Hospital Incident Command System Revision Project

Mary Massey, BSN, MA, PHN
California Hospital Association,
Hospital Preparedness Program

Loni Howard, RN, MSN
Sutter Medical Center, Sacramento

Objectives

- Identify the HICS Revision Project changes to HICS
- Identify the changes to the HICS forms including form names, numbering and content
- Identify methodology to implement HICS Revision Project changes into individual facilities
SPECIAL THANKS TO EMSA for sponsorship of the HICS Revision Project
Funding provided by HPP and the US Department of Veterans Affairs

What is HICS?

HICS is an incident management system:
- Intended for use by hospitals regardless of their size or patient care capacity and capabilities
- Consistent with National Incident Management System utilizing standardized terminology, response concepts, and procedures
- Used in emergency and planned events
- Flexible and scalable
What HICS is Not

HICS is not:

- HICS does not replace or supplant daily hospital operations
- The HICS Guidebook does not replace the hospital’s Emergency Operations Plan

Why HICS was Revised

Why was HICS Revised:

- Need existed to update to HICS Forms, Incident Planning Guides, and Incident Response Guides
- Align HICS process and forms with changes in FEMA forms
- Provide additional information for expanded use in different sized facilities
- Use by other healthcare providers
How HICS was Revised

Process included review of:

- Lessons learned from real world emergencies
- 2009–2010 National HICS Survey
- 2011 National HICS Stakeholders Conference
- Other recommendations including the Secondary Review Group

What are the Changes

- It is not called “HICS V” it is now simply HICS
- This update does not involve across-the-board changes in design and content but rather provides updates to HICS to provide users additional and updated material and maintains improved alignment with FEMA and the National Incident Management System
What are the Changes (cont.)

- New terminology
- New and updated Job Action Sheets and forms
- Additional Incident Action Planning Guidance
- Improved interoperability for multi-agency coordination
- Additional Incident Planning Guides and Incident Response Guides
- New appendices on Small/Rural/Off Hours Healthcare Facilities and Customizing HICS

HICS Guidebook

HICS Guidebook:
- The HICS Guidebook has been revised to provide additional guidance and information requested by users
- Increased emphasis on implementation
- New chapter on Incident Action Planning
- More information on how to customize HICS
- Information for using HICS after hours and for small and rural hospitals
Incident Management Team

New verbiage

- Hospital Incident Management Team is the new term to eliminate any confusion with a state or federal management team sent to manage an incident

Under Operations

New verbiage

- (Former) Mental Health Unit Leader changed to Behavioral Health Unit Leader
What are the Changes (cont.)

**Under Operations (continued)**

**Business Continuity Branch**
- Business Function Relocation Unit Leader removed
- *Information Technology/Information Services Unit Leader* changed to *IT Systems and Applications Unit Leader*
- *Records Preservations Unit Leader* changed to *Records Management Unit Leader*

Hospital Incident Management Team

**Under Operations (continued)**

**New Patient Family Assistance Branch**
- A Patient Family Assistance Branch was added to the Operations Section to address the needs of patient families during an incident. This newly added Branch includes:
  - Social Services Unit
  - Family Reunification Unit
Hospital Incident Management Team (cont.)

Operations – Family Services Branch
Added Social Services Unit Leader

- The mission of the Social Services Unit Leader is to organize and manage patient social service requirements during a disaster, by coordinating with community and government resources.

Hospital Incident Management Team (cont.)

Social Services Unit Leader addresses:
- Housing, shelters and authorized care sites
- Food and water distribution centers and resources
- Clothing distribution centers
- Community warming and cooling stations
- Medical and non-medical transportation
- Pharmacies, including 24 hour availability (continued next slide)
Hospital Incident Management Team (cont.)

Social Services Unit Leader (continued):

- Pet and animal shelters
- Translator services, such as ATT
- Child, adult and dependent day care
- Access to government services
- Insurance response and coordination centers
- Interface with faith-based organizations
- Interface with the American Red Cross
- Interface with the Salvation Army

Hospital Incident Management Team (cont.)

