

ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 17 March 2022

Response Date: 22 March 2022

Type of TA Request: Complex

Request:

The requestor asked ASPR TRACIE for information or resources related to a Health Equity, Diversity & Inclusion (HEDI) job action sheet (JAS) for the hospital Incident Command System (ICS).

Response:

The ASPR TRACIE Team reviewed existing materials in our resource library, namely our [Disasters and Healthcare Disparity Topic Collection](#). We also conducted a search online for relevant materials and reached out to our ASPR TRACIE Subject Matter Expert Cadre (SME) members. Section I of this document includes comments from SMEs. Section II of this document includes resources gathered that may be helpful to this request. Section III provides a DRAFT HEDI JAS that was developed by our SMEs. The ASPR TRACIE Team also connected the requestor with an SME for one-on-one consultation.

I. ASPR TRACIE SME Cadre Member Comments

Please note: These are direct quotes or paraphrased comments from emails and other correspondence provided by ASPR TRACIE SME Cadre members in response to this specific request. They do not necessarily express the views of ASPR or ASPR TRACIE.

- A position of this kind would be an unusual incident management team member for many situations. That said, if needed, they most likely would be considered a SME. Hence, they fit into the Medical Technical Specialist role of consultant and may not necessarily require a separate JAS.

II. Select Relevant Resources

Goralnick, E., Serino, R., and Clark, C. (2021). [Equity and Disasters: Reframing Incident Command Systems](#). (Online version is first page only. Contact [ASPR TRACIE](#) to request full text.) American Journal of Public Health. 111(5):844-848.

In this editorial, the authors discuss why a “structural change” is needed in hospital ICS guidelines to ensure inclusion of an Equity Officer and SMEs in health care equity. They discuss lessons learned from their hospital, which established a “diversity, equity and community health response team” during the COVID-19 pandemic.

Institute for Healthcare Improvement. (2021). [How to Address Equity as Part of COVID-19 Incident Command](#).

This blog post describes how Brigham and Women’s Hospital (part of Mass General Brigham) added an Equity Committee to their COVID-19 Incident Command Team to address inequities intensified by the pandemic. It includes a flowchart illustrating a structure for integration of equity into incident command teams and summarizes risks to equity and lessons learned.

The Bay Area Regional Health Inequities Initiative (BARHII) and The Public Health Alliance of Southern California (The Alliance). (2020). [Embedding Equity into Emergency Operations: Strategies for Local Health Departments During COVID-19 & Beyond](#). Public Health Alliance of Southern California.

This resource was developed for health departments in California to provide them with “practical strategies for integrating a robust equity response” into their emergency planning and disaster response. It includes local and national case studies, best practice recommendations, and other resources in support of the strategies, which may be adapted by other jurisdictions.

University of Minnesota, National Resource Center for Refugees, Immigrants, and Migrants (NRC-RIM). (2021). [Embedding Equity throughout the COVID-19 Response Organizational Structure](#).

This resource describes how the Minnesota Department of Health (MDH) proactively incorporated equity considerations into its Incident Command System (ICS) during the response to COVID-19. The placement of equity-focused staff within the MDH ICS, and position descriptions, are included.

III. DRAFT HEDI JAS

HEALTH EQUITY, DIVERSITY, INCLUSION TECHNICAL SPECIALIST

Site/Location:	_____
Position Assigned to:	_____
Job Shift(s):	_____
You Report to:	Incident Commander or Planning Section Chief
You Supervise:	No direct reports

Mission: Ensure adequate identification of at-risk populations, specific risks, and response plans that address access, trust, and equity within the facility and community. Review the ongoing response and recovery strategies and tactics for equity and access issues. As a technical specialist, you have broad ability to support incident command, operations, public information, liaison entities, and planning to assure that the needs of all affected communities and persons are considered and adequately reflected in the response and recovery.

Equipment Phone access, and computer access with Internet connectivity.

Qualifications: Familiarity with Incident Management principles as well as facility and community non-majority groups and issues. Ideally, background in community outreach to at-risk communities affected by the incident and familiarity with key non-majority groups in the community and cultural, religious, and health belief practices.

Physical Requirements: Able to work extended shifts in a variety of work settings

- Immediate
- ___ Receive appointment from the Incident Commander.
 - ___ Read this entire Job Action Sheet and review the Situation Report or receive direct situational briefing from the Incident Commander.
 - ___ Confirm with the Incident Commander any specific actions/issues to address or liaisons to establish based on the event.
 - ___ Act as a resource for any health access or equity concerns throughout the response.
 - ___ Establish briefing schedule with the Operations Section Chief, Planning Section Chief, and Liaison Officer.
 - ___ Document communications during your shift.
- Intermediate
- ___ Based on the incident, identify specific community groups at risk for inequitable access to resources, information, or likely to distrust the community and healthcare response.
 - ___ Assist the Liaison Officer in identifying community liaisons with at-risk groups that may provide insight into current issues and avenues for education about the response and available resources.

- _____ Assist the Planning Section Chief in reviewing the Incident Action Plan for potential equity issues as well as advising on potential strategies and tactics to include that can improve access to information and medical care.
- _____ Assist the Public Information Officer in developing culturally appropriate, issue-appropriate talking points for use by the facility as well as by trusted members of the at-risk community groups.
- _____ Meet with Labor Pool Unit Leader and affected unit supervisors to determine any necessary staff-based education based on the at-risk populations affected and identify any potential problem areas or issues.
- _____ Participate in meetings as requested by the Incident Commander or Section Chiefs.

Extended

- _____ In collaboration with the Public Information Officer and Liaison Officer, monitor social media and local and national media for equity and access issues. Work with Planning Section Chief to determine facility strategies to address these issues. Work with the Liaison Officer to support risk communications and interventions to the at-risk population.
- _____ Determine specific issues for the at-risk groups as well as potential solutions.
- _____ Advocate with Incident Command and Planning Section for resources, strategies, and tactics to address deficits that may impair timely and appropriate care for the impacted community.
- _____ Develop talking points on religious and cultural practices for staff as appropriate to the incident.

Wrap Up

- _____ Work with the Behavioral Health Branch Director to determine current and ongoing resources and solutions related to mental/behavioral health issues experienced by staff.
- _____ Identify community-based issues and potential recovery/mitigation solutions for inclusion in after-action analysis and future work plans.
- _____ Confer with Section Chiefs and line employees to identify any staff or systems issues within the facility that may need modification to improve access, equity, or service to at-risk populations.
- _____ Join Command Staff in a post incident internal debriefing.
- _____ Assist with post event report development, as needed including after-action reports and corrective action plans.