

Incident Response Guide: Chemical Incident

Mission

To provide a safe environment for patients, staff, and visitors within the hospital following a chemical incident that may or may not impact the safety of the hospital or availability of services; and to provide the safe continuation of care for patients, visitors, and those seeking care post-incident.

Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart. Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- Provide safe and effective decontamination of incoming contaminated patients
- Protect patients, staff, and the hospital from contamination and safely restore normal operations
- Communicate effectively with the local Emergency Operations Center and emergency response partners

Immediate Response (0 – 2 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Receive notification of incident from local officials. Notify the emergency department of incoming casualties that are possibly contaminated.	
			Notify hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status.	
			Activate the Emergency Operations Plan, Chemical Incident Plan, Hospital Incident Management Team, Medical-Technical Specialists, and Hospital Command Center.	
			In conjunction with Medical-Technical Specialist: Chemical, determine threat to the hospital and the need for shelter-in-place or hospital evacuation.	
			Establish operational periods, incident objectives, and regular briefing schedule. Consider use of Incident Action Plan Quick Start for initial documentation of the incident.	
			Consider limiting or ceasing nonessential services.	
			Consider activation of ambulance diversion status.	
	Public Information Officer		Develop patient, staff, and community response messages to convey hospital preparations, services, and response.	
			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.	
	Liaison Officer		Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties, and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
			Contact appropriate authorities and experts to provide hospital status and request support and recommendations for chemical decontamination.	

	Safety Officer		Monitor safe activation of the Chemical Incident Plan and the Decontamination Plan.	
			Monitor safe and consistent use of appropriate personal protective equipment by staff.	
			Conduct ongoing analysis of existing response practices for health and safety issues related to patients, staff, and hospital and implement corrective actions to address; complete HICS 215A.	
	Medical-Technical Specialist: Chemical		Assist in obtaining specific information regarding chemical agent such as antidotes, treatment, decontamination procedures, etc.	
			Provide expert input in the Incident Action Planning process.	
			Assist the Incident Commander in determining the threat to the hospital and the need for shelter-in-place or hospital evacuation.	

Immediate Response (0 – 2 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Implement the Chemical Incident Plan.	
			Implement the Evacuation, Shelter-in-Place, or Hospital Abandonment Plan, as directed by the Incident Commander.	
	Medical Care Branch Director		Conduct an inpatient and outpatient census and prioritize for safe discharge or cancellation of appointments and procedures.	
			Identify evacuation priorities and transfer requirements.	
			Determine inpatient and outpatient capacity required to handle patient surge in shelter-in-place conditions.	
			Provide safe medical care to patients remaining in the hospital.	

	HazMat Branch Director	<p>Implement the hospital’s Chemical Incident Plan:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Establish triage and decontamination areas with a clear perimeter and direction on ingress and egress <input type="checkbox"/> Provide rapid triage and disposition of potentially contaminated patients, non-contaminated patients, media, family members, etc. <input type="checkbox"/> Implement staff monitoring and rotation through the decontamination area <input type="checkbox"/> Consult with Medical-Technical Specialist: Chemical, and internal and external consultants to ascertain treatment protocols <input type="checkbox"/> Relocate medications and antidotes to clinical care and decontamination areas <input type="checkbox"/> Consider the need for evidence collection 	
	Security Branch Director	<p>Activate security policy and procedure to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Secure the hospital and campus <input type="checkbox"/> Establish access and egress routes <input type="checkbox"/> Implement crowd and traffic control protocols <input type="checkbox"/> Establish and secure areas for collection of contaminated belongings and valuables 	
	Infrastructure Branch Director	As directed, implement the hospital’s Shelter-In-Place Plan, including shutdown of heating, ventilation, and air conditioning system or sealing of the hospital.	
Conduct a damage, structural integrity, and utilities assessment of the hospital.			
Monitor hospital air quality for safe occupation.			
Planning	Section Chief	Establish operational periods, incident objectives and the Incident Action Plan in collaboration with the Incident Commander.	
	Resources Unit Leader	Initiate personnel and materiel tracking.	
	Situation Unit Leader	Gather situational assessment and response data from internal and external sources.	
Initiate patient and bed tracking in collaboration with Operations Section (HICS 254–Disaster Victim/Patient Tracking).			
Logistics	Section Chief	Activate the Support Branch to provide the logistics needs of hospital staff and operations.	