Operations – Family Assistance Branch

Added Family Reunification Unit Leader

- Organize and manage the services and processes required to assist in family reunification
- Family unification area, protocols, including: identification, tracking, documentation and communication
- Resources, cultural and spiritual, interpreter services, transportation needs
Under Operations – Infrastructure Branch
Removed:
- Environmental Services Unit
- Medical Devices Unit

Under Logistics – Support Branch
Added Employee Family Care Unit Leader
- The Employee Family Care Unit Leader is added to coordinate employee family needs
Hospital Incident Management Team (cont.)

Logistics Section – Support Branch
Other Changes
- Facilities Unit Leader removed
- *Family Care Unit Leader* changed to *Employee Family Care Unit Leader*

Hospital Incident Management Team (cont.)

Logistics Section – Service Branch
- Staff Food and Water Unit Leader – Combined Staff and Patient (from under Operations) into *Food Services Unit Leader*
- IT/IS Unit Leader now changed to *IT Information Services and Equipment Unit Leader*
Hospital Incident Management Team (cont.)

Options to add additional Branches:

- The HICS Guidebook now provides examples of how to customize HICS to their facility
- When adding branches, ensure that the new branch is added under the appropriate Incident Command System concept and section of where it should be placed

Job Action Sheets

- One for each Hospital Incident Management Team position
- Standardized and still divided into response periods and include instructions for use
- Includes guidance for documentation, safety and security, activities, resources, communication, and documents and tools
HICS Forms

**Added New Form:**
HICS Incident Action Plan Cover Sheet
- Assists with compiling the Incident Action Plan components

HICS Forms: IAP Quick Start

**Added New Form:**
- The IAP Quick Start is a short form combining forms 201, 201, 203, 204 and 215A
- It can be used in place of the full forms to document initial actions taken or during a short incident. Incident management can expand to the full forms as needed.
- It is prepared by the Incident Commander and/or Planning Chief
201 Incident Briefing

- Most significant changes
- Changed to match the FEMA 201 form
- Designed to provide a summary of the current Operational Period
- Provides a situational status report and update to the oncoming Incident Commander

204 Assignment List(s)

- Previously 204 – Branch Assignment List
- Documents the objectives, strategies and tactics, and resources needed for each Section/Branch for the current operational period
- Used in development of the Incident Action Plan
Incident Action Plan Safety Analysis

- Previously 261
- Changed to 215A to conform with new FEMA form numbering

Updates To HICS Forms (cont.)

- 203 – Organization Assignment List changed to Organization Assignment Sheet
- 205 – Incident Communication Log changed to Communication List
- 213 – Incident Message Form changed to General Message
Updates To HICS Forms (cont.)

- 214 – Operational Log changed to Activity Log
- 253 – Volunteer Staff Registration changed to Volunteer Registration
- Newly added 221 Demobilization Checkout
- 254 – Disaster Victim/Patient Tracking Form changed to Disaster Victim/Patient Tracking
- 255 – Master Patient Evacuation Tracking Form changed to Master Patient Evacuation Tracking

Updates to Objectives

Objectives were formerly divided into Command and Control objectives and Operational Period objectives; to be consistent with FEMA forms, they are now all referred to as Incident Objectives.

