Emergency Preparedness

EXIT

MENU

Introduction

Welcome to the introductory lesson on emergency preparedness.

As your partner, HealthStream strives to provide its customers with excellence in regulatory learning solutions. As new guidelines are continually issued by regulatory agencies, we work to update courses, as needed, in a timely manner. Since responsibility for complying with new guidelines remains with your organization, HealthStream encourages you to routinely check all relevant regulatory agencies directly for the latest updates for clinical/organizational guidelines.

If you have concerns about any aspect of the safety or quality of patient care in your organization, be aware that you may report these concerns directly to The Joint Commission.

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Course Rationale

Emergencies happen almost every day. Some emergencies are large and obvious, while others may be relatively minor. Healthcare organizations must be able to respond effectively to all emergencies.

This course will give you information about how to respond to emergencies.

You will learn about:

▷ Why healthcare organizations need to be prepared for emergencies

▷ Types of disasters

▷ How an emergency response plan helps your facility respond to emergencies

▷ The National Incident Management System (NIMS)

References 1, 2

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Course Goals

After completing this course, you should be able to:

- ▷ Identify concepts relevant to responding to a disaster
- ▷ List different types of disaster events
- ▷ Identify the parts of an emergency operations plan
- ▷ Define NIMS, as well as key components of NIMS

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Course Outline

Lesson 1 gives the course rationale, goals, and outline.

Lesson 2 discusses issues regarding basic disaster preparation.

Lesson 3 describes different types of disaster events.

Lesson 4 explains what needs to be included in an emergency operations plan and the importance of training.

Finally, lesson 5 covers the basics of NIMS.

Course Map

Lesson 1: Introduction

Lesson 2: Basic Disaster Preparation
- ▷ Disasters vs. emergencies
- ▷ Disaster response systems
- ▷ Your role

Lesson 3: Types of Disaster Events
- ▷ Natural disasters
- ▷ Technological disasters
- ▷ Industrial disasters
- ▷ Transportation disasters
- ▷ Terrorist attacks
- ▷ Chemical, biological, and radiological disasters

Lesson 4: Emergency Operations Plans
- ▷ Components of an emergency operations plan
- ▷ Importance of training

Lesson 5: NIMS
- ▷ Definition
- ▷ Components
- ▷ NIMS and your facility

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Emergency Preparedness

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Introduction

Welcome to the lesson on basic disaster preparation.

This lesson discusses differences between disasters and emergencies, and things to consider when planning for disasters. Disaster response systems and the roles of healthcare workers in these systems are also covered in this lesson.

--- Lesson Map ---

Lesson 2: Basic Disaster Preparation
- ▷ Disasters vs. emergencies
- ▷ Disaster response systems
- ▷ Your role

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Disaster vs. Emergency

Remember: Some emergencies are small, while others are major.

Very large emergencies are known as disasters.

Disasters are different from emergencies. A single organization or group can usually take care of an emergency independently, but disasters are too large and complex for a single group to manage. Disasters often require assistance from groups and organizations outside the affected community.

References 1, 2

Emergency

Single-agency response

DISASTER

Very large

Multi-agency response

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Disaster vs. Emergency

Everyday systems are usually not enough to manage a disaster.

Systems and personnel may need to be used in creative ways.

For example, disasters may have many victims. This surge may require hospital staff to take on unusual or unfamiliar tasks, such as decontamination and/or expedited privileging of healthcare providers. Patients may be placed in areas of the hospital not typically used as patient care areas, and documentation rules may be adjusted.

Disaster plans and response systems can help ensure that all of the victims get the medical care they need when they need it.

References 1, 4

DISASTER

Very large

Multi-agency response

Unfamiliar tasks for personnel

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Example of a Disaster Response System: Triage

How are systems unique in a disaster?

One example is triage. Triage is seen every day in the hospital emergency department (ED). The most severe patients are treated first, while less severe patients are asked to wait.