	Support Branch Director		Activate Labor Pool and Credentialing Unit.	
			Initiate staff call-in systems, if instructed to do so and if it is safe for arriving staff.	
			Inventory equipment, supplies, and medications on hand and prepare to ration materiel as needed.	
			Anticipate increased need for medical and surgical supplies, medications, and equipment and take actions to obtain when possible.	
	Labor Pool and Credentialing Unit		Determine numbers and capability of onsite and call in staff along with solicited and unsolicited volunteers.	

Intermediate Response (2 – 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Review the overall impact of the ongoing incident on the hospital with Command Staff and Section Chiefs.	
			Reevaluate need to shelter-in-place versus evacuate.	
			Monitor that communications and decision making are coordinated with external agencies and area hospitals, as appropriate.	
			Direct implementation of any and all additional response plans required to address the incident.	
			Consider deploying a representative to the local Emergency Operations Center.	
	Public Information Officer		Conduct briefings to patients, staff, people seeking shelter, and media to update them on incident and hospital status.	
			Coordinate risk communication messages with the Joint Information Center, if able.	
			Assist with notification of patients' families about the incident and inform them about the likelihood of evacuation, if required.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, area hospitals, and regional medical health coordinator to relay status and critical needs and to receive community updates.	

	Safety Officer		Continue to implement and maintain safety and personal protective measures to protect patients, staff, visitors, and hospital.	
			Monitor that victim decontamination is in compliance with established decontamination practices.	
			Update HICS 215A as required.	
			Continue to monitor proper use of personal protective equipment and decontamination procedures.	
	Medical-Technical Specialist: Chemical		Support the Operations Section as needed, by coordinating information regarding specific decontamination and treatment procedures; provide direct oversight of decontamination operations as directed.	
			Continue to provide expert input into the Incident Action Planning process.	

Intermediate Response (2 – 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Monitor continuation of medical mission activities.	
	Medical Care Branch Director		Continue patient, staff, and hospital monitoring for chemical exposure, and provide appropriate follow up as required.	
			Evaluate and update staff scheduling to accommodate decontamination team support and scheduling.	
			Activate Fatality Management Plan and management of contaminated remains.	
	Infrastructure Branch Director		Continue to monitor hospital air quality.	
			Monitor impact of alterations in heating, ventilation, and air conditioning system for ability to maintain operations and comfortable environment.	
	Security Branch Director		Implement procedures for patient valuables management and evidence collection in cooperation with law enforcement.	

			Maintain hospital security, including restrictions in entry, egress, traffic, and crowd control.	
	HazMat Branch Director		Monitor decontamination response and project needs for additional staff, supplies and equipment.	
			Monitor proper wastewater and expendable materials disposal.	
	Patient Family Assistance Branch Director		Establish a patient information center in cooperation with the Liaison Officer.	
Planning	Section Chief		Revise and update Incident Action Plan, including planning for supply, staffing, and other needs.	
	Resources Unit Leader		Continue staff and equipment tracking.	
	Situation Unit Leader		Continue patient and bed equipment tracking.	
Logistics	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Service Branch Director		Provide for patient, staff, and visitor food and water needs.	
	Support Branch Director		Initiate employee monitoring for chemical exposure and provide appropriate follow up care.	
			Establish an Employee Family Care Unit, if required.	
		Continue staff call-in, if safe to do so, and provide additional staff to impacted areas.		
Finance/ Administration	Section Chief		Coordinate with Risk Management for additional insurance and documentation needs.	
	Time Unit Leader		Track the hours associated with the emergency response.	
	Procurement Unit Leader		Facilitate the procurement of needed supplies, equipment, and contractors.	
	Cost Unit Leader		Track response expenses and expenditures.	

Extended Response (greater than 12 hours)

Section	Officer	Time	Action	Initials
Command	Incident Commander		Reassess the incident objectives and Incident Action Plan; revise them as indicated by the response priorities and overall mission.	
			Continue regular briefing of Command Staff and Section Chiefs.	
			Reevaluate the hospital's ability to continue its medical mission.	
			Plan for a return to normal services in coordination with Command Staff and Section Chiefs.	
	Public Information Officer		Continue regularly scheduled briefings to media, patients, staff, families, and people seeking shelter.	
			Communicate regularly with the Joint Information Center to update hospital status and coordinate public information messages.	
			Address social media issues as warranted; use social media for messaging as situation dictates.	
	Liaison Officer		Maintain contact with local Emergency Operations Center, other area hospitals, and regional medical health coordinator to relay status and critical needs and to receive incident and community updates.	
	Safety Officer		Continue to oversee safety measures and use of personal protective equipment for staff during demobilization of decontamination response.	
	Medical-Technical Specialist: Chemical		Continue to support the Operations Section as needed by coordinating information regarding specific decontamination and treatment procedures.	
			Continue to provide expert input into the Incident Action Planning process.	
			Monitor the movement of the chemical plume (if applicable), consult with local health department and emergency management and advise the Incident Commander if the external area is safe for discontinuation of shelter-in-place.	

Extended Response (greater than 12 hours)

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		Monitor the continuation of medical mission activities, including patient care and hazardous materials (HazMat) activities.	
	Medical Care Branch Director		Continue patient monitoring for chemical exposure and provide appropriate follow up care as required.	
	Infrastructure Branch Director		Continue to monitor hospital air quality.	
			With Medical -Technical Specialist: Chemical and when shelter-in-place is suspended, conduct an external inspection of the hospital for damage and determine need for outside decontamination.	
			Continue infrastructure monitoring, maintenance, and air quality monitoring in collaboration with the Safety Officer.	
	Security Branch Director		Continue to ensure hospital security, traffic, and crowd control.	
			Monitor the enforcement of hospital policies and cooperation with local, state, and federal law enforcement agencies when interviewing patients and collecting evidence.	
HazMat Branch Director		Provide for hospital and equipment decontamination where appropriate.		
Planning	Section Chief		Update and revise the Incident Action Plan in collaboration with Command Staff and Section Chiefs.	
			Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied.	
	Situation Unit Leader		Continue to update status boards and other communication devices with latest hospital and community status.	
Logistics	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Support Branch Director		Monitor and address the health status of staff that participated in, supported, or assisted in decontamination activities.	
			Restock and repair all supplies and equipment used in the response.	

Finance/ Administration	Section Chief		Refer to the Job Action Sheet for appropriate tasks.	
	Procurement Unit Leader		With the Logistics Support Branch, facilitate the procurement of supplies, equipment, and medications for response and patient care.	
	Compensation/ Claims Unit Leader		Assess and implement risk management and claims procedures for reported staff and patient exposures or injuries.	
	Cost Unit Leader		Continue to track response costs and expenditures and prepare regular reports for the Incident Commander.	

Demobilization/System Recovery

Section	Officer	Time	Action	Initials
Command	Incident Commander		Determine the termination of event or “all clear” in collaboration with Command Staff, Section Chiefs, local law enforcement, and Hazmat officials.	
			Oversee and direct demobilization and system recovery operations with restoration of normal services.	
			Ensure that the process is mobilized to complete response documentation for submission for reimbursement.	
	Public Information Officer		Conduct final media briefing and assist with updating staff, patients, people seeking shelter, families, and others of termination of the incident.	
	Liaison Officer		Communicate the final hospital status and termination of the incident to regional medical health coordinator, local Emergency Operations Center, area hospitals, and local emergency medical services.	
	Safety Officer		Monitor the proper disposal of contaminated waste and wastewater.	
			Assist with monitoring the completion of hospital repairs and decontamination, in conjunction with the Operations Section.	
			Monitor and maintain a safe environment during the return to normal operations.	

