Hospital Incident Command System (HICS) Training

In September 2006, the NIMS Integration Center (NIC) and HHS released the NIMS Implementation Activities for Hospitals and Healthcare Systems - see the document in the link - http://www.fema.gov/pdf/emergency/nims/imp_act_hos_hlth.pdf. This document requires the completion of Elements 9-11 which state key personnel are to be trained in ICS 100 and 200, IS 700 and 800 (see below on page 5 for the HRSA compliance timelines). In order to be eligible for FY07 HRSA funding, the National Bioterrorism Hospital Preparedness Program (NBHPP) requires compliance with these activities. The NBHPP is focused on reports of number of personnel trained in NIMS/HICS by August 31, 2007.

The MDH has developed this HICS training guide to assist you in integrating the HICS response model and in meeting NIMS compliance for HRSA funding.


We recommend documenting a comprehensive plan that outlines a timeline for specific target personnel to have completed specific coursework at your facility; to identify which target personnel need NIMS/HICS training, refer to your Hospital Emergency Operations Plan. This guidance offers assistance in organizing competency-based HICS training plans to specific target personnel, outlines approved coursework, and suggests tips toward successful completion of the courses.

Below is a space for you to work and a template grid entitled Blank grid for your training plans to draft and assign your target personnel for HICS training. By filling in the target personnel you’ve selected to receive specific courses, you have a defined number of trainees to organize facilitation of training.

The template grid is organized by approved courses and examples of target personnel. We recommend using the template grid as a guide along with the box below entitled Sample Target Personnel.

Target Staff Requirements

HICS Awareness recommend taken by all staff (training not required for funding).

ICS-100 must be taken by staff who will occupy a command, section chief, unit leader, supervisor or branch director position in HICS during an event (i.e. those who fill a box on the organizational HICS chart). This staff might occupy a command position (e.g. serve as Incident Commander or Section Chief) at the beginning of the “immediate” period of the event but would be relieved by designated staff with additional expertise and training as the event moves further into operations during the immediate period.

ICS-200/ICS-700 must be taken by staff who will occupy a command or section chief position in HICS during an event (i.e. those who fill a box on the organizational HICS chart designated as section chiefs or command staff). This staff is intended to occupy the command and section chief positions during the immediate phase of the event – the phase where incident management / action planning is occurring.

ICS-800 must be taken by staff principally in charge of emergency management planning, mitigation, response, and recovery at the facility (NOTE: This is a very limited number of staff (e.g. the emergency management director or chair of the emergency preparedness committee at the facility). The IS-800 A National Response Plan (NRP), An Introduction course can be completed online at the FEMA Independent Study Program website http://training.fema.gov/EMIWeb/IS/crslist.asp.
Step 1:
Defining target personnel for HICS training
To define specific target personnel using the grid as a guide:
- Review the boxes below entitled Target Staff Requirements and Sample Target Personnel
- Look at your overall department, titles, or services in your facility
- Decide which specific personnel you need to train

You might use the space provided below to brainstorm which of your facility personnel need training. For further examples, you may refer to the Incident Management Team Chart in the HICS Guidebook and Education Materials developed by the California Emergency Medical Services Authority at http://www.emsa.ca.gov/hics/hics_chart.doc or HICS resources at Center for HICS Education and Training at www.hicscenter.org/.

List your target personnel here:

Sample Target Personnel
Administration – Administrators, Clinical Director, Service Directors, Medical Director, CEO, VP
Emergency Preparedness Team – Emergency Department, Emergency Response Committee, Safety Committee, Safety Director, Security Officer, Engineering
Medical Care – Physician, APRN, PA, RN, LPN, Nurse Educator, Medical Assistant, Infection Control
EMS – Hospital-based Ambulance Service Provider
Human Services Staff – Health Educator, LCSW, Behavioral health Staff, Chaplain, Human Resources, Dependent Care
Ancillary Staff – Pharmacy, Radiology, Respiratory Environmental/Facilities Management – Security, Patient Transport, Communications, Food Service
Laboratory – Medical Technologists, Medical Technicians, Phlebotomists, Clinical Laboratory Scientists, Clinical Assistants
Finance/Business Office – Business Manager, Finance Officer

Step 2:
Identifying approved courses to fulfill competencies and requirements for target personnel
See the grid below entitled HICS Training Grid with Sample Target Hospital Personnel as your guide. Use the Blank grid for your training plans to plot the personnel for specific training that you identified in Part 1 above.

Plot in your target personnel you selected in the spaces provided along the row labeled: “Target Personnel”. Then mark an “X” in the boxes under the identified personnel aligned with the approved course to be completed. See below the description of Target Staff Requirements to confirm the requirements for staff training.
Approved Courses and Notes for Successful Completion

Two (2) levels of coursework for hospital staff are outlined:

1) HICS Awareness Course = Training on the HICS response model components (Awareness level) – not required for funding

2) NIMS Coursework (ICS100HC/200HC/700/800) = Training to satisfy the NIMS Implementation Activities for Hospitals and Healthcare Systems required coursework ICS100/200/700/800 and practical application of the HICS response model (Proficiency level)

**HICS Awareness Course – not required for funding**

The Metro Region Hospital Compact developed a HICS Awareness course intended to reach all hospital personnel (curricula completed and ready in March 2007). The intent is to offer training to all staff toward awareness level competency in the HICS response model in terms of exposure to HICS terminology in preparation toward effective hospital response.

**NIMS Coursework (ICS100HC/200HC/700/800)**

**Option A – (Available April 1st – contact mn.train@health.state.mn.us for more information)**

“MERET HICS Toolkit” – This course of downloadable slides is designed to cover the content and objectives of FEMA courses: ICS 100, ICS 200 and IS 700; further, it allows the students to apply this new knowledge to pandemic influenza and tornado scenarios. Upon completion of this course students should be able to successfully complete the on-line test for the FEMA courses; ICS 100, ICS 200 and IS 700. This course was developed by the Metro Region Hospital Compact and is currently being adapted by the University of Minnesota MERET program in collaboration with focus group representatives in the Minnesota HCSP Program from small and rural hospitals focused on HICS training in their region or facility.

For certification in ICS-100HC, 200HC and ICS700 using the “MERET HICS Toolkit”, staff must complete the FEMA/EMI final exam for each of the three (3) corresponding courses (ICS-100HC, 200HC and ICS700) at [http://training.fema.gov/EMIWeb/IS/crslist.asp](http://training.fema.gov/EMIWeb/IS/crslist.asp).

The following coursework and the respective final exams are listed at [http://training.fema.gov/EMIWeb/IS/crslist.asp](http://training.fema.gov/EMIWeb/IS/crslist.asp) and are entitled:

- IS-100.HC Introduction to the Incident Command System for Healthcare/Hospitals
- IS-200.HC Applying ICS to Healthcare Organizations
- IS-700 National Incident Management System (NIMS), An Introduction
- IS-800.A National Response Plan (NRP), An Introduction

**Option B**

- IS-100.HC Introduction to the Incident Command System for Healthcare/Hospitals
- IS-200.HC Applying ICS to Healthcare Organizations
- IS-700 National Incident Management System (NIMS), An Introduction

These courses can be completed at the website [http://training.fema.gov/EMIWeb/IS/crslist.asp](http://training.fema.gov/EMIWeb/IS/crslist.asp) as another option to Option A in order to satisfy the NIMS required coursework by target hospital staff. Option A integrates more of the HICS response model in terms of exposure to and practice in use of HICS forms and terminology in preparation and training toward effective hospital response. NOTE: If utilizing the FEMA course modules, HICS materials should be integrated or facilitated where applicable. All modules should be reinforced with tabletop drills soon after completion of the didactic portion in order to facilitate practical application.

Receipt of a passing grade on the FEMA/EMI final exam qualifies as successful course completion. Online testing is recommended due to time lags with paper test processing. A print-out of the exam questions is needed while a multiple-choice answer sheet is filled out online and submitted upon
completion of the exam. Upon passing the exam, the certification is emailed to the email address entered by staff at the point of the exam section in the online course. Another option for submitting exams is for the instructor of the courses at your facility to U.S. mail in the completed exams. Students will receive certificates of successful completion via U.S. mail upon providing their individual addresses (hand-written) on a form available online. The instructor can determine the mechanism for reporting the successful completions to the appropriate person tracking training in the facility.

Students who have completed ICS 100/200 courses prior to the release of the ICS 100HC/200HC courses, do not have to complete the HIC courses.

**Competencies addressed by HICS/NIMS coursework**
The following Healthcare Personnel Emergency Preparedness Competencies from the Minnesota Department of Health BHPP Hospital Preparedness Education and Training Guidance (website: [http://www.health.state.mn.us/oep/training/bhpp/index.html](http://www.health.state.mn.us/oep/training/bhpp/index.html)) are addressed by completing the required HICS/NIMS coursework:

**Competency 1:** Demonstrate understanding of the role(s) of healthcare personnel in an emergency response.
- **Sub-Competency C:** Describe and demonstrate ability to implement the Incident Command System (ICS)/Hospital Incident Command System (HICS) as based on the National Incident Management System (NIMS)
  - Demonstrate ability to perform identified roles and responsibilities during an all hazards event
  - Describe and demonstrate ability to function within the chain of command
  - Demonstrate ability to locate and implement Job Action Sheets (JAS)
- **Sub-Competency D:** Verbalize understanding of institutional or individual role external to the organization
  - Verbalize understanding of a coordinated emergency response among the state, regional, and local levels

**Competency 2:** Identify the location and demonstrate the correct use of any equipment as it relates to identified roles and responsibilities.
- **Sub-Competency C:** Verbalize understanding of responsibility to coordinate with county/city emergency management to access and use equipment and supplies
- **Sub-Competency F:** Demonstrate ability to use communication equipment appropriately

**Competency 4:** Demonstrate effective communication within identified roles and responsibilities during a mass casualty event.
- **Sub-Competency A:** Verbalize understanding of facility communication plan
- **Sub-Competency B:** Identify available communication methods
- **Sub-Competency C:** Demonstrate ability to function within chain of notification
- **Sub-Competency D:** Demonstrate ability to establish and maintain relationship with external partners through open, ongoing communication
- **Sub-Competency F:** Demonstrate ability to use established communication system to inform personnel in a timely manner
- **Sub-Competency K:** Verbalize understanding of accurate and comprehensive data collection and documentation
- **Sub-Competency M:** Verbalize understanding of established communication system to keep public informed of situational status
- **Sub-Competency O:** Verbalize understanding and/or demonstrate role in post-event feedback and assessment

**Competency 5:** Demonstrate understanding of role in applying problem solving and flexible thinking to unusual challenges in identified roles and responsibilities.
- **Sub-Competency A:** Demonstrate ability to assess need for alternative modes of operation as identified in Competency 1, Sub-Competency E.
- **Sub-Competency C:** Verbalize importance of contributing to team efforts in addressing a mass casualty event
- **Sub-Competency D:** Verbalize importance of thinking critically in any given situation
- **Sub-Competency E:** Verbalize importance of prioritizing and organizing workload, time, materials and resources
- **Sub-Competency G:** Demonstrate ability to function within limitations of role effectively with reduced personnel
The NIC is planning on putting on their website, and on the NIMS Alert and I will send it through the list serve when we have final approval. In the meantime feel free to reference it and say it is forthcoming.

Melissa Sanders, NBHPP

301-443-0924

State, territory, tribal and local entities have additional requirements for FY07, does a hospital have to also complete those activities?

Hospitals and healthcare systems were not identified as a target audience for FY05 and ‘06 requirements. Therefore, they are in a “catch up” process for NIMS implementation. Hospitals and healthcare systems are only responsible for the 17 implementation activities posted on September 12, 2006.

Specifically for the FY07 HHS/HRSA grant cycle the following activities must be completed by the end of August 2007:

Element 7
Revise and update plans [i.e. Emergency Operations Plan (EOPs)] and standard operating procedures (SOPs) to incorporate NIMS components, principles and policies, to include planning, training, response, exercises, equipment, evaluation, and corrective actions.

Element 9
Complete IS-700: NIMS: An Introduction

Element 10
Complete IS-800.A: NRP: An Introduction

Element 11
Complete ICS 100 and ICS 200 Training or equivalent courses

The completion of the remaining activities will be continued through FY08 for implementation.

The NIMS Integration Center along with HHS will continue to coordinate with hospitals and healthcare systems to bring them inline with traditional response agencies. State, territory, tribal, and local entities should not be requiring hospitals and healthcare systems to complete any additional requirements other than the 17 implementation activities posted on September 12, 2006.
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<td>MERET HICS Toolkit</td>
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<td>X</td>
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<td>(Supervisory personnel also need 300/400)</td>
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References: 1) NIMS Integration Center (NIC), NIMS Alert: NIMS Implementation Activities for Hospitals and Healthcare systems, September 12, 2006. 2) Health resources and Services Administration, National Hospital Bioterrorism Preparedness Program, Fiscal year 2005 Continuation guidance, HRSA Announcement Number 5-U3R-05-001.
## Blank grid for your training plans

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