Triage is also necessary in a disaster; however, the everyday system of ED triage is only one component of hospital triage during disasters. Due to limited resources, inpatient beds are usually reserved for the most critically ill. Less-serious injuries and illnesses may be sent to alternative care sites (community-based clinics, public shelters, etc.), or be cared for at home. Policies and memoranda of understanding must be in place in order to optimize resource allocation.

References 3, 4

DISASTER

Very large

Multi-agency response

Unfamiliar tasks for personnel

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Example of a Disaster Response System: Surge Planning

In a disaster, there may be a sudden influx of many victims requiring medical attention. This will place a significant strain on healthcare resources, and alternative strategies are required to deal with this surge. The California Hospital Association created a checklist to help facilities develop surge plans, touching on:

▷ Usual incident-command elements

▷ Memoranda of Understanding (MOUs) with local government agencies and care facilities to accept patients or share resources

▷ Procedures for requesting temporary waivers from regulatory agencies

▷ Triage/decontamination/treatment of incoming patients

▷ Security and transportation concerns

▷ Procedures for repurposing non-clinical areas (auditoriums, conference rooms, etc.) for patient care

▷ Staffing and volunteer services

▷ Management of pharmaceutical and equipment supplies

▷ Communications

References 3-6

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Disaster Response Systems

Creating surge hospitals is one unique system used in disasters, but it is only one example of what may be required.

In an actual disaster, *many* unique systems must be used. Everyday systems are not meant to respond to a disaster.

Disaster response systems are documented in an emergency operations plan (EOP).

References 2, 7-9

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Disaster Response Systems

An EOP ensures that disaster systems are:

▷ Established ahead of time
▷ Practiced
▷ Evaluated and changed as necessary

With a proper EOP, your organization is prepared for disaster.

References 7-9

An emergency operations plan (EOP) describes who will do what, when, with what resources and by what authority — before, during, and immediately after an emergency

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The Role of Staff Members

All staff members must understand the sections of the EOP that affect their duties, and be able to describe their responsibilities under the EOP.

Staff members must know what to do when the disaster code is activated. Many lives may depend on a quick response. Delays and confusion about roles may lead to wasted resources and loss of life.

Disaster training helps ensure that staff members will be ready to provide a quick and effective response.

References 7-9

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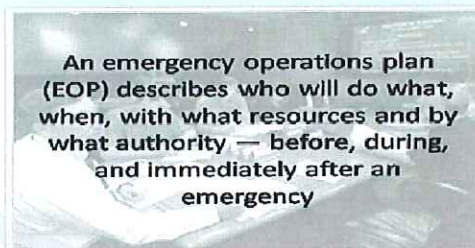
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Laws Affecting Healthcare Workers During a Disaster Response

Several legal and ethical issues arise during emergencies. Current law varies by state and sometimes this is included in an employment contract. It is important that you know your rights and responsibilities before responding to a disaster.

- Licensure – Many states have procedures for licensure recognition. If a healthcare worker does not obtain proper licensure, for any reason, this may open the person to possible civil or criminal charges. During a disaster, healthcare workers may be asked to perform tasks outside their usual licensure scope of practice. You are responsible for understanding the risks of working outside your scope of practice.
- Reemployment – Healthcare workers who leave their usual workplace to aid during disasters are not guaranteed reemployment after the disaster ends. You are responsible for making appropriate arrangements with your employer.
- Salary and wages – Depending on the status of the employee, his/her employer may or may not be obligated to pay that employee during times he/she is volunteering during a disaster.
- Leave of absence – The Family and Medical Leave Act (FMLA) and Uniformed Services Employment and Reemployment Rights Act (USERRA) provide some protection of an employee's position during disasters.

Reference 10

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Review

Choose the true statement(s):

a. Since all disasters are different, it is impossible to plan ahead for their occurrence.

b. Disasters are small enough for a single group to deal with.

c. In a disaster, healthcare staff may need to take on unusual or unfamiliar tasks.

d. Employees responding to a disaster are guaranteed their full salary during the response.