Demobilization/System Recovery

Section	Branch/Unit	Time	Action	Initials
Operations	Section Chief		With Infrastructure Branch, monitor and manage the decontamination of the hospital.	
	Medical Care Branch Director		Coordinate patient care services returning to normal operations.	
			Reschedule canceled surgeries, procedures, and outpatient appointments.	
			Repatriate transferred patients, if applicable.	
	Infrastructure Branch Director		Restore heating, ventilation, and air conditioning systems to normal service.	
			With the Safety Officer, continue to monitor the disposal of contaminated waste and wastewater.	
			Conduct or facilitate hospital repairs and return of the hospital to normal operating conditions.	
			Complete a hospital damage report, including the progress of repairs, and estimated timelines for restoration of hospital to normal operating conditions.	
	Security Branch Director		Return entry and egress restrictions, traffic flow, and security personnel to normal services.	
	HazMat Branch Director		Ensure that all personnel, supplies, and equipment utilized in the response have been properly decontaminated and stored.	
		With Infrastructure Branch, monitor and manage the decontamination of the hospital.		
Planning	Section Chief		Finalize and distribute the Demobilization Plan.	
			Conduct debriefings and hotwash with: <ul style="list-style-type: none"> <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, describing : <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	
	Documentation Unit Leader		Collect, correlate, and archive all electronic and written documentation generated in the event response.	
			Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies.	
Logistics	Section Chief		Inventory all Hospital Command Center and hospital supplies and replenish them as necessary, appropriate, and available.	
	Support Branch Director		Initiate long term monitoring of employees exposed to chemicals and participating in decontamination or patient care activities, including provision of behavioral health services, as required.	
Finance/ Administration	Section Chief		Refer to the Job Action Sheets for appropriate tasks.	
	Compensation/ Claims Unit Leader		Contact insurance carriers to assist in documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	
	Cost Unit Leader		Compile a final response and recovery costs and expenditures and estimated lost revenues summary and submit it to Planning Section Chief for inclusion in the After Action Report.	

Documents and Tools

Emergency Operations Plan, including:

- Chemical Incident Plan
- Evacuation, Shelter-in-Place, and Hospital Abandonment Plan
- Decontamination Plan
- Surge Plan
- Triage Plan
- Patient, staff, and equipment tracking procedures
- Employee Health Monitoring and Treatment Plan
- Business Continuity Plan
- Behavioral Health Support Plan
- Alternate Care Site Plan
- Security Plan
- Fatality Management Plan
- Volunteer Utilization Plan
- Emergency Patient Registration Plan
- Risk Communication Plan
- Isolation protocols
- Interoperable Communications Plan
- Centers for Disease Control (CDC) Medical Management Guidelines for the specified chemical
- 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

Job Action Sheets

Access to hospital organization chart

Access to HazMat/Terrorism/CBRNE annexes of local Emergency Operations Plan

Hospital and campus floor plans and maps

Television/radio/internet to monitor news

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

Hospital Incident Management Team Activation: Chemical Incident

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
Medical-Technical Specialist: Chemical	X	X	X	X
Operations Section Chief				
Medical Care Branch Director	X	X	X	X
Infrastructure Branch Director	X	X	X	X
Security Branch Director	X	X	X	X
HazMat Branch Director	X	X	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
Logistics Section Chief				
Service Branch Director		X	X	X
Support Branch Director	X	X	X	X
Labor Pool & Credentialing Unit Leader	X	X	X	X
Finance /Administration Section Chief				
Time Unit Leader		X	X	X
Procurement Unit Leader		X	X	X
Compensation/Claims Unit Leader			X	X
Cost Unit Leader		X	X	X