

Command Center Activation

The First 90 Minutes of an Incident Response

Ken Combs, Regional Healthcare Preparedness Coordinator (RHPC)
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Objectives

- Explore the fundamentals of an effective command center start up from the point our teams are notified of an event to preparing for and conducting the first operational briefing.
- Introduce tools that can assist with managing an incident response at your facility
- Practice Incident Assessment & Initial Command Center Activation and Response
- Provide workshop time for 'Reflective Pauses'

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Submit Your Questions

- Text: 612-358-7968
- Notecards
- Raise your hand and ask live!



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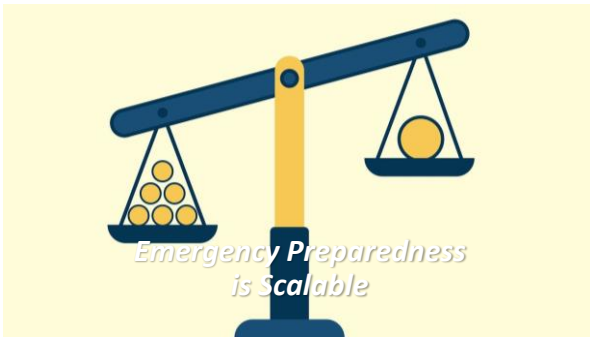
Emergency Preparedness (EP)

Points to Ponder

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EP Basic Concepts

"Disasters are Local"- what does this really mean?

- > We will need to be self-sufficient for a period of time
- > Minutes count

- > Emergency Preparedness (EP) must be usable in the moment
 - > Always keep your end users in mind when you design and update your program

> Communication is key

> Good people (stars and leaders) are capable of very good things in the moment, but how much better can we be with planning and focus as we initiate our response?

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When Do The Worst Things Seem to Happen.....?

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Reflective Pause

What would a command center activation look like at your facility.. at the worst time?

- How many staff would you have to assist in the first 90 minutes of an internal incident or emergency event?
- How many staff needed continue to provide for resident needs at the same time?

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Command Center Set Up

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Command Center....the Dream



Picture courtesy of FEMA

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This Would Be Nice



Picture courtesy Boston Public Health Commission

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But.....Here's Our Most Likely Reality



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Your Command Center is What you Make of It



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Top 5 questions to answer when starting up a command center:

1. How do I notify (if administrator on call; how am I notified)?
2. Where is the command center located? Keys or code to get in?
3. What information and equipment do I need to start up incident command? Where is it located?
4. How do I communicate messages within my facility and to team members not working?
5. Command center numbers (phone lines, conference call number, access codes)

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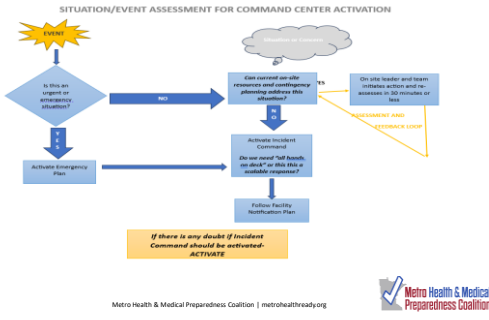
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Command Center Tools

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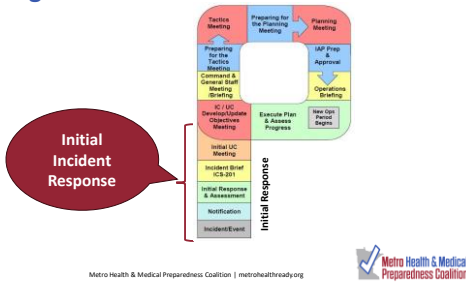
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Planning-P



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Job Action Sheets

SAFETY OFFICER

Warning: Safety Health and Safety Officers, Safety Observers, and Safety Leads, monitor and report hazardous conditions.

Position Details to be filled out on-site		General Information	
Personnel Identification Number		Event Name	
Incident Command Center (ICC) Phone #		File #	
Event Objectives		Site	
Organization		Room	
Event Category		Area	
Event Type		Time	
Event Location		Date	
Event Date		Time	

Incident Response - 1st Phase

Responsibilities:

- Monitor safety conditions and report to the Incident Commander.
- Identify and report hazardous conditions.
- Identify and report safety hazards.
- Identify and report safety violations.
- Identify and report safety deficiencies.
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Reporting:

- Report safety deficiencies to the Incident Commander.
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Operations Section Chief and Command Center Overview

Command Center Functions:

- Maintain overall management of the incident
- Sets incident objectives and priorities
- Devise and implement strategies to manage:
 - Personnel
 - Facilities
 - Equipment
 - Communications
 - Operations
- Ensure mission completion
- **Document** all facets of the event

Operations Section Chief Description/Duties:

- Manage hospital tactical operations
- Gather information and assess operations, including capabilities and limitations
- Ensure the following are being addressed with the appropriate branch or unit:
 - Staff health and safety
 - Patient care
 - Patient tracking
 - Patient family support
- Directs all tactical responses
- Carry out operational objectives of the Incident Action Plan
- Activates additional Operations Section positions as needed

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Document.....Document.....Document

Documentation is vital

- Event planning, response, and review
- Compliance
- Reimbursement
- Explain/defend our actions

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HIC-3 INCIDENT ACTION PLAN (IAP) - GHSK-1 STREET
CONDUCTED BY: [Name] DATE: [Date] TIME: [Time]

INCIDENT OBJECTIVE	RESOURCES/PERSONNEL	STATUS

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HICS INCIDENT ACTION PLAN (IAP) QUICK START

COMBINED: HICS 201-202-203-204-210A

PURPOSE: The Incident Action Plan (IAP) Quick Start is a short form containing HICS Forms 201, 202, 203, 204 and 210A. It can be used in place of the full forms to document initial actions taken at the start of an incident. Incident management will revert to the full forms as needed.
ORIGINATOR: Prepared by the Incident Commander or Planning Section Chief.
COPIES TO: Duplicated and distributed to Command and General staff positions activated. All completed original forms must be given to the Documentation Unit Leader.
NOTES: If additional pages are needed for any form page, use a blank HICS IAP Quick Start and reorganize as needed. Additions may be made to the form to meet the organization's needs.

Table with 3 columns: NUMBER, TITLE, INSTRUCTIONS. Rows include Incident Name, Operational Period, Situation Summary, Incident Management Team, Health and Safety Briefing, Incident Objectives, Strategies/Tactics, Resources Required, Assigned to, and Prepared by.



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Series of horizontal lines for handwritten notes.

HICS 201 - FACILITY SYSTEM STATUS REPORT

Department Use

Form with multiple sections for reporting system status: 1. Incident Name, 2. Name of Department and Reporting Status, 3. System, 4. Status, 5. Status, 6. Comments, 7. Remarks.



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Series of horizontal lines for handwritten notes.

Document.....Document.....Document

Here's a little story for you.....

HICS 210A - ACTIVITY LOG form with columns for Date, Time, Activity, and Remarks.



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Series of horizontal lines for handwritten notes.



Command Center Activation & Response Exercise

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Set the stage

- Weekday evening 5:30pm
- Census is near capacity
- Staffing is at normal levels
- Next shift change is 11:00pm
- Dinner has not been served yet
- Administrator on-call is not on site
- Facilities Team has left for the day

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5:40PM – “WE HAVE A PROBLEM”



Water is leaking from “some ceiling tiles” in the kitchen/food prep

Some water reported resident/patient areas

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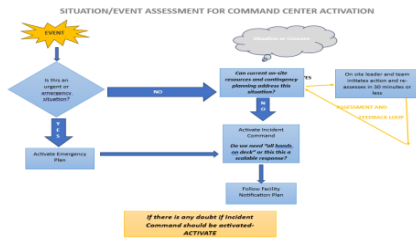
Reflective Pause

What should you do with this information?

Initial Assessments: what information do you need to gather

Would you activate your Emergency Plan and open a command center?

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5:55PM – SITUATION UPDATE



- Multiple ceiling tiles leaking in patient care and kitchen/food prep areas (water leaking on to food)
- Water is pooling in the hallways and slowly trickling into resident/ patient rooms
- Currently no one on site to shut water flow
- Facilities will arrive in 25-30 minutes



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Reflective Pause

What should you do with this information?

Would you activate your Emergency Plan and open a command center?

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Operationalize Your Response (HICS) Team

Remain flexible – the likelihood a full team is working when the command team is needed is low

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First.....Assess The Situation

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Operationalize Your Response (HICS) Team

KEY INITIAL RESPONSE NEEDS

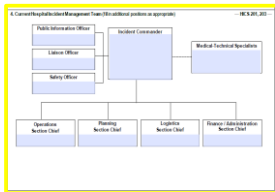
- LEADER (Incident Commander)
- MEDICAL/OPERATIONS (Operations Section Chief)
Residents/Staff/Equipment/Facility
- COMMUNICATIONS (Liaison Officer)
Internal/External communication
- SCRIBE

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Reflective Pause IAP Quick Start



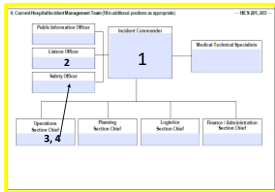
HICS INCIDENT ACTION PLAN (IAP) QUICK START			
COMBINED HICS 201-202-203-210-211A			
1. Incident/Event	2. Operational Area	3. Date	4. Time
5. Incident Summary	6. Incident Details		
7. Health and Safety Key Messages (to be completed and added to the IAP as needed)			

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IAP Quick Start



HICS INCIDENT ACTION PLAN (IAP) QUICK START			
COMBINED HICS 201-202-203-210-211A			
1. Incident/Event	2. Operational Area	3. Date	4. Time
5. Incident Summary	6. Incident Details		
7. Health and Safety Key Messages (to be completed and added to the IAP as needed)			

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Internal Communication Example

6:00pm: **All team members: at 5:40pm the command center confirmed reports of water flowing from ceiling in multiple areas of the facility. Our Facilities Team is not currently on site and is estimated to be here by 6:10pm. Due to these conditions dinner will be delayed. We will update you as soon as possible regarding meal status.**

Our next communication should be out no later than 6:30 pm. For any urgent resident concerns, the Command Center number is: 555-555-5555.

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Why initial internal communications are important

Phone will be ringing constantly:

“Did you know there’s water everywhere?!?”

“WHERE’S DINNER!?!?”

“Water is dripping on equipment!!”

“Do we need to evacuate?”

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Initial Questions for IC Team

What are our biggest safety concerns?

What are our initial priorities and what do we need to assess?
Do you need additional support (HICS roles)?

Communication- Who’s your audience? What messages are needed (internal & external)?

Who will we need to coordinate with- internally and externally?
What are we doing about dinner for our residents?

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INCIDENT UPDATE – 6:15PM



Water is flowing
 Water is still flowing
 Maintenance is on site trying to stop the water flow

Kitchen/Food Prep Area
 Dinner is not servable
 Over 1" of water on floor
 No power to kitchen/food prep area

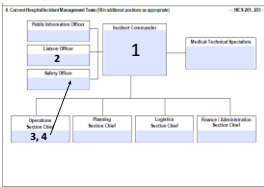
Resident/Patient Care Areas
 Water on floor in resident rooms
 Water dripping through some ceiling tiles (not on patients)

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IAP Quick Start – Reflective moment



Reflective Pause

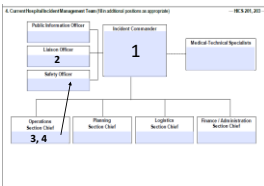
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IICS INCIDENT ACTION PLAN (IAP) QUICK START			
COMMENCED: 05/19/2024 08:00 - 08:00 (17:00)			
1. Incident Summary	2. Operational Status	3. Health and Safety	4. Key Concerns
Write a situation summary for your facility			
Write the key health and safety concerns that you would need to consider for your facility			

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IAP Quick Start – Reflective moment



Reflective Pause

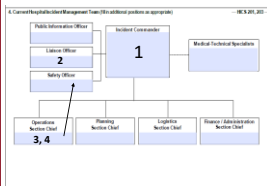
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IICS INCIDENT ACTION PLAN (IAP) QUICK START			
COMMENCED: 05/19/2024 08:00 - 08:00 (17:00)			
1. Incident Summary	2. Operational Status	3. Health and Safety	4. Key Concerns
Water Event <ul style="list-style-type: none"> Uncontrolled water flowing – can't shut it off Dinner interrupted, food is not servable, kitchen/food prep are not usable for uncertain time frame, how do we feed? Interim water cleanup Staffing situation (resident/patient care AND event response) 			
Write the key health and safety concerns that you would need to consider for your facility			

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IAP Quick Start – Reflective moment



Reflective Pause

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Water Event

- Uncontrolled water flowing – can't shut it off
- Dinner interruption, is food safe, how do we feed?
- Interim water cleanup
- Staffing scenario (resident/patient care AND response)

1. Health and Safety/Incident Commander shall activate HICS 251 and coordinate resources (personnel and equipment) and coordinate with the appropriate Metro Health department.

- Is water damaging any medical/other equipment?
- Resident/Patient/Staff anxiety regarding incident
- How do we respond and still care for patients?
- Slip/fall for staff and resident/patients?
- Ceiling tile collapse?
- Electrical concerns?
- Water shut off?
- Resident relocation/evacuation?
- Water Remediation

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Reflective Pause: Incident Objectives

8. Incident Objectives			
8a. OBJECTIVES	8b. STRATEGIES / TACTICS	8c. RESOURCES REQUIRED	8d. ASSIGNED TO
Assess areas of water flow and impact to residents/staff/equipment	Use HICS 251 Facility Assessment form and staff to assess	HICS 251- Facility Assessment form; command center ops; floor leaders	
Communication to staff, residents, leaders	Internal communications out within 15 minutes- update time frame	Who drafts messaging, who approves messaging, how is it delivered?	
Dinner for residents Food for residents	Provide dinner. Identify how long kitchen/ food prep area out. How to feed for future meals	Partner with LTC facility? PO with local restaurant? <i>Developed in advance</i>	
Identify and mitigate (address) impacts of flowing water	Contain water flow starting first with resident areas. Protect key equipment and walkways	<i>What resources and planning are in place?</i>	
Additional staff support- resident care and command center			

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INCIDENT UPDATE –6:40 PM



Water
Water leak has been repaired
Facility has normal water service

Kitchen/Food Prep Area
No Power to kitchen/food prep area
Area will not be in use for at least 3 days

Resident/Patient Care Areas
Minimal water in rooms/ hallways
Some patient care equipment damaged, might need to replace
Evacuation is not necessary

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6:50pm Leader Briefing or First Command Center Update

Your Leader on Call arrives on scene and requests a situational briefing. You are in the middle of something important and need a couple of minutes- you can't brief right away. How do you handle this?

Minutes have passed. You are now ready to brief. How would you conduct your briefing?

How do you decide who will lead the incident, you or the AOC?

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How long will the command center need to stay open?

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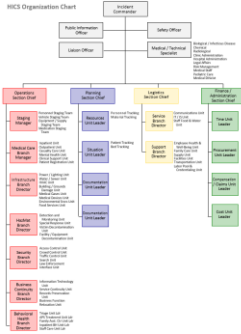
Things to consider.....

- Will it take longer than a few hours to manage this incident?
- Recovery steps and time frame?
- Additional operational period(s) needed?
 - If yes, how long should the next operational period be?
 - Command center hours/staffing?
 - Additional roles needed?
 - Where will you find other command center team members to relieve you?

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Finally....3 EP Points I will ask you to consider:

- EP will never be simple..... But we can work to make it simpler
- Urgent vs Important
- Do the right things and compliance will follow



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Questions / Discussion

- Text: 612-358-7968
- Notecards
- Raise your hand and ask live!



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Thank you!

Ken Combs

Regional Healthcare Preparedness
Coordinator
Metro Health & Medical Preparedness
Coalition
kenneth.combsii@hcmed.org
612-358-7968

Emily Moilanen

Regional Healthcare Preparedness
Coordinator
Metro Health & Medical Preparedness
Coalition
emily.moilanen@hcmed.org
763-286-5839

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