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Review

Choose the true statement(s):

a. Sinc~~e all disasters are different, it is impossible to plan ahead~~ for

Correct   CLOSE X

b. Dis~~~~

In a disaster, healthcare staff may need to take on unusual or unfamiliar tasks.

✓ c. In a~~~~ l or
unf~~~~

d. Em~~~~ ull
sala~~~~

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Summary

You have completed the lesson on basic disaster preparation.

Remember:

▷ Disasters are different from everyday emergencies.

▷ Disasters are too big for one group to deal with.

▷ When a disaster happens, healthcare organizations must go into "disaster mode." Unique systems for mass medical care must be used. These systems are documented in the emergency operations plan.

▷ The response systems described in the EOP must be created ahead of time. They must be practiced and modified as needed to reflect changes in the community.

▷ Staff members must fully understand their roles in the EOP and how to respond to disasters.

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Emergency Preparedness

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Introduction

Welcome to the lesson on types of disaster events.

This lesson describes different types of disaster events. These events include natural, technological, industrial, transportation, chemical, biological, and radiological disasters, as well as terrorist attacks.

--- Lesson Map ---

Lesson 3: Types of Disaster Events

▷ Natural disasters
▷ Technological disasters
▷ Industrial disasters
▷ Transportation disasters
▷ Terrorist attacks
▷ Chemical, biological, and radiological disasters

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Types of Disasters

Healthcare organizations must be ready to respond to a variety of disaster events, both natural and man-made.

These disasters and threats include:

▷ Natural disasters
▷ Technological disasters
▷ Industrial disasters
▷ Major transportation accidents
▷ Terrorism
▷ Biological, chemical, and radiological events

Let's take a closer look at each type of disaster.

References 1, 2
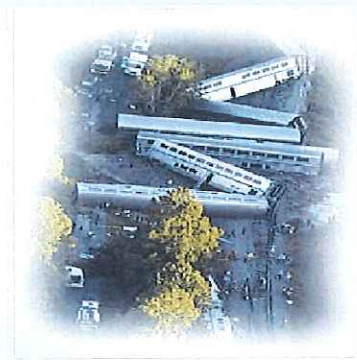
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Natural Disasters

Natural disasters include:

- ▷ Floods
- ▷ Tornadoes
- ▷ Hurricanes
- ▷ Earthquakes
- ▷ Landslides
- ▷ Snowstorms
- ▷ Tidal waves
- ▷ Wildfires

References 1, 2

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Natural Disasters

Healthcare facilities must be ready for natural disasters that may occur in their area. For example:

- ▷ Hurricanes are more likely on southern coastlines.
- ▷ Large and/or multiple tornadoes are more likely on the lower midwest plains.
- ▷ Earthquakes are more likely on the west coast.

While a particular location may be more likely to experience a given natural disaster, all locations are subject to many different types of natural disasters. For example:

- ▷ Whole towns in New Jersey were devastated by Hurricane Sandy in 2012.
- ▷ Tornadoes have been reported in every state.
- ▷ Earthquakes have occurred with magnitudes 7.7 in Missouri and 7.3 in South Carolina.

References 1, 2, 11-13

Resources with safety tips for emergencies and di asters

Centers for Disease Control and Prevention
www.emergency.cdc.gov/hazards-specific.asp

American Red Cross
www.redcross.org/prepare/disaster

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Technological Disasters

Technology and engineering continue to advance the lives of people throughout the world. And although far more people die as a result of natural disasters and wars, as the lives of people become more entwined with technology, the potential for greater disaster increases.

Healthcare facilities must be prepared for any disaster, including one in which it is also affected, such as during a widespread and sustained power outage. Backup generators must be ready to run life-sustaining medical equipment without interruption.

In addition to power outages, other technological events that could be disasters include:

▷ Computer failures and viruses
▷ Telecommunications breakdown
▷ Failures of engineering and maintenance of machines, such as chemical and nuclear facilities
▷ Failures of dam and levee construction

Reference 14

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If a power outage disabled **electricity** and **computers**, would your facility be prepared to respond?

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Emergency Preparedness

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Industrial Disasters

Industry is based on the conversion of raw materials into a finished product. In the course of this conversion, enormous amounts of hazardous materials are used or produced every day. For example, in 2011, the Environmental Protection Agency reported that 34,334,072 tons of hazardous waste material was produced by 16,447 facilities nationwide.

In addition to hazardous waste, millions of tons of raw hazardous materials are shipped to, from, and within the United States each year. This could lead to a disaster if, during any point in the manufacturing process, these materials were to spill or otherwise enter the environment.

In 2014, 300,000 residents of the Elk River Area in West Virginia were without drinking water for nearly a week after thousands of gallons of a coal-cleaning agent leaked from a storage tank. This chemical, known as MCMH, is known to cause eye and skin irritation, and has unknown long-term effects. Fortunately, few medical complaints have arisen from this spill, but it seems only a matter of time until a similar, large-scale event leads to a mass-casualty situation.

References 15-17

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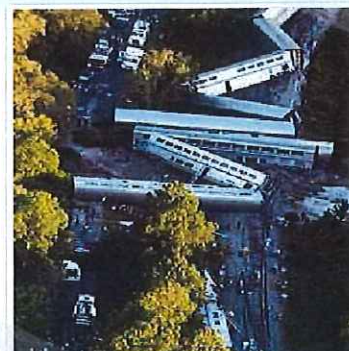
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Transportation Accidents

Transportation accidents can occur almost anywhere.

Healthcare facilities must be prepared for victims from:

- ▷ Multi-vehicle collisions
- ▷ Bus crashes
- ▷ Train wrecks
- ▷ Airplane crashes
- ▷ Bridge collapses

Reference 18

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Terrorist Attacks

The political climate of the world is unstable. Terrorist attacks in Oklahoma City, New York City, and Boston, have shown that any city is vulnerable.

Healthcare facilities must be as prepared to deal with a disaster resulting from terrorism as they are for natural or industrial disasters.

With terrorist attacks, there could be:

- ▷ Many serious physical injuries
- ▷ Mental and emotional injuries

Reference 1

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Emergency Preparedness

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Biological, Chemical, and Radiological Disasters

A terrorist attack could be:

▷ Biological
▷ Chemical
▷ Radiological

To know how to respond to this sort of attack, you must understand some basic features of agents that might be used.

Let's take a closer look on the next screens.

Reference 1

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Biological Weapons

Examples of biological weapons are:

▷ **Anthrax (inhalational)**
▷ **Botulism**
▷ **Pneumonic plague**
▷ **Cholera**
▷ **Smallpox**

Click on each agent in the list to learn more.

Reference 19

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Chemical Weapons

Examples of chemical weapons are:

▷ **Biotoxins**
▷ **Blister agents**
▷ **Blood agents**
▷ **Choking agents**
▷ **Nerve agents**
▷ **Riot control agents (tear gas)**

Click on each agent in the list to learn more. The presence of any of these agents can cause critical supply shortages, staffing concerns, and secondary contamination (particularly with nerve agents, or those known to be persistent).

