

Incident Response Guide: Wildland Fire

Mission

To ensure a safe environment for staff, patients, visitors, and the hospital when a wildland fire may or may not impact the safety and structural integrity of the hospital or availability of services; and to provide the safe continuation of care for patients, visitors, and those seeking care when a wildland fire is in the area.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as an aid in reviewing hospital plans for wildland fire response.

Objectives

- Ensure the continued safety of patients, staff, and visitors
- Ensure the continuation of patient care services during and after a wildland fire event including patient and staff evacuation if required
- Protect the physical environment when a wildland fire threatens your hospital and the region

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Receive and assess the situational status from external authorities.	
			Activate the hospital Emergency Operations Plan, including Wildland Fire Plan, Shelter-in-Place, and Evacuation Plan.	
			Activate the Hospital Command Center and applicable Hospital Incident Management Team positions.	
			Establish operational periods, objectives and a regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Determine timeline and criteria for discontinuation of nonessential services and procedures.	
			Determine the need to alter current operations to ensure the safety of patients, staff, and visitors, as well as the physical environment.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
	Public Information Officer		Monitor media outlets for updates on the incident and possible impacts on the hospital.	
			Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
			Update internet, intranet, and social media with hospital status and alteration in services.	
	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.	

	Safety Officer		Recommend safe areas for immediate shelter-in-place to protect life.	
			Assess the physical environment for potential health hazards such as smoke, ash, and debris.	
			Initiate HICS 215A to assign, direct, and ensure safety actions are adhered to and completed.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Evaluate current patient care services, hospital census, and operational considerations for next 24 hours.	
	Medical Care Branch Director		Determine possible health hazards of wildland fire.	
			Implement ambulance diversion if warranted.	
			Assess impact of wildland fire on continued outpatient services; determine need for cancellations or rescheduling.	
			Assess impact of wildland fire on home healthcare services, need to cancel visits, movement of patients to inpatient facilities, and impact on health status.	
	Infrastructure Branch Director		Monitor physical status of hospital and all buildings on campus.	
			Monitor internal air quality and impact of external fire on heating, ventilation, and air conditioning systems.	
			Maintain utilities and communications with service providers, activating alternate systems as needed.	
	Planning	Section Chief		Monitor and document situational status.
			Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander.	
			Review evacuation policy and procedure, and determine whether identified evacuation sites are feasible in consideration of wildland fire, transportation routes, and resources for movement.	

	Resources Unit Leader		Gather internal situation status including supply and equipment status, current staff and visitor census.	
	Situation Unit Leader		Gather internal situation status including patient census and bed status.	
Logistics	Section Chief		Refer to Job Action Sheet for appropriate tasks.	
	Support Branch Director		Identify the transportation needs for evacuation, and secure the needed support.	
			Evaluate current supply status; determine and document status in event planned deliveries are interrupted due to wildland fire.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Continue to monitor progress of wildland fire and potential threat to hospital and the region.	
			Continue to monitor status of fire and hospital and of outpatient and home healthcare services; authorize alterations in service delivery based on safety of patients and staff.	
			Reevaluate need to activate the Evacuation Plan if warranted.	
			Maintain contact with external authorities for up to date status of fire and progress in suppression.	
	Public Information Officer		Continue to monitor media sources for up to date information on the wildfire.	
			Establish contact with Joint Information Center for coordination of messaging to public.	
			Notify media and staff of evacuation when initiated.	
	Liaison Officer		Contact local healthcare partners and hospitals regarding status and plans to alter service or evacuate.	
	Safety Officer		Monitor status of the hospital for health and safety hazards; update safety actions as needed.	

			Assess evacuation staging sites, identify needed alterations and update HICS 215A.	
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Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Notify all clinical and support staff of evacuation order, if given, whether partial or complete.	
			Identify locations, personnel, and equipment to support evacuation of patients, staff, and visitors. Activate additional units if needed (personnel, vehicles, equipment).	
	Staging Manager		Assess staging areas for appropriate locations; confirm with Safety Officer.	
			Provide staff and equipment support to evacuation when requested.	
	Medical Care Branch Director		<p>If evacuation is required:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Prioritize areas for evacuation based on Safety Officer’s evaluation of threat to life <p>For partial (lateral or vertical) evacuation:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Prepare and assure transfer of patient records, medications, and valuables to transfer location <input type="checkbox"/> Provide patient information as appropriate <input type="checkbox"/> If evacuation is from fire or explosion, evacuation must be to a fire compartment at least two fire compartments away (horizontally or vertically) from the fire or explosion <input type="checkbox"/> Reassign personnel to assure adequate staffing in area receiving patients <p>For complete evacuation:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Prepare and assure transfer of patient records, medications, and valuables to holding or assembly area <input type="checkbox"/> Confirm transfer and timeline with accepting hospital, providing patient information as appropriate <input type="checkbox"/> Establish safe holding or assembly area to place patients, patient belongings, and staff until transferred 	

