PATIENT REGISTRATION UNIT LEADER

**Mission:** Coordinate inpatient and outpatient registration.

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

| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| --- | --- | --- |
| Receive appointment, briefing, and any appropriate materials from the Medical Care Branch Director. |  |  |
| 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. |  |  |
| Appoint Patient Registration Unit members and complete the Branch Assignment List (HICS Form 204). |  |  |
| Brief Unit staff on current situation, incident objectives and strategy; outline Unit action plan; and designate time for next briefing. |  |  |
| In coordination with the Patient Tracking Manager, track inpatient and outpatient admissions and discharges. |  |  |
| Work with the Situation Unit Leader to document, and track all incoming and outgoing patients. |  |  |
| 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** |
| --- | --- | --- |
| Meet regularly with the Medical Care Branch Director for status reports, and relay important information to Unit members. |  |  |
| Maintain regular communications and provide patient registration information and updates to the Planning Section’s Patient Tracking Manager. |  |  |
| Ensure all documentation and patient registration information is completed to ensure timely payment of patient bills. |  |  |
| Identify need for assistance or equipment and report to the Medical Care Branch Director. |  |  |
| Develop and submit an action plan to the Medical Care Branch Director when requested. |  |  |
| Advise the Medical Care Branch Director immediately of any operational issue you are not able to correct or resolve. |  |  |

| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| --- | --- | --- |
| Continue to update the Medical Care Branch Director regularly on current condition of all operations; communicate needs in advance. |  |  |
| Continue to document actions and decisions on an Operational Log (HICS Form 214) and submit to the Medical Care Branch Director at assigned intervals and as needed.  |  |  |
| 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** |
| --- | --- | --- |
| As needs for the Unit’s staff decrease, return staff to their usual jobs and combine or deactivate positions in a phased manner. |  |  |
| Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment. |  |  |
| Upon deactivation of your position, brief the Staging Manager and Operations Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements. |  |  |
| Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to Medical Care Branch Director or Operations Section Chief, as appropriate. |  |  |
| Debrief staff on lessons learned and procedural/equipment changes needed. |  |  |
| Submit comments to Medical Care Branch Director for discussion and possible inclusion in after action report. Comments should include:* Review of pertinent position descriptions and operational checklists
* Recommendations for procedure changes
* Section accomplishments and issues
 |  |  |
| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. |  |  |

| **Documents/Tools** |
| --- |
| * Incident Action Plan
* HICS Form 204 – Branch Assignment List
* HICS Form 207 – Incident Management Team Chart
* HICS Form 213 – Incident Message Form
* HICS Form 214 – Operational Log
* HICS Form 254 – Disaster Victim/Patient Tracking Form
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Radio/satellite phone
* Hospital emergency operations plan
 |