

Incident Response Guide: Infectious Disease

Mission

To effectively and efficiently identify, triage, isolate, treat, and track a surge of potentially infectious patients and staff, and to manage the uninjured, asymptomatic persons, family members, and media.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- Identify, triage, isolate, and treat infectious patients
- Protect patients and staff from exposure and injury
- Assure safety and security for patients, staff, visitors, and the hospital
- Admit a large number of infectious patients while protecting other (uninfected) patients

Immediate Response (0 – 2 hours)

Section	Officer/Specialist	Time	Action	Initials
Command	Incident Commander		Receive notification of incident from local emergency medical services; notify the emergency department of possible incoming infectious patients.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Activate the Emergency Operations Plan, Infectious Disease Plan, Surge Plan, Infectious Patient Transport Plan, Hospital Incident Management Team, and Hospital Command Center.	
			Establish operational periods, objectives, and regular briefing schedule. Consider the use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Appoint Command Staff, Section Chiefs, and Medical-Technical Specialist: Infectious Disease.	
	Public Information Officer		In conjunction with Joint Information Center, develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and Incident Commander.	
	Liaison Officer		Establish contact with local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, and area hospitals to determine incident details, community status, estimates of casualties, request needed supplies, equipment, and personnel, and to identify the infectious agent.	
			Communicate regularly with Incident Commander and Section Chiefs regarding operational needs and the integration of hospital functions with local response.	

	Safety Officer		Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital using HICS 215A and implement corrective actions to address.	
			Monitor safe and consistent use of appropriate personal protective equipment by staff.	
	Medical-Technical Specialist: Infectious Disease		Verify from the emergency department attending physician and affected outpatient sites, in collaboration with local emergency medical services, the following information and report to the Incident Commander: <ul style="list-style-type: none"> <input type="checkbox"/> Number and condition of patients affected, including asymptomatic people presenting <input type="checkbox"/> Type of biological or infectious disease involved (case definition) <input type="checkbox"/> Medical problems present in addition to the biological or infectious disease involved <input type="checkbox"/> Measures taken (e.g., cultures, supportive treatment) <input type="checkbox"/> Potential for, and scope of, communicability 	
			Provide guidance on appropriate personal protective equipment and isolation precautions.	
			Provide expert input in the Incident Action Planning process.	

Immediate Response (0 – 2 hours)				
Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Provide just-in-time training for both clinical and nonclinical staff regarding the status of the event, precautions they should take, and rumor control.	
			Notify the emergency department of possible numbers of incoming infectious patients, in consultation with the Liaison Officer who is in communication with local emergency medical services.	

	Medical Care Branch Director	<p>Implement Infectious Disease Plan, including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Location for offsite triage, as appropriate <input type="checkbox"/> Proper rapid triage of people presenting requesting evaluation, coordinated with security, if necessary <input type="checkbox"/> Staff implementation of infection precautions, and higher level precautions for high risk procedures. (e.g., suctioning, bronchoscopy, etc.), as per current Centers for Disease Control and Prevention (CDC) guidelines <input type="checkbox"/> Proper monitoring of isolation rooms and isolation procedures <input type="checkbox"/> Limitation of patient transportation within hospital for essential purposes only <input type="checkbox"/> Restriction of number of clinicians and ancillary staff providing care to infectious patients 	
		Evaluate and determine health status of all persons prior to hospital entry.	
		Ensure safe collection, transport, and processing of laboratory specimens.	
		Identify evacuation priorities and transfer requirements.	
		Review patient census and determine if discharges and appointment cancellations are required.	
		Provide personal protective equipment to personnel with immediate risk of exposure (e.g., conducting outside duties, conducting screening and triage, interacting with infectious patients).	
		Prepare for fatalities, if necessary.	
	Activate Emergency Patient Registration Plan as required.		
	Security Branch Director	<p>Activate the Security Plan to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Secure the hospital to prevent infectious patients from entering the hospital except through designated route <input type="checkbox"/> Establish ingress and egress routes <input type="checkbox"/> Implement crowd and traffic control protocols 	
Planning	Section Chief	Establish operational periods, incident objectives, and the Incident Action Plan in coordination with the Incident Commander.	

	Resources Unit Leader		Track dispersal of external pharmaceutical cache(s) such as the Strategic National Stockpile.	
			Initiate personnel and materials tracking.	
	Situation Unit Leader		Initiate patient and bed tracking (Disaster Victim/Patient Tracking – HICS Form 254).	
Logistics	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Service Branch		Prepare for receipt of external pharmaceutical cache(s) such as the Strategic National Stockpile.	
	Support Branch		Implement distribution plans for mass prophylaxis and immunizations for employees, their families, and others.	
			Anticipate an increased need for medical supplies; antivirals, IV fluids, and pharmaceuticals; oxygen, ventilators, suction equipment, and respiratory protection; and for respiratory therapists, transporters, and other personnel.	
			With Planning Section, determine staff supplementation needs and activate Labor Pool.	

Intermediate Response (2 – 12 hours)				
Section	Officer/Specialist	Time	Action	Initials
Command	Incident Commander		Review the overall impact of the ongoing incident on the hospital with Command and General staff.	
			Monitor that communications and decision making processes are coordinated with local Emergency Operations Center and area hospitals, as appropriate.	
			Direct implementation of any and all additional response plans required to address the incident.	
			Consider deploying a hospital representative to the local Emergency Operations Center.	
	Public Information Officer		Conduct briefings to patients, staff, people seeking shelter, and media to update them on incident and hospital status.	

			Coordinate risk communication messages with the Joint Information Center, if able.	
			Assist with notification of patients' families about the incident and inform them of the likelihood of transfer, if required.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, local emergency medical services, local health department, regional medical health coordinator, and area hospitals to relay status and critical needs and to receive community updates.	
			Keep local emergency medical services advised of any health problems and trends identified, in cooperation with Infection Control.	
	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect staff, patients, visitors, and hospital.	
			Continue to monitor proper use of personal protective equipment and isolation procedures.	
	Medical-Technical Specialist: Infectious Disease		Support Hospital Incident Management Team as needed; consult appropriately with other internal and external experts.	
			Support Operations Section as needed by coordinating information regarding specific disease identification and treatment procedures and staff prophylaxis procedures.	

Intermediate Response (2 – 12 hours)				
Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Monitor continuation of medical mission activities. Conduct disease surveillance, including number of affected patients and personnel.	
			Continue patient, staff, and hospital monitoring for infectious exposure, and provide appropriate follow up care as required.	
			Continue patient management activities, including patient cohorting, isolation, and personal protective equipment practices.	

			Consult with Infection Control for disinfection requirements for equipment and hospital.	
			Implement Fatality Management Plan and assess capacity for refrigeration and security of decedents, if necessary.	
	Business Continuity Branch Director		Refer to Job Action Sheet for appropriate tasks.	
	Patient Family Assistance Branch Director		Establish a patient information center.	
Planning	Section Chief		Update and revise the incident objectives and the Incident Action Plan for the upcoming operational period in cooperation with Command Staff and Section Chiefs.	
	Resources Unit Leader		Continue staff, materials, and equipment tracking.	
	Situation Unit Leader		Continue patient and bed tracking.	
Logistics	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Coordinate activation of staff vaccination or Mass Vaccination and Prophylaxis Plan with Operations Section.	
			Monitor health status of staff exposed to infectious patients, and report to Operations Section.	
			Consider temporarily reassigning staff recovering from flu to appropriate duties; reassign staff at high risk for complications of flu (e.g., pregnant women, immunocompromised persons) to low risk duties (no infectious patient care or administrative duties only).	
			Continue to assess surge capacity and need for supplies (equipment, blood products, medications, supplies) in cooperation with Operations Section. Obtain supplies as required and available or continue supply rationing.	
			Continue staff call in (if safe and as needed) and provide additional staff to impacted areas.	
			Facilitate procurement of supplies, equipment, and medications for response and patient care.	

	Service Branch Director		Provide for staff food, water, rest periods, and behavioral health support.	
Finance/ Administration	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Time Unit Leader		Track hours associated with the incident response.	
	Procurement Unit Leader		Facilitate procurement of needed supplies, equipment, and contractors.	
	Compensation / Claims Unit Leader		Track and follow up with employee illnesses and absenteeism issues.	
			Implement risk management and claims procedures for reported staff and patient exposures or injuries.	
	Cost Unit Leader		Track response expenses and expenditures.	

Extended Response (greater than 12 hours)				
Section	Officer/Specialist	Time	Action	Initials
Command	Incident Commander		Reassess incident objectives and Incident Action Plan and revise as indicated by the response priorities and overall mission.	
			Plan for return to normal services in coordination with Command Staff and Section Chiefs; consider consulting with emergency medical services and other community hospitals regarding their status and plans.	
			Reevaluate the hospital's ability to continue its medical mission.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and people seeking shelter.	
			Communicate regularly with the Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain established contacts with outside agencies to relay status and critical needs.	
			Keep local emergency medical services advised of any health problems and trends identified.	

	Safety Officer		Continue to oversee safety measures and use of personal protective equipment for patients, staff, and visitors.	
			Assess the crowd control plan and any other safety issues with appropriate staff.	
	Medical-Technical Specialist: Infectious Disease		Continue to support Hospital Incident Management Team with current information and projected impact.	
			Continue to support Operations Section as needed by coordinating information regarding specific infectious agent identification and treatment procedures.	
			Continue to provide expert input into Incident Action Planning process.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Medical Care Branch Director		Monitor continuation of medical mission activities, including patient care and isolation activities.	
			Continue patient monitoring for infectious exposure and provide appropriate follow up care as required.	
	Infrastructure Branch Director		Ensure proper disposal of infectious waste, including disposable supplies and equipment.	
			Continue infrastructure maintenance and support, including continuing to monitor hospital air quality.	
	Planning	Section Chief		Update and revise the Incident Action Plan in collaboration with Command Staff and Section Chiefs.
			Ensure that updated information and intelligence is incorporated into Incident Action Plan.	
Resources Unit Leader			Monitor supply and equipment levels and notify Logistics and Operations Section of identified needs.	
Demobilization Unit Leader			Ensure the Demobilization Plan is being readied.	