		<input type="checkbox"/> Reassign staff to accompany patients to alternate facilities to assure adequate staffing for patient care	
		Discharge patients when safe and appropriate.	
		Move patients and staff to appropriate locations.	
		Implement manual documentation procedures for patient care and incident management documentation as required.	
	Security Branch Director	Secure the hospital, restrict visitors, and limit entry of nonessential personnel.	
		Provide additional personnel to ensure security of staging areas and evacuation sites.	
	Patient Family Assistance Branch Director	Assist with notification of patients' families about the situation and information regarding likelihood of evacuation, if required.	
		Determine the need to provide shelter support for families of patients.	
Planning	Section Chief	Activate patient and materiel tracking units if the Evacuation Plan is activated.	
		Update and revise the Incident Action Plan.	
	Resources Unit Leader	Track staff and equipment.	
	Situation Unit Leader	Track patients and beds.	
	Documentation Unit Leader	Monitor complete documentation of activities, decisions, and actions.	
Logistics	Section Chief	Refer to Job Action Sheet for appropriate tasks.	
	Service Branch	Ensure ongoing communications are available at staging areas and evacuation sites.	

	Director		Provide for continuing communications systems and information technology and information systems functionality.	
	Support Branch Director		Coordinate the transportation services (ambulance, air medical services, and other transportation) with the Operations Section (Medical Care Branch) to ensure safe patient relocation, if necessary.	
			Monitor, report, follow up on, and document staff or patient injuries.	
Finance/ Administration	Section Chief		Activate policy and procedure for documentation of costs associated with event and evacuation, if required.	
	Time Unit Leader		Track hours associated with the emergency response.	
	Cost Unit Leader		Track and monitor response and hospital repair costs and expenditures.	

Extended Response (greater than 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Continue regular briefings and action planning meetings, and modify incident objectives as needed to meet current situation.	
			Update hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			If no evacuation occurred, determine when to resume normal activities and services, and prepare for demobilization and system recovery.	
			If evacuation of patients occurred, determine safe situation for repatriation.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, and families.	
			Communicate regularly with Joint Information Center to update hospital status and coordinate public information messages.	

	Liaison Officer		Maintain contact with local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, and area hospitals in accordance with local policies and procedures to relay status and critical needs, and to receive incident and community updates.	
	Safety Officer		Maintain safety of patients, staff, and families to best possible extent.	
			Communicate potentially unsafe conditions to the Incident Commander for evaluation for continuation of care or closure.	
			Conduct frequent hospital reassessment, and monitor hospital repairs.	

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		Maintain patient care services, including those provided in evacuation sites.	
			Monitor patients and visitors for adverse effects on health and for psychological stress.	
	Patient Family Assistance Branch Director		Continue to provide family notifications of evacuations, transfers, and early discharges.	
	Security Branch Director		Continue hospital security and restricted visitation.	
			Secure all evacuated areas, equipment, supplies, and medications.	
	Infrastructure Branch Director		Regularly perform hospital damage assessments.	
			Continue monitoring of air quality; heating, ventilation, and air conditioning systems; and other filtration systems for potential impact due to smoke and ash.	
Business Continuity Branch Director		If record keeping included use of paper based records, ensure all clinical information is entered into electronic medical records.		
Planning	Section Chief		Ensure that updated information and intelligence is incorporated into Incident Action Plan.	

