

Grand Valley State University
Office of the Vice Provost for Health

Alternate Care Site
Implementation Plan for the
Cook-DeVos Health Sciences Building

Current as of 2012

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1. Introduction

1.1 Overview

The Alternate Care Site (ACS) is designed to provide essentially one level of care equivalent to general medical inpatient care. When implemented, the ACS will concentrate on providing agent-specific and ongoing supportive care therapy (i.e., antibiotic therapy, hydration, bronchodilators, and pain management) while Spectrum Health Hospital will focus on the treatment of critically ill patients. The ACS therefore, will not have the capability to provide advanced airway management (i.e., intubation and ventilator support), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), Advanced Trauma Life Support (ATLS), or Neonatal Advanced Life Support (NALS). Patients requiring an advanced level of care (i.e., critical/intensive care-level support) will be transferred to the closest hospital if bed space is available.

1.2 Large Scale Disaster Event

In the event that Spectrum Health Hospital is unable to accommodate the number of individuals seeking medical care, the Cook DeVos Health Sciences (CHS) building will be opened upon approval from the State and Region 6 as an ACS. In the event that CHS opens as an ACS, CHS will be closed to all academic, research and businesses with the exception of external businesses renting space within CHS including the Bagel Beanery. The ACS will consist of 250 beds max divided into five 50 bed subunits.

1.3 Organization & Implementation

The organization of the command and control structure for the ACS was locally determined and fits into the existing local emergency command structure. The ACS will be an extension of Spectrum Health Hospital. If deemed necessary, the Spectrum Health's Emergency Preparedness Director will execute the process to establish an ACS at CHS.

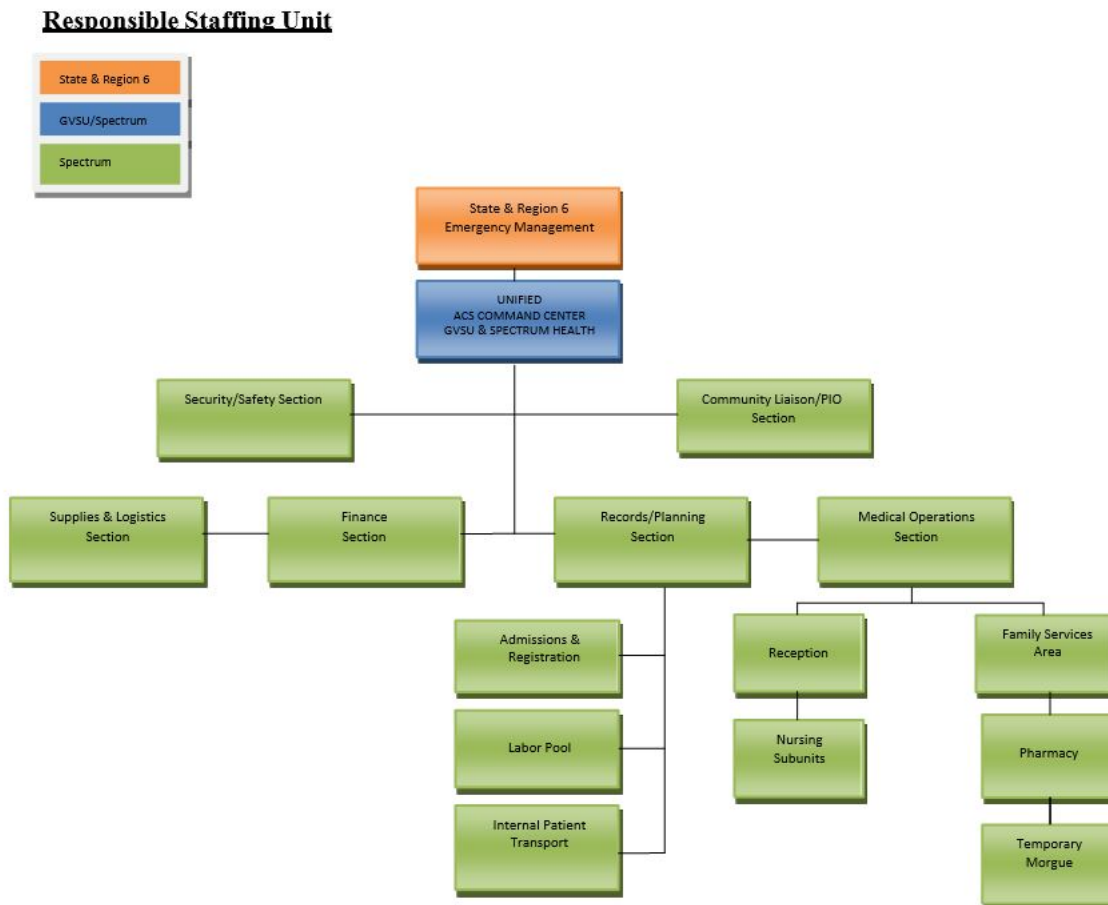
1. Spectrum Health's Emergency Preparedness Director will contact Kent County Emergency Operations Center (KC-EOC) and the Regional Medical Coordination Center (R6MCC) to request permission to surge outside of the hospital.
2. After approval from the State to KC-EOC and R6MCC, Spectrum's Emergency Preparedness Director will contact Grand Valley State University's (GVSU) Vice Provost for Health. If the Vice Provost for Health is unavailable the Associate Vice President of Academic Affairs will be notified. Spectrum Health's Emergency Preparedness Director will indicate the nature of the disaster event and request CHS open as an ACS.
3. If CHS is able to open as an ACS Spectrum Health's Emergency Preparedness Director will request regional ACS supplies through the R6MCC to be delivered to GVSU CHS loading dock and lower level parking area.
4. The GVSU ACS Implementation Kit will be retrieved from storage closet CHS 503.
5. Spectrum Health's Emergency Preparedness Director or designee in collaboration with the Vice Provost for Health or the Vice President of Academic Affairs will either assume or assign the designated job action sheet for the following positions to Spectrum Health, GVSU faculty/staff or community volunteers:
 - A. ACS Spectrum Administrator
 - B. ACS GVSU Administrator
 - C. Communication Section Director
 - D. Security & Safety Section Director
 - E. Community Liaison Section Director
 - F. Finance Section Director
 - G. Supplies and Logistics Section Director

