INPATIENT UNIT LEADER

Mission: Assure treatment of inpatients, manage the inpatient care areas, and provide for a controlled patient discharge.

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

Receive appointment
• Obtain briefing from the Medical Care Branch Director on:
  o Size and complexity of incident
  o Expectations of the Incident Commander
  o Incident objectives
  o Involvement of outside agencies, stakeholders, and organizations
  o The situation, incident activities, and any special concerns
• Assume the role of Inpatient Unit Leader
• Review this Job Action Sheet
• Put on position identification (e.g., position vest)
• Notify your usual supervisor of your assignment		

Assess the operational situation • Determine the status of inpatient patient care areas • Assess critical issues and treatment needs in inpatient care areas • Provide information to the Medical Care Branch Director on the status		

Determine the incident objectives, tactics, and assignments
• 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:
  o Appoint Inpatient Unit personnel in collaboration with the Medical Care Branch Director
  o Determine strategies and how the tactics will be accomplished
  o Determine needed resources
• Brief unit personnel on the situation, strategies, and tactics, and designate time for next briefing		

Activities • Assist with establishment of inpatient care areas in additional or new locations, as necessary		

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• Instruct unit personnel to begin patient priority assessment and to designate those eligible for early discharge; initiate discharges at the direction of the Incident Commander and in coordination with the Medical Care Branch Director • Coordinate with the Planning Section Bed Tracking Manager for bed availability and tracking, as appropriate • Determine staffing needs and place requests with the Medical Care Branch Director • Provide status updates to the Medical Care Branch Director regularly to discuss the Incident Action Plan (IAP), advising of accomplishments and issues encountered • 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		
Documentation • 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 260: Provide details on the Patient Evacuation Tracking form		
Resources • 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		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		
Safety and security • 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		

Intermediate Response (2 – 12 hours)	**Time**	**Initial**

Activities
• Transfer the Inpatient Unit Leader role, if appropriate
  o 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
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o 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 correctly documented and collected		

• Ensure patient care is prioritized effectively if crisis standards of care are enacted; coordinate with Medical-Technical Specialist: Medical Ethicist as indicated • Assess environmental services or housekeeping needs in all inpatient care areas • In collaboration with the Medical Care Branch Director, prioritize and coordinate patient transfers to other hospitals or locations with the Logistics Section Support Branch Director or Transportation Unit Leader, as appropriate • 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 • Relay important information and updates to unit personnel		
Documentation • 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		
Resources • Assess issues and needs in unit areas; coordinate resource management • Ensure equipment, supplies, and personal protective equipment (PPE) are replaced as needed		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		
Safety and security • 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		

Extended Response (greater than 12 hours)	Time	Initial

Activities
• Transfer the Inpatient Unit Leader role, if appropriate
  o 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
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o 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 inpatient care supervision, including monitoring quality of care, documentation, and safety practices
• Provide updates to the Medical Care Branch Director and unit personnel		

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Documentation • 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		
Resources • Assess issues and needs in unit areas; coordinate resource management • Ensure equipment, supplies, and personal protective equipment (PPE) are replaced as needed		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		
Safety and security • 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**

Activities
• Transfer the Inpatient Unit Leader role, if appropriate
  o 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
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o 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)
• 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:
  o Review of pertinent position descriptions and operational checklists		

- o Recommendations for procedure changes - o Accomplishments and issues - Participate in stress management and after action debriefings		
Documentation - HICS 221: Demobilization Check-Out - Ensure all documentation is submitted to the Planning Section Documentation Unit		

Documents and Tools

- ❑ HICS 203 - Organization Assignment List
- ❑ HICS 204 - Assignment List
- ❑ HICS 213 - General Message Form
- ❑ HICS 214 - Activity Log
- ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis
- ❑ HICS 221 - Demobilization Check-Out
- ❑ HICS 252 - Section Personnel Time Sheet
- ❑ HICS 260 - Patient Evacuation Tracking
- ❑ Hospital Emergency Operations Plan
- ❑ Hospital Incident Specific Plans or Annexes
- ❑ Hospital Surge Plan
- ❑ Crisis Standards of Care Guidelines
- ❑ Hospital policies and procedures
- ❑ Hospital organization chart
- ❑ Hospital telephone directory
- ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication