Instructor’s Note: This presentation is an instructor’s guide to orienting and training a group on the background and use of a measurement tool to evaluate Incident Commanders’ performance.
Agenda

- Research History
- Public Health Incident Leadership
- Performance Measurement: Behavioral Markers Tool
- Using the Behavioral Markers Tool
- Practice
In 2014, the University of Minnesota School of Public Health and the Minnesota Department of Health (MDH) were awarded a translational research grant from the CDC-funded Preparedness and Emergency Response Research Centers (PERRCs). The University of Minnesota: Simulations, Exercises, and Effective Education Preparedness and Emergency Response Research Center (U-SEEE PERRC) operates out of the School of Public Health to address the CDC priority theme “to enhance the usefulness of training”. This research grant is a continuation of a recently completed four year PERRC research grant.

The Original Research Project:
The original research grant funded a project which ran from 2008 to 2012. This research, entitled “U-SEEE: Creating High Reliability Teams for Public Health Preparedness”, examined the predictors and determinants of high reliability teams in public health emergency preparedness. It studied the effects of controller led in situ simulation training on team function, dynamics, and communications among staff responsible for public health emergency operations and coordination at the Minnesota Department of Health (MDH). The results of this study found that during critical incidents or events team communication breakdowns occurred at identifiable and predictable stages. These breakdowns appeared in recurrent patterns. Results also showed that the quality of leadership demonstrated by the Incident Commander directly affected the ability of the team to form and effectively respond to an incident. Based on this research, opportunities for improved and new types of training were identified.

The Second Research Project:
Building on the results of the previous study, this second research project focused on improving public health emergency response capacity of state and local health department staff by developing and delivering a training targeted to Public Health Incident Leadership.
Public Health Incident Leadership Training

- **Five teaching modules:**
  - Leadership
  - Communication
  - Roles, Responsibilities, and Expectations
  - Team Formation
  - Managing the Team

A literature review, key informant interviews with public health emergency preparedness leaders, and a survey of MDH employees who fill the roles of Command and General staff were completed to inform the curriculum for the Public Health Incident Leadership Training. The training is composed of five modules:

- **Leadership:** The similarities and differences of crisis leadership vs. everyday leadership when serving as an Incident Commander

- **Communication:** The role of the Incident Commander in modeling and promoting effective communication tools and strategies

- **Roles, Responsibilities, and Expectations:** The roles, responsibilities, and expectations of the Incident Commander and the Command and General Staff

- **Team Formation:** How the Incident Commander sets the tone, and orients the Incident Management Team, and monitors team performance

- **Managing the Team:** The use of objectives, the Planning P, and Incident Command System forms to manage the team
So, how do we know if the training is effective?

The curriculum was designed based on research and input from many stakeholders. However, investing six hours of time is significant, particularly for people in day-to-day leadership positions. They will want to know that the training makes a difference in how they perform their role. Their question - how do you know this is a good training - needs to be answered. And how can that be accomplished?
By measuring and testing!

Using an objective measurement tool is important.*

A baseline measurement is taken of Incident Commander performance during an exercise.

Next, the Public Health Incident Leadership Training is delivered to all Incident and Deputy Incident Commanders.

Finally, Incident Commander performance is measured again in post-training exercises.

The tool is comprised of Performance Outcomes, Elements, and Behavioral Markers. The Performance Outcomes are the framework, the Elements are the broad categories, and the Behavioral Markers are the specific actions.

*Objective measurement tools for public health emergency preparedness are few and far between. Wanting to avoid more subjective measures of evaluation such as self-assessments, researchers at MDH designed a tool to measure public health incident leadership.
The performance outcomes* describe the behaviors and actions that indicate competent leadership of an Incident Management Team.

They are:

- Team formation and direction: the Incident Commander’s ability to form a team that knows why they are there and what they need to do;

- Working environment: the Incident Commander’s role in creating and maintaining an environment conducive to an active and productive working environment;

- Roles & responsibilities: tasks & responsibilities are accomplished by the right people at the right time, an activity which is often directed by the Incident Commander;

- Relationships: the Incident Commander’s ability to promote the interconnectedness of response activities through internal and external stakeholder relationships; and

- Forward-thinking: the Incident Commander’s capacity to anticipate and plan for future response needs and issues.

*Developed using results from the literature review, interviews, and a survey.
As a starting point in the tool development, the researchers framed it by asking, “What are the components that make up these performance outcomes?” The following categories and elements were identified:

- The performance outcome “Team formation and direction” is made up of the elements orienting the team, knowledge of objectives, and clear communication.

- The performance outcome “Working environment” is comprised of keeping briefings brief, minimizing distractions, calm (demeanor of the Incident Commander), and establishing a learning environment.
The Measurement Tool

**Performance Outcomes**
- Roles & responsibilities
  - Delegation
  - ICS Knowledge
- Relationships
  - Knowledge of resources
  - Knowledge of stakeholders
- Forward-thinking
  - Keeping momentum moving forward

• The performance outcome “Roles and responsibilities” means that the Incident Commander is able to delegate and has knowledge of the Incident Command System.

• The performance outcome “Relationships” entails knowledge of resources and stakeholders both internal and external.

• The performance outcome “Forward-thinking” means that the Incident Commander is able to keep the momentum of the response moving forward.
Finally, the categories and elements were translated into actionable items and observable behaviors called behavioral markers.

There are five characteristics of a “good behavioral marker.” A good behavioral marker:

- Describes specific and observable behavior
- Demonstrates a causal relationship to performance outcomes
- Is described using domain specific language
- Uses simple language
- Describes a clear concept

The results were 33 behavioral markers representing the 16 categories/elements and 5 performance outcomes. You have a copy of the behavioral markers tool in your training binder.

The markers are divided into one time markers where the behavior is expected to be observed once during the exercise, such as the Incident Commander initiating introductions of the response team, or ongoing markers, such as using closed-loop communication throughout the exercise.

One time markers are measured using a Yes or No measurement while ongoing markers are measured using a 3-point scale where 2 equals Always, 1 equals Sometimes, and 0 equals Never.

If a marker is not observed two options are available. First, if the marker did not happen, but it should have, the measure given is either a “N” for the Yes/No markers or a “0” for the 3-point scale markers. If a marker does not happen because the marker was not applicable to the current situation, then the measure is left blank. For example, measure #14 reads: Intervenes to diminish escalating conflicts between staff members. If there are no conflicts between staff in which to intervene then the measure cannot be scored and it would be left blank.

The behavioral markers tool is a one page document with room for general or marker-specific notes on the backside.

This Tool can be used to measure effects of training on leadership performance by observing leaders pre-training, delivering the training, and then observing leaders post-training. Or, it may also be used independent of the Public Health Incident Leadership training as a means to identify specific training needs and gaps. For example, use of the tool may reveal low scores in areas of communication. This would indicate that there is a need for targeted training around communication tools and techniques.
The next slides will walk through each behavioral marker individually. We’ll start with one time markers. Under the category “Orients the Team” you will find the following behavioral markers:

- **Introduces self as Incident Commander or Manager**: the leader should introduce her/himself to the group by stating their name and role

- **Initiates introduction of ICS team members**: the leader should make sure that each person introduces themselves to the group by stating their name and role

- **Requires team members to don vests or name tags**: the leader should ensure that all Incident Management Team members have vests, name tags, or other item that signals they are part of the Incident Management Team (IMT)

- **Gives overview of incident for situational awareness**: the leader should review with the group information on the incident so everyone is on the same page

- **Verbally directs team members to job action sheets**: the leader should indicate where group members can find information on their specific ICS role
Under the category “Knowledge of Objectives” you will find these three behavioral markers:

- **Ensures the operational period is stated**: the leader either verbalizes the operational period to the team or ensures that it is stated by another IMT member

- **Ensures the incident objectives are verbalized**: the leader either verbalizes the incident objectives to the team or ensures that they are stated by another IMT member

- **Ensures the operational objectives are verbalized**: the leader either verbalizes the operational objectives to the team or ensures that they are stated by another IMT member
The category “ICS Knowledge” is made up of two behavioral markers:

- **Identifies and addresses initial gaps in staff in ICS organizational chart**: the leader recognizes unfilled roles and staffs them appropriately
- **Provides direction to staff on ICS forms**: the leader identifies which ICS forms need to be filled out and when
The following behavioral markers fall under the category “Briefings, Distractions, and Environment”:

- **Provides verbal reminders to keep briefings constrained to key information**: the leader reminds staff to keep briefings brief

- **Verbalizes to forward phones and stop checking emails during briefing**: the leader reminds staff to temporarily ignore these distractions while a briefing is being conducted

- **Verbalizes that it’s okay to ask questions or ask for help**: the leader actively encourages team to ask for help when needed
The category entitled “Calm” is measured by two behavioral markers:

- **Intervenes to diminish escalating conflicts between staff members**: the leader acts as a peacekeeper

- **Redirects team members who are off task**: the leader helps team members to “stay in their swim lane”
Under the category “Delegation and Moving Forward” you will find three markers:

- **Incident Manager/Commander delegates responsibilities when leaving EOC/DOC**: the leader designates a replacement when he or she needs to temporarily leave the emergency operations center/department operations center (such as to attend a meeting or take a break).

- **Ensures ICS team members delegate responsibilities when leaving the EOC/DOC**: the leader makes sure that team members designate a replacement when they need to temporarily leave the emergency operations center/department operations center (such as to attend a meeting or take a break).

- **References the Planning P for next steps**: the leader uses the Planning P to guide the response.
Next, we’ll move onto the ongoing markers which are measured with a 3-point scale. The category “Clear Communication” is measured by three markers:

- **Uses Closed Loop Communication**: closed loop communication is made up of three components—delivering a message, receiving a message, and confirming information.
  
  For example—Incident Commander to Planning Chief: Will you do an inventory of our supply of well water test kits? Planning Chief: Yes, I will do an inventory of the well water test kits and get results to you in one hour. Incident Commander: Thank you. I will plan on hearing the results of your inventory in one hour.

- **Clarifies information when asked**: the leader offers explanations to team members when information relayed is unclear

- **Defines acronyms and terms**: the leader uses plain language and explains any terms or acronyms that aren’t familiar to the team
The category “Environment, Calm, and Confident” is measured by three markers:

- **Controls extraneous conversations during briefings**: the leader encourages team members to focus on the briefing by quieting any outside conversations.

- **Displays calm demeanor and effectively manages own stress**: the leader can be described as in control of their own emotions.

- **Displays confidence in managing team and response/exercise**: the leader can be described as self-assured.
The category “ICS Knowledge” is measured by four markers. ICS stands for Incident Command System.

- **Utilizes subject matter expertise of ICS team and agency staff**: the leader seeks out expertise of staff inside and outside of the operations center
- **Monitors need for additional ICS staff to meet operational needs**: as the response progresses, the leader recognizes the need for additional staff and fills or adds roles
- **Assigns/delegates tasks to ICS team members**: the leader assigns work to appropriate roles
- **Ensures delegated tasks are completed**: the leader monitors workload for completion
The final category “Resources, Forward Thinking” is measured by five markers.

- **Identifies agency’s and public health’s responsibilities in the response/exercise scenario:** the leader is able to distinguish agency’s role from other response entities’ roles

- **Identifies and communicates with internal partners:** the leader recognizes and communicates with partners inside of the agency, such as environmental health, human resources, or other divisions or sections who may be needed during the response

- **Identifies and communicates with external partners:** the leader recognizes and communicates with partners outside of the agency like human services or emergency management, who may be needed during the response

- **Asks questions to facilitate discussion on short and long term objectives/goals:** the leader engages the team in continual evaluation of present and future incident and operational objectives

- **Articulates short and long term effects and consequences of the incident:** the leader engages the team in continual evaluation of present and future impact of the incident
Instructors Note: may use this time to have group familiarize themselves with the tool, ask questions about specific measures, or show film clips and have the group practice using the tool.
MINNESOTA DEPARTMENT OF HEALTH
Emergency Preparedness & Response (EPR)
Health Partnerships Division
625 North Robert Street, PO Box 64975
St. Paul, MN 55164-0975

Telephone: 651-201-5700