Reference 20

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Radiological Exposure

Although the possibility exists of a terrorist organization obtaining a nuclear bomb similar to the bombs dropped on Japan during World War II, or a "suitcase bomb," as popularized in fiction novels, the most frequent non-military causes for the release of radiation into the environment have been

▷ Nuclear power plants
 — Three Mile Island, USA
 — Chernobyl, Ukraine
 — Fukushima, Japan
▷ Leakage from holding tanks
 — U.S. Department of Energy Weapons Site in Hanford, WA
 — Multiple sites, mostly in eastern Europe and the former Soviet Union

While low-level exposure to radiation may not produce symptoms, exposure to high levels of radiation may cause:

▷ Nausea
▷ Vomiting
▷ Diarrhea
▷ Swelling
▷ Redness of the skin

References 21, 22
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Hospital Preparedness

How many of your hospital's staff members are trained to respond to a terrorist attack? According to a Joint Commission survey, *most* facilities are training *most* of their clinicians, but significant gaps remain. Click to see how ready staff are to deal with the effects of a terrorist attack:

▷ **Staff receiving training**

▷ **Training for specific types of attacks**

How does your hospital compare?

Reference 23

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Review

Which kind of disaster should your facility be ready for?

a. Natural disasters
b. Industrial disasters
c. Transportation disasters
d. All of the above

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Review

Which kind of disaster should your facility be ready for?

a. Natural disasters
b. Industrial disasters
c. Transportation disasters
✓ d. All of the above

Correct   CLOSE X

Natural, industrial, and transportation disasters can strike anywhere at any time.

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Emergency Preparedness

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Summary

You have completed the lesson on types of disasters.

Remember, types of disasters include:

▷ Natural disasters

▷ Technological disasters

▷ Industrial and engineering disasters

▷ Major transportation accidents

▷ Terrorism

▷ Biological, chemical, and radiological disasters

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Introduction

Welcome to the lesson on emergency operations plans.

This lesson explains what needs to be included in an emergency operations plan and the importance of training.

──────── **Lesson Map** ────────

Lesson 4: Emergency Operations Plans

▷ Components of an emergency operations plan
▷ Importance of training

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Your Emergency Operations Plan

If a disaster strikes, small, rural, and suburban communities may be on their own for 24–72 hours before regional, state, and/or federal help arrives. The local community will be in charge of the initial management of the disaster.

To prepare for disaster, your facility should:

▷ Have a written emergency operations plan (EOP)

▷ Teach staff members about the plan

▷ Train employees to respond to a disaster

Planning and training are essential. The Joint Commission also now requires hospitals to consider input from all levels of staff in order to more accurately identify deficiencies and improve staff coordination and compliance.

"Disaster mode" goes more smoothly when staff members have practiced the EOP ahead of time.

References 7-9

Planning is Essential.

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Emergency Preparedness

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Your Emergency Operations Plan (2)

Remember, the EOP guides decision making:

▷ At the onset of an emergency

▷ As the emergency evolves

The EOP must address response procedures that are:

▷ Applicable to the hospital's likely emergencies

▷ Adaptable to unforeseen disasters

References 7-9

Emergency Operations Plan

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Management of Emergencies

The Joint Commission requires hospitals to plan how emergencies will be managed. Hospital leaders must identify one individual responsible for overall emergency management planning. Management plans must then be documented in the EOP.

Management involves:

▷ **Mitigation**
▷ **Preparedness**
▷ **Response**
▷ **Recovery**

Click on each phase for more information.

A good EOP should address each of these phases.

References 7-9

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Incident Command Team

The EOP should establish an incident command structure.

The incident command team coordinates the hospital's response to ensure:

▷ Each part of the process blends smoothly to the next
▷ Each team member's role supports the entire team
▷ No necessary roles are left out
▷ Roles do not overlap unless necessary
▷ All efforts are coordinated with local first responders (including law enforcement, fire officials, and public safety offices) and other healthcare institutions

References 7-9
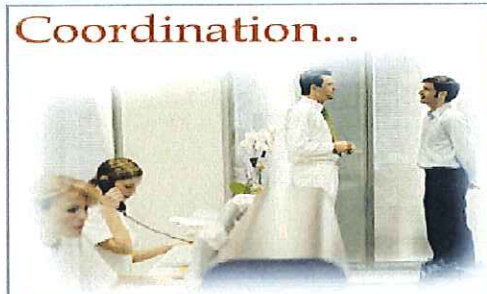
Coordination...

