MEDICAL/TECHNICAL SPECIALIST – MEDICAL STAFF

**Mission:** Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to the medical staff.

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| Date: Start: End: Position Assigned to: Initial: **Position Reports to:**  Signature: Hospital Command Center (HCC) Location: Telephone: Fax: Other Contact Info: Radio Title:  |

| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
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| Receive appointment and briefing from the Incident Commander. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification. |  |  |
| Notify your usual supervisor of your HICS assignment. |  |  |
| Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis. |  |  |
| Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research and clerical assistance as needed.  |  |  |
| Assist Labor Pool & Credentialing Unit Leader with medical staff credentialing issues. |  |  |
| Assist the Support Branch Director with completion of the Medical Staff Plan (HICS Form 206) |  |  |
| Meet regularly with Medical Care Branch Director and Support Branch Director to plan and project patient care needs. |  |  |
| Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.  |  |  |
| Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit. |  |  |

| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
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| Meet regularly with the Incident Commander or the Operations Section Chief, as appropriate, to brief on medical staff status and projected needs.  |  |  |
| Maintain regular communications with the Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas. |  |  |

| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
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| Continue to ensure medical staff related response issues are identified and effectively managed. Report critical issues to the Medical Care Branch Director and Operations Section Chief, as appropriate. |  |  |
| Continue to meet regularly with the Operations Section Chief or Incident Commander, as assigned, to update current conditions and status. |  |  |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. |  |  |
| Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Employee Health & Well-Being Unit Leader. Provide for staff rest periods and relief. |  |  |
| Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information. |  |  |

| **Demobilization/System Recovery** | **Time** | **Initial** |
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| Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment. |  |  |
| Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate. |  |  |
| Upon deactivation of your position, brief the Operations Section Chief or Incident Commander, as appropriate, on current problems, outstanding issues, and follow-up requirements. |  |  |
| Submit comments to the Operations Section Chief or the Incident Commander, as appropriate, for discussion and possible inclusion in the after-action report; topics include:* Review of pertinent position descriptions and operational checklists
* Recommendations for procedure changes
* Section accomplishments and issues
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| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. |  |  |

| **Documents/Tools** |
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| * Incident Action Plan
* HICS Form 207 – Incident Management Team Chart
* HICS Form 213 – Incident Message Form
* HICS Form 214 – Operational Log
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Radio/satellite phone
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