Logistics	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor the health status of staff that participated, supported, or assisted in disinfection activities, and provide appropriate medical care and follow up.	
			Continue to facilitate procurement of supplies, equipment, and medications for response and patient care.	
Finance/ Administration	Section Chief		Coordinate with Risk Management for additional insurance and documentation needs, consider taking photographs where applicable.	
	Cost Unit Leader		Continue to track response costs and expenditures, and prepare regular reports for the Incident Commander.	

Demobilization/System Recovery				
Section	Officer	Time	Action	Initials
Command	Incident Commander		Determine termination of event and ability to return to normal operations.	
			Oversee and direct demobilization operations with restoration of normal services.	
			Ensure that process is mobilized to complete response documentation for submission for reimbursement.	
	Public Information Officer		Conduct final media briefing and assist with updating staff, patients, families, and others of termination of incident and restoration of normal services.	
	Liaison Officer		Communicate final hospital status and termination of the incident to local emergency medical services and any established outside agency contacts.	
	Safety Officer		Monitor and maintain a safe environment during return to normal operations.	

Demobilization/System Recovery				
Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Submit all section documentation to Planning Section for compilation in After Action Report.	
	Medical Care Branch Director		Return patient care and services to normal operations.	
	Infrastructure Branch Director		Ensure that deployable isolation equipment or alterations in air pressure flow are returned to pre-incident status.	
	Security Branch Director		Return traffic flow and security forces to normal services.	
Planning	Section Chief		Finalize and distribute Demobilization Plan.	
			Conduct debriefings or hotwash with: <input type="checkbox"/> Command Staff and section personnel <input type="checkbox"/> Administrative personnel <input type="checkbox"/> All staff <input type="checkbox"/> All volunteers	
			Write an After Action Report, Corrective Action, and Improvement Plans for submission to the Incident Commander, and include: <input type="checkbox"/> Summary of the incident <input type="checkbox"/> Summary of actions taken <input type="checkbox"/> Actions that went well <input type="checkbox"/> Actions that could be improved <input type="checkbox"/> Recommendations for future response actions	
			Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute as appropriate.	
Logistics	Section Chief		Submit all section documentation to Planning Section for compilation in After Action Report.	
	Support Branch Director		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
			Inventory levels of personal protective equipment and work with Finance Section to replenish necessary supplies.	

Finance/ Administration	Section Chief		Contact insurance carriers to identify requirements for documentation of any damage or losses, and initiate reimbursement and claims procedures.	
			Finalize all expense and time reports and summarize the costs of the response and recovery operations to submit to Planning Section for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:

- Infectious Disease Plan
- Surge Plan
- Infectious Patient Transport Plan
- Mass Vaccination and Prophylaxis Plan
- Risk Communication Plan
- Fatality Management Plan
- Patient, staff, and equipment tracking procedures
- Employee health monitoring and treatment plan
- Behavioral Health Support Plan
- Centers for Disease Control and Prevention Guidelines for specific agent identification and treatment
- Mass Casualty Plan
- Infection control and isolation protocols
- Security Plan
- Business Continuity Plan
- Emergency Patient Registration Plan
- Demobilization Plan

Forms, including:

- HICS Incident Action Plan (IAP) Quick Start
- HICS 200 – Incident Action Plan (IAP) Cover Sheet
- HICS 201 – Incident Briefing
- HICS 202 – Incident Objectives
- HICS 203 – Organization Assignment List
- HICS 205A – Communications List
- HICS 214 – Activity Log
- HICS 215A – Incident Action Plan (IAP) Safety Analysis
- HICS 221 – Demobilization Check-out
- HICS 251 – Facility System Status Report
- HICS 254 – Disaster Victim/Patient Tracking

Job Action Sheets

Access to hospital organization chart

Television/radio/internet to monitor news

Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

Hospital Incident Management Team Activation: Infectious Disease

Position	Immediate	Intermediate	Extended	Recovery
Incident Commander	X	X	X	X
Public Information Officer	X	X	X	X
Liaison Officer	X	X	X	X
Safety Officer	X	X	X	X
Medical-Technical Specialist: Infectious Disease	X	X	X	X
Operations Section Chief				
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director			X	X
Security Branch Director	X	X	X	X
Business Continuity Branch Director		X	X	X
Patient Family Assistance Branch Director		X	X	X
Planning Section Chief				
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief				
Service Branch Director	X	X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief				
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader		X	X	X
Cost Unit Leader		X	X	X