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Incident Command Team Members

When a disaster happens, the designated incident commander will report at a specific location (the incident command center). The incident commander will then determine whether other members of the incident command team are necessary to address the emergency.

The incident command team can include representatives from:

▷ Emergency medical services
▷ Administration
▷ Nursing
▷ Security
▷ Hospitality
▷ Community relations
▷ Chaplains
▷ Ancillary services
▷ Housekeeping

References 7-9

Every discipline within your facility should be represented on the incident command team!

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Incident Commander

The incident commander directly oversees the initial emergency response, although he/she is not necessarily the designated emergency management leader.

During a disaster, the incident commander:

▷ Stays in contact with the facility's emergency department

▷ Gives tasks to other team members

▷ Receives input and recommendations

The incident commander must receive information from, and disseminate information to, all members of the healthcare team. Other team members assist in this effort to coordinate the facility's response.

References 7-9

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Key Elements of an EOP

The Joint Commission requires a hospital's EOP to center on six key elements:

▷ Communication

▷ Resources and assets

▷ Safety and security

▷ Staff responsibilities

▷ Utilities

▷ Clinical activities

Let's take a closer look at each.

Reference 9

The Joint Commission Requirements:

Communication
Resources and assets
Safety and security
Staff responsibilities
Utilities
Clinical activities

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Communication

Good communication is essential within the hospital. It is also essential between the hospital and:

- ▷ External authorities
- ▷ Patients' families
- ▷ Community members
- ▷ The media
- ▷ Suppliers
- ▷ Other healthcare organizations
- ▷ Alternative care sites

In a disaster, land and cellular phone lines may not be usable. All facilities should have backup two-way radios for good communication.

Without good communication, there may be dangerous delays or wasted efforts.

In some cases, employees may have to act as runners to relay information within your facility.

An EOP must establish how communication will be maintained.

References 7-9

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Resources

Even during a disaster, babies are born and other patients admitted prior to the emergency still need care. Hospitals must plan how to care for their current patients.

An EOP should include plans for how to manage:

- ▷ **Medications**
- ▷ **Medical supplies**
- ▷ **Nonmedical supplies**
- ▷ **Personnel**
- ▷ **The facility**

Click on each for additional information.

An example of how human and other resources may be managed during a disaster is presented on the next screens.

References 7-9

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Managing Personnel: Example

When a disaster code is activated, all personnel should stand ready for instructions.

Non-essential staff members may be sent to a personnel pool. These workers may be given tasks to help deal with the disaster. The incident command team is in charge of deciding these tasks.

A core group of workers must continue with their regular tasks.

The command team will want to know the number of staff members in the personnel pool. The team may decide that more staff should be called in.

However, more is not always better.

Extra people can make communication and coordination even more difficult.

References 7-9

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Emergency Preparedness

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Managing Other Resources: Example

The incident command team needs to know how many staff members are available.

The team also needs to find out about other resources.

They must find out:

- ▷ How many empty beds are available
- ▷ How many operating rooms are available
- ▷ Medical supply inventory
- ▷ Medical device inventory
- ▷ Whether there are enough security personnel
- ▷ Whether there are enough areas for triage

Personnel should work quickly to unload the ED. It is important to ask:

- ▷ How can we get the patients already in the ED out?
- ▷ How can we open up inpatient rooms?

References 7-9

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Safety and Security

Hospitals must keep patients safe and secure during an emergency.

Security must control:

▷ Movement of people into and out of the hospital

▷ Movement of people in the hospital

▷ Traffic in and around the hospital

The EOP should state:

▷ The roles of community service agencies such as the police and national guard

▷ How hospital security will coordinate with community services

▷ How hazardous materials and wastes will be managed

▷ The means for decontamination, if needed

The command team will be responsible for deciding where to send security officers.