			Ensure the Demobilization Plan is being readied.	
	Resources Unit Leader		Continue equipment and personnel tracking, including resources transferred to other hospitals or alternate care sites.	
	Situation Unit Leader		Update and maintain all situation and status boards.	
			Continue patient and bed tracking, including those transferred to other hospitals.	
	Documentation Unit Leader		Collect and collate documentation of actions, decisions, and activities.	
	Demobilization Unit Leader		Prepare for demobilization and system recovery.	
Logistics	Service Branch Director		Monitor status of information technology and information systems, communications, and impact of fire on functionality.	
			Provide food, water, and rest periods for staff.	
	Support Branch Director		Monitor the health status of staff; provide appropriate medical and behavioral health follow up.	
			Support evacuation and transfer of supplies, equipment, medications, food, and water.	
Finance/ Administration	Section Chief		Coordinate with risk management for additional insurance and documentation needs, including photographs of damages, etc.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	Incident Commander		Determine hospital status and declare termination of the incident.	
			Oversee restoration of normal hospital operations.	
			Assess if criteria for partial or complete reopening of hospital is met, and order reopening and repatriation of patients.	
			Approve the Demobilization Plan.	

	Public Information Officer		Notify families of repatriated patients or patients permanently transferred to other hospitals.	
			Conduct final media briefing and assist with updating staff, patients, families, persons seeking shelter, and others of termination of incident.	
	Liaison Officer		Communicate hospital status and termination of the incident to local Emergency Operations Center, local emergency medical services, healthcare coalition coordinator, area hospitals, corporate offices, and officials.	
			Continue monitoring of fire status and geographic impact to hospital and home healthcare services; coordinate information with Operations Section.	
	Safety Officer		Monitor and maintain a safe environment during return to normal operations.	
			Ensure applicable regulatory agencies are notified of alterations in life safety, safe workplace issues, or environment of care issues.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Repatriate evacuated patients, if applicable.	
	Medical Care Branch Director		Discontinue ambulance diversion, if applicable.	
			With Planning Section, reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
			Determine ability to resume home healthcare services, if applicable, based on geographic assessment of fire status, ability to access homes, and safety of patients, staff.	
	Security Branch Director		Maintain hospital security and traffic control.	

	Business Continuity Branch Director		Use downtime procedures as situation warrants.	
Planning	Section Chief		Finalize and distribute Demobilization Plan.	
			Conduct debriefings and 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 and Corrective Action and Improvement Plan for submission to the Incident Commander, including: <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.	
	Situation Unit Leader		Deactivate the patient and bed tracking units and provide a final report to Demobilization Unit.	
	Documentation Unit Leader		Collect, collate, file, and secure completed documentation of actions, decisions, and activities.	
		Prepare summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute as appropriate.		
	Demobilization Unit Leader		Ensure the documentation of all data, actions, and situational status is addressed and incorporated into the Demobilization Plan.	
Logistics	Section Chief		Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available.	
	Support Branch Director		Restock supplies, equipment, medications, food, and water to pre-incident inventories.	

Finance/ Administration	Section Chief		Compile summary of final response and recovery costs and expenditures, including estimated lost revenue; and submit to Planning Section Chief for inclusion in the After Action Report.	
			Contact insurance carriers to initiate reimbursement and claims procedures.	
	Cost Unit Leader		Compile summary of final response and recovery costs and expenditures including estimated lost revenues; submit to Finance/Administration Section Chief.	
	Time Unit Leader		Ensure receipt of all personnel time sheets and documentation needed for recovery of costs and lost revenue.	

Documents and Tools

Emergency Operations Plan, including:

- Wildland Fire Plan
- Evacuation Plan
- Shelter-in-Place Plan
- Patient, staff, and equipment tracking procedures
- Business Continuity Plan
- Behavioral Health Support Plan
- Alternate Care Site Plan
- Hospital Security Plan
- Discharge Policy
- Volunteer Utilization Plan
- Risk Communications 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 Checklist
- HICS 251 – Facility System Status Report
- HICS 253 – Volunteer Registration
- HICS 254 – Disaster Victim/Patient Tracking
- HICS 255 – Master Patient Evacuation Tracking

Paper forms for downtime documentation, data entry, etc.

Job Action Sheets

Hospital organization chart

Hospital and campus floor plans, maps, and evacuation routes

Television/radio/internet to monitor news

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

Hospital Incident Management Team Activation: Wildland Fire

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
Operations Section Chief				
Staging Manager		X	X	X
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director		X	X	X
Business Continuity Branch Director			X	X
Patient Family Assistance Branch Dir.		X	X	X
Planning Section Chief				
Resources Unit Leader	X	X	X	X
Situation Unit Leader	X	X	X	X
Documentation Unit Leader		X	X	X
Demobilization Unit Leader			X	X
Logistics Section Chief				
Service Branch Director		X	X	X
Support Branch Director	X	X	X	X
Finance /Administration Section Chief				
Time Unit Leader		X	X	X
Cost Unit Leader		X	X	X