Each position will require a minimum of two people assigned to the position to allow for continuous coverage during the operation of the ACS (See Appendix L for list of GVSU F/S identified to possibly fill specific positions). To ensure proper credentials, national liability coverage and reimbursement for ACS activities all ACS participants will be required to be registered with the Michigan Volunteer Registry. Those willing to volunteer that have not registered with the Michigan Volunteer Registry will be required to do so prior to any participation within the ACS. As a part of the preplanning activities a letter will be sent to each health professional student upon entry into the GVSU Health Compliance Program and to all GVSU Health Professional faculty/staff annually every September by the GVSU Disaster Response Team inviting faculty and staff to consider registering as a Michigan Volunteer, see Appendix A.

6. The Vice Provost for Health or the Vice President of Academic Affairs will request Spectrum's Health Emergency Preparedness Director to name the Spectrum Health Physician(s) assigned as the ACS Medical Operations Section Director and to name the Spectrum Health Staff member(s) assigned as the ACS Records/Planning Section Director, Security & Safety Section Director, Supplies & Logistics Section Director and Finance Section Director.
7. In the situation when there is not enough Spectrum Health staff available to be assign all of the Section Director positions, pre-registered and properly credentialed Michigan volunteers (which may include GVSU F/S) will be assigned by one of the following individuals based by collaborative decision dependent on availability status: Spectrum Health Emergency Preparedness Director or designee and the GVSU Vice Provost for Health or GVSU Vice President of Academic Affairs.
8. All units within the Records/Planning and Medical Operations Sections will be staffed with pre-registered and properly credentialed Michigan volunteers who may also be GVSU or Spectrum Health employees.

1.4 ACS Organization Command Chart

2.



Alternate Care Site Sections – The sections are responsible for all tactical incident operations including subordinate branches and divisions. All section Administrators and Directors must have completed all four NIMS Courses (IS100, IS200, IS 700 & IS 800).

2.1 Spectrum Health Alternate Care Site Administrator

Qualifications: This position of authority must be a healthcare administrator, nurse, or physician executive with knowledge and expertise in hospital operations.

Duties:

The ACS Administrator is responsible for the collaborative command and control functions of the entