Plan
- ☐ Shelter-in-Place Plan
- ☐ Patient, staff, and equipment tracking procedures
- ☐ Business Continuity Plan
- ☐ Behavioral Health Support Plan
- ☐ Alternate Care Site Plan
- ☐ Hospital Security Plan
- ☐ Discharge Policy
- ☐ Volunteer Utilization Plan
- ☐ Risk Communications Plan
- ☐ Demobilization Plan

Forms, including:
- ☐ HICS Incident Action Plan (IAP) Quick Start
- ☐ HICS 200 – Incident Action Plan (IAP) Cover Sheet
- ☐ HICS 201 – Incident Briefing
- ☐ HICS 202 – Incident Objectives
- ☐ HICS 203 – Organization Assignment List
- ☐ HICS 205A – Communications List
- ☐ HICS 214 – Activity Log
- ☐ HICS 215A – Incident Action Plan (IAP) Safety Analysis
- ☐ HICS 221 – Demobilization Checklist
- ☐ HICS 251 – Facility System Status Report
- ☐ HICS 253 – Volunteer Registration
- ☐ HICS 254 – Disaster Victim/Patient Tracking
- ☐ HICS 255 – Master Patient Evacuation Tracking

Paper forms for downtime documentation, data entry, etc.

Job Action Sheets

Hospital organization chart

Hospital and campus floor plans, maps, and evacuation routes

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Operations Section Chief	X	X	X	X
Staging Manager		X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director		X	X	X
Business Continuity Branch Director			X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief	X	X	X	X
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief	X	X	X	X
Service Branch Director		X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief		X	X	X
Time Unit Leader		X	X	X
Cost Unit Leader		X	X	X