

CASUALTY CARE UNIT LEADER

Mission: Organize and coordinate the delivery of emergency care to arriving patients.

Position Reports to: Medical Care Branch Director Command Location: _____		
Position Contact Information: Phone: (_____) - _____ Radio Channel: _____		
Hospital Command Center (HCC): Phone: (_____) - _____ Fax: (_____) - _____		
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
<p>Receive appointment</p> <ul style="list-style-type: none"> • Obtain briefing from the Medical Care Branch Director on: <ul style="list-style-type: none"> ○ Size and complexity of incident ○ Expectations of the Incident Commander ○ Incident objectives ○ Involvement of outside agencies, stakeholders, and organizations ○ The situation, incident activities, and any special concerns • Assume the role of Casualty Care Unit Leader • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment 		
<p>Assess the operational situation</p> <ul style="list-style-type: none"> • Determine the status of casualty care areas; assess current capabilities, and project immediate and prolonged capacity to provide casualty care based on current data • Assess critical issues and treatment needs in casualty care areas • Ensure establishment of primary and secondary communication capabilities in casualty care areas • Provide information to the Medical Care Branch Director on the status 		
<p>Determine the incident objectives, tactics, and assignments</p> <ul style="list-style-type: none"> • Document unit objectives, tactics, and assignments on the HICS 204: Assignment List • Based on the incident objectives for the response period consider the issues and priorities: <ul style="list-style-type: none"> ○ Appoint Casualty Care Unit personnel in collaboration with the Medical Care Branch Director ○ Determine strategies and how the tactics will be accomplished ○ Determine needed resources • Brief unit personnel on the situation, strategies, and tactics, and designate time for next briefing 		

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<p>Activities</p> <ul style="list-style-type: none"> • Assist with establishment of casualty care areas in additional or new locations, as needed • Identify patient receiving areas and implement patient triage procedures with designated locations for patients with Immediate, Delayed, Minor, Expired, and Expectant needs • Assist with establishment of treatment and morgue areas in additional or new locations, if necessary • Track and document all casualty care patients and their dispositions • Triage and prioritize patients to receive care • Provide status updates to the Medical Care Branch Director regularly to discuss the Incident Action Plan (IAP), advising of accomplishments and issues encountered • Determine staffing needs and place requests with the Medical Care Branch Director • Consider development of a unit action plan; submit to the Medical Care Branch Director if requested • Provide regular updates to unit personnel and inform them of strategy changes as needed • Facilitate patient dispositions to other areas for diagnostics, studies, observation, admission, or transfer 		
<p>Documentation</p> <ul style="list-style-type: none"> • HICS 204: Document assignments and operational period objectives on Assignment List • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis • HICS 252: Distribute Section Personnel Time Sheet to section personnel; ensure time is recorded appropriately, and submit it to the Finance/Administration Section Time Unit Leader at the completion of a shift or end of each operational period • HICS 254: Ensure the Disaster Victim/Patient Tracking form is used to document triage, treatment, and disposition of incident victims • HICS 259: As directed by the Planning Section Patient Tracking Manager, document injuries and deaths on the Hospital Casualty/Fatality Report • HICS 260: Provide details on the Patient Evacuation Tracking form 		
<p>Resources</p> <ul style="list-style-type: none"> • Determine equipment and supply needs; request from the Logistics Section Supply Unit Leader and report to the Medical Care Branch Director • Assess issues and needs in unit areas; coordinate resource management 		
<p>Communication</p> <p><i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i></p>		
<p>Safety and security</p> <ul style="list-style-type: none"> • Ensure that all unit personnel comply with safety procedures and instructions • Ensure personal protective equipment (PPE) is available and utilized appropriately • Determine if communicable disease risk exists; implement appropriate response procedures; collaborate with appropriate Medical-Technical Specialists, if activated 		

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Intermediate Response (2 – 12 hours)	Time	Initial
<p>Activities</p> <ul style="list-style-type: none"> • Transfer the Casualty Care Unit Leader role, if appropriate <ul style="list-style-type: none"> ○ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital ○ Address any health, medical, and safety concerns ○ Address political sensitivities, when appropriate ○ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Continue coordination of care and disposition of patients • Ensure patient records are documented correctly and collected • Ensure patient care is prioritized effectively if crisis standards of care are enacted • Activate the Mass Fatality Plan, if needed, including: <ul style="list-style-type: none"> ○ Family notification with law enforcement and medical examiner or coroner assistance ○ Patient Family Assistance areas ○ Safe and respectful storage of remains ○ Area security and privacy ○ Proper handling of personal effects ○ Evidence preservation and chain of custody ○ Documentation ○ Coordination with medical examiner or coroner • Assess environmental services or housekeeping needs in all casualty care areas • Meet regularly with the Medical Care Branch Director for status reports • Communicate patient status and location information regularly to the Planning Section Patient Tracking Manager • Advise the Medical Care Branch Director immediately of any operational issue you are not able to correct 		
<p>Documentation</p> <ul style="list-style-type: none"> • HICS 204: Document assignments and operational period objectives on Assignment List • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis 		
<p>Resources</p> <ul style="list-style-type: none"> • Assess issues and needs in unit areas; coordinate resource management • Ensure equipment, supplies, and personal protective equipment (PPE) are replaced as needed 		
<p>Communication</p> <p><i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i></p>		
<p>Safety and security</p> <ul style="list-style-type: none"> • Ensure that all unit personnel comply with safety procedures and instructions • Ensure physical readiness through proper nutrition, water intake, rest, and stress management techniques • Ensure unit personnel health and safety issues are being addressed; report issues to the Safety Officer and the Logistics Section Employee Health and Well-Being Unit • Ensure personal protective equipment (PPE) is available and utilized appropriately 		

CASUALTY CARE UNIT LEADER

Extended Response (greater than 12 hours)	Time	Initial
<p>Activities</p> <ul style="list-style-type: none"> • Transfer the Casualty Care Unit Leader role, if appropriate <ul style="list-style-type: none"> ○ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital ○ Address any health, medical, and safety concerns ○ Address political sensitivities, when appropriate ○ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Continue casualty care area supervision, including monitoring quality of care, documentation, and safety practices • Provide updates to the Medical Care Branch Director and unit personnel 		
<p>Documentation</p> <ul style="list-style-type: none"> • HICS 204: Document assignments and operational period objectives on Assignment List • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis 		
<p>Resources</p> <ul style="list-style-type: none"> • Assess issues and needs in unit areas; coordinate resource management • Ensure equipment, supplies, and personal protective equipment (PPE) are replaced as needed 		
<p>Communication</p> <p><i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i></p>		
<p>Safety and security</p> <ul style="list-style-type: none"> • Ensure that all unit personnel continue to comply with safety procedures and instructions • Observe all staff and volunteers for signs of stress and inappropriate behavior and report concerns to the Safety Officer and the Logistics Section Employee Health and Well-Being Unit Leader • Provide for staff rest periods and relief • Ensure physical readiness through proper nutrition, water intake, rest, and stress management techniques • Ensure personal protective equipment (PPE) is available and utilized appropriately 		

Demobilization/System Recovery	Time	Initial
<p>Activities</p> <ul style="list-style-type: none"> • Transfer the Casualty Care Unit Leader role, if appropriate <ul style="list-style-type: none"> ○ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital ○ Address any health, medical, and safety concerns ○ Address political sensitivities, when appropriate 		

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<ul style="list-style-type: none"> ○ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) ● Assist the Medical Care Branch Director and Unit Leaders with restoring treatment areas and the morgue to normal operations ● Ensure the return, retrieval, and restocking of equipment and supplies ● As objectives are met and needs decrease, return unit personnel to their usual jobs and combine or deactivate positions in a phased manner in coordination with the Planning Section Demobilization Unit Leader ● Notify the Medical Care Branch Director when demobilization and restoration is complete ● Coordinate reimbursement issues with the Finance/Administration Section ● Upon deactivation of your position, brief the Medical Care Branch Director on current problems, outstanding issues, and follow up requirements ● Debrief unit personnel on issues, strengths, areas of improvement, lessons learned, and procedural or equipment changes as needed ● Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include: <ul style="list-style-type: none"> ○ Review of pertinent position descriptions and operational checklists ○ Recommendations for procedure changes ○ Accomplishments and issues ● Participate in stress management and after action debriefings 		
<p>Documentation</p> <ul style="list-style-type: none"> ● HICS 221: Demobilization Check-Out ● Ensure all documentation is submitted to the Planning Section Documentation Unit 		

Documents and Tools
<ul style="list-style-type: none"> <input type="checkbox"/> HICS 203 - Organization Assignment List <input type="checkbox"/> HICS 204 - Assignment List <input type="checkbox"/> HICS 213 - General Message Form <input type="checkbox"/> HICS 214 - Activity Log <input type="checkbox"/> HICS 215A - Incident Action Plan (IAP) Safety Analysis <input type="checkbox"/> HICS 221 - Demobilization Check-Out <input type="checkbox"/> HICS 252 - Section Personnel Time Sheet <input type="checkbox"/> HICS 254 - Disaster Victim/Patient Tracking <input type="checkbox"/> HICS 259 - Hospital Casualty Fatality Report <input type="checkbox"/> HICS 260 - Patient Evacuation Tracking <input type="checkbox"/> Mass Fatality Plan <input type="checkbox"/> Hospital Emergency Operations Plan <input type="checkbox"/> Hospital Incident Specific Plans or Annexes <input type="checkbox"/> Hospital Surge Plan <input type="checkbox"/> Crisis Standards of Care Guidelines <input type="checkbox"/> Hospital policies and procedures <input type="checkbox"/> Hospital organization chart <input type="checkbox"/> Hospital telephone directory <input type="checkbox"/> Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication