**Mission:** Advise the Incident Commander or Section Chief, as assigned, on issues with ethical implications.

|  |
| --- |
| Position Reports to: **Incident Commander** 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 Incident Commander on:
* Size and complexity of the incident
* Expectations of the Incident Commander
* Incident objectives
* Involvement of outside agencies, stakeholders, and organizations
* The situation, incident activities, and any special concerns
* Assume the role of Medical-Technical Specialist: Medical Ethicist
* Review this Job Action Sheet
* Put on position identification (e.g., position vest)
* Notify your usual supervisor of your assignment
 |  |  |
| **Assess the operational situation*** Evaluate key ethical issues such as standards of care, priority of care, use of limited resources, etc., and develop recommendations for addressing the issues
 |  |  |
| **Activities*** Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested
* Consult to the Incident Commander and Command Staff on matters where an ethics perspective is important to decision making
* Coordinate with the Hospital Incident Management Team (HIMT) as appropriate
 |  |  |
| **Documentation*** 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
 |  |  |
| **Communication***Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

| **Intermediate Response (2 – 12 hours)** | **Time** | **Initial** |
| --- | --- | --- |
| **Activities*** Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
* 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 medical hospital
* Address any health, medical, and safety concerns
* Address political sensitivities, when appropriate
* 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 to evaluate implemented programs or recommendations that have ethical impacts to staff, patients, visitors, and the hospital
* Meet with Medical Care Branch Director to review proposed alterations in provision of care and other clinical or administrative issues with ethical considerations
* Brief the Incident Commander and Operations Section Chief concerning potential practice issues and needed modifications and changes to the delivery of care
* Review the implications of early discharge with medical care providers
* Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital ethical needs
* Maintain regular communications with the Operations Section Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas
 |  |  |
| **Documentation*** 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
 |  |  |
| **Communication***Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

|  |  |  |
| --- | --- | --- |
| **Extended Response (greater than 12 hours)** | **Time** | **Initial** |
| **Activities*** Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
* 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
* Address any health, medical, and safety concerns
* Address political sensitivities, when appropriate
* 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 monitoring issues that have potential ethical implications and assist with identifying practice considerations
* Brief the Incident Commander and Section Chiefs on potential practice issues and recommended modifications and changes
 |  |  |
| **Documentation*** 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
 |  |  |
| **Communication***Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

|  |  |  |
| --- | --- | --- |
| **Demobilization/System Recovery** | **Time** | **Initial** |
| **Activities** * Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
* 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
* Address any health, medical, and safety concerns
* Address political sensitivities, when appropriate
* 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)
* Participate in other briefings and meetings as required
* Submit comments to the Incident Commander on lessons learned and procedural or equipment changes 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:
* Review of pertinent position activities and operational checklists
* Recommendations for procedure changes
* Accomplishments and issues
* Participate in stress management and after action briefings
 |  |  |
| **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
* Hospital Emergency Operations Plan
* Incident Specific Plans or Annexes
* Hospital ethics guidelines
* Hospital organization chart
* Hospital telephone directory
* Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication
 |