References 7-9

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Emergency Preparedness

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Security During a Disaster: The Public and the Press

Hospitals must be prepared to deal with the press and the public.

Disasters are news. Relatives and friends will want to know about their loved ones.

The EOP should include how to:

▷ Deal with the press

▷ Respond to calls from worried loved ones

The public information officer should deal with the public. This will allow the incident commander to stay focused on the event and not the media.

References 7-9

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Staff Responsibilities

The EOP should define staff roles. Staff should be trained for these roles. They should be prepared to respond to changing conditions during an emergency.

The EOP should also describe how staff assigned to specific areas will be identified.

References 7-9

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Utilities Management

During an emergency, a hospital needs:
- Power
- Potable water
- Ventilation
- Fuel

These utilities cannot be disrupted. The EOP must identify how to provide:
- Electricity
- Water for drinking and patient care
- Water for equipment
- Water for sanitation
- Fuel for building operations or transport
- Other essential utility needs

The Joint Commission requires facilities to evaluate their ability to sustain these supplies and utilities for 96 hours. If a facility cannot be self-sustaining for 96 hours, contingencies (e.g. closing sections/buildings, rationing, evacuation) must be developed and written into the EOP.

References 7-9
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Patient Clinical and Support Activities

The EOP must address how patients will be cared for during the emergency response.

This includes:

▷ Where triaging areas will be

▷ How patient scheduling and admission will be handled

▷ How personal hygiene and sanitation needs will be met

▷ How mental health needs will be met

▷ How clinical information will be documented and tracked

▷ When and how discharge or transfer will take place

▷ When evacuation should be considered

▷ How mortuary services will be managed

▷ How an increased number of vulnerable patients will be cared for

▷ How patient assessment and treatment will be handled

References 7-9

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Practice, Practice, Practice!

A written plan alone cannot prepare a facility for disasters.

Regular training is essential. Disaster drills should be held regularly.

▷ The Joint Commission requires a hospital to activate its EOP two times per year.

▷ Emergency procedures may be incorporated into routine protocols.

This gives staff additional "training" on emergency response.

References 7-9

Jim Gathany/CDC

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Review

Phase of Emergency Management	
Mitigation	
Preparedness	
Response	
Recover	

Responding to disaster as it unfolds

Collecting emergency supplies and training for disaster ahead of time

Restoring normal services and operations

Planning to reduce the effects of a disaster

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Emergency Preparedness

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Review

Phase of Emergency Management	
Mitigation	Planning to reduce the effects of a disaster
Preparedness	Collecting emergency supplies and training for disaster ahead of time
Response	Responding to disaster as it unfolds
Recover	Restoring normal services and operations

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Emergency Preparedness

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Summary

You have completed the lesson on emergency response plans.

Remember:

▷ Management of an emergency includes mitigation, preparedness, response, and recovery.

▷ A good EOP addresses six critical elements of emergency management: communication, resources, safety and security, staff responsibility, utilities management, patient clinical and support activities.

▷ Practice the EOP. Practice is the only way to be ready when a real disaster happens.

Important: This is an overview course. Ask your supervisor for more specific information about your facility's emergency operations plan.

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Emergency Preparedness

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Introduction

Welcome to the lesson on NIMS.

This lesson covers the basics of the National Incident Management System (NIMS). This includes the components of NIMS and how your organization can be prepared to manage resources in an emergency.

Reference 1

Lesson Map

Lesson 5: NIMS

▷ Definition
▷ Components
▷ NIMS and your facility

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Emergency Preparedness

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NIMS

Remember: Some emergencies are small. Other emergencies are large. Very large emergencies are disasters.

When a disaster happens, different organizations need to be able to work together effectively to respond effectively.

The National Incident Management System (NIMS) is the U.S. government plan to establish compatibility between national and local disaster management teams.

Reference 1

Recent events in the United States have highlighted the need for a coordinated response to emergencies and disasters.

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Emergency Preparedness

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Components of NIMS

NIMS has several parts.

These are:

- ▷ Command and management
- ▷ Preparedness
- ▷ Resource management
- ▷ Communications and information management
- ▷ Supporting technologies
- ▷ Ongoing management and maintenance

On the following screens, let's take a brief look at each of these.

Reference 1

National Incident Management System (NIMS):

Command and management
Preparedness
Resource management
Communications and information management
Supporting technologies
Ongoing management and maintenance

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Emergency Preparedness

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NIMS Components: Command and Management

NIMS standard command and management systems are:

▷ **The Incident Command System (ICS)**
▷ **The Multiagency Coordination System**
▷ **The Joint Information System**

Click on each to learn more.

Reference 24

Emergency Preparedness

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NIMS Components: Preparedness

To respond effectively to an incident, organizations must be prepared.

Preparedness is ongoing.

Preparedness activities are:

▷ Planning
▷ Training and exercises
▷ Making sure workers are qualified and/or certified
▷ Making sure the appropriate equipment is on hand
▷ Setting up agreements with other organizations to help one another in an emergency

Reference 25

Be prepared!
✓ Plan.
✓ Train.
✓ Certify personnel.
✓ Certify equipment.
✓ Agree on mutual aid.

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NIMS Components: Resource Management

Organizations must be prepared to manage resources in an emergency.

This requires standard systems for:

- ▷ Describing resources
- ▷ Taking inventory of resources
- ▷ Getting resources ready for use
- ▷ Sending out resources to where they are needed
- ▷ Tracking resources
- ▷ Restocking or recovering resources when the incident has been resolved

Reference 26

Remember!
Resource can include:

- ■ Facilities
- ■ Equipment
- ■ Personnel
- ■ Procedures
- ■ Communications

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NIMS Components: Communications and Information Management

An effective response to emergencies requires effective communication.

Both within and across organizations, there must be effective:

- ▷ Communication processes
- ▷ Communication procedures
- ▷ Communication systems

Information should be managed efficiently in a standard way. A Joint Information System coordinates information to ensure timely, accurate, accessible, and consistent messaging.

This improves incident response by improving the information that responders have when they make decisions.

Reference 27

A CDC hurricane Katrina planning meeting

CDC

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NIMS Components: Supporting Technologies

Technology can improve the response to emergencies.

Examples of important technologies are systems for:

▷ Communicating data

▷ Communication between people

▷ Recordkeeping and tracking resources

▷ Displaying key data

Reference 1

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NIMS Components: Ongoing Management and Maintenance

The NIMS Integration Center (NIC) is responsible for reviewing and improving NIMS on a long-term basis.

NIC works with appropriate organizations to continually review and update standards as necessary. NIC encourages the voluntary adoption of these standards as a means to establish compatibility between national and local disaster management teams.

Reference 28

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NIMS and Your Facility

How does your facility's emergency response plan compare to the components of NIMS?

Your facility needs to be able to work within the NIMS structure. This will help your facility to do its part in responding to disasters that are too big for one group to handle.

Reference 1

NIMS provides a structure to support a cooperative and coordinated effort among emergency responders!

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Emergency Preparedness

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Review

Effective incident response requires standard systems for:

a. Tracking resources
b. Getting resources ready to use
c. Sending out resources to where they are needed
d. All of the above

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Emergency Preparedness

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Review

Effective incident response requires standard systems for:

a. Tracking resources
b. Get
c. Ser
d. All

Correct   CLOSE X

Effective incident response requires standard systems for all of these actions.

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Emergency Preparedness

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Summary

You have completed the lesson on NIMS.

Remember:

▷ NIMS is the U.S. government plan for making sure that all emergency responders are ready to work together.

▷ NIMS has several parts.

▷ Your facility needs to be able to work within the NIMS structure. This will help you do your part in responding to disasters that are too big for one group to handle.

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