- The 201 Incident Objectives form reflects the overarching objectives derived from the Incident Commander.
- The 204 Assignment List(s) details the individual Branch and Unit objectives used to develop the 202 Incident Objectives form.
Incident Action Planning

Updates to Incident Action Planning

- Components of the Incident Action Plan
- Command and General Staff roles in development and implementation
- Planning P
- Forms and tools
- Distribution and sharing
- Review its use as a risk management tool

The Planning P

The “Planning P” is a tool used by some to visually represent the incident action planning process and the operational period planning cycle.
Incident Action Planning – Components

- HICS 201: Incident Briefing
- HICS 202: Incident Objectives
- HICS 203: Organization Assignment List
- HICS 204: Assignment List
- HICS 215A: Incident Action Plan Safety Analysis
- Additional forms, maps, etc. can be added
- Hospital-specific forms and plans can be included as appropriate and relevant to the incident

CHA HPP Hospital Incident Action Plan Checklist

- Designed to assist hospitals in the development of an Incident Action Plan for each Operational Period
- Available at www.calhospitalprepare.org
Updates and changes to Scenarios, Incident Planning Guides and Incident Response Guides:

- Removed designation of External versus Internal Scenario's
- Reformatted scenario specific Hospital Incident Management Team positions into table
- Incident Response Guides aligned with Job Action Sheets with scenario-specific activities

Newly developed and added:

- Wildland Fires
- Tornado
- Mass Casualty Incident
- Active Shooter
- Staff Shortage (Previously “Work Stoppage”)
Deleted:
- Fire
- Hospital Overload
- Work Stoppage
- Internal Flooding
- 10-Kiloton Improvised Nuclear Device

Combined into a single guide:
Chemical Agents
- Blister Agent
- Toxic Industrial Chemicals
- Nerve Agent
- Chlorine Attack
- Hazardous Materials Spill
Combined into a single guide:
Infectious Disease
- Aerosol Anthrax
- Pandemic Influenza
- Plague
- Food Contamination

Combined into a single guide:
Utility Failure
- Loss of HVAC
- Loss of Power
- Loss of Water

Infant Abduction guide changed to
- Missing Person
Scenarios/Incident Planning Guides/Incident Response Guides (cont.)

Combined into single guide:
- Explosive Event
  - Improvised Explosive Devices
  - Bomb Threat

Radiological Dispersal Device guide changed to
- Radiation Incident

Cyber Attack guide changed to
- Information Technology

Implementing HICS

How to implement the updated HICS Revision
- Review HICS Revision updates
- Customize HICS to the facility
- Incorporate the changes into existing Emergency Operation Plan
- Include hospital leadership in the process
- Provide education and training
- Include HICS in exercises and real events
- Practice, practice, practice
Social Media

- The HICS Guidebook addresses social media including Twitter, Facebook, YouTube and other social media sites for monitoring and release of event-related information.

Other Situations

Implementing HICS during off-hours and for small and rural hospitals

- The HICS Guidebook offers suggestions and guidance for utilizing HICS for small and rural hospitals.
- It also offers suggestions and guidance for off-hours when staffing is not at a premium.
Helping with Compliance

HICS Guidebook addresses issues and requirements for healthcare facility compliance

- National Incident Management System (NIMS) requirements
- Accreditation requirements
- Grant requirements

Nursing Home Incident Command System

The updated HICS Guidebook addresses other healthcare partners

- Nursing Home Incident Command System
HICS is a Living Document

HICS materials are living documents

HICS Tools and Resources

- HICS forms help document actions
- Incident Response Guides (IRG) serve as a roadmap for response
- HICS Guidebook and Toolkit
- Customize tools to your facility
  - Based on your Hazard Vulnerability Analysis (HVA), Emergency Operations Plan, policies and procedures, resources
Hospital Challenges

- Education for all participants
- Learning Incident Action Planning
- Using forms
- Including hospital leadership
- Turnover rates in hospitals and with other response partners
- Accepting and incorporating change
- Reduced budgets

Next Steps

Next steps

- What should be done
- When and where to find the materials
- How to get the word out
- Developing a training plan
CHA HPP HICS Courses

CHA Courses

- HICS Basics
- HICS Across the Sections
- Incident Action Planning for Hospitals

Thank you

Mary Massey
(714) 315-0572
mmassey@calhospital.org

Loni Howard
(916) 591-5810
howardL@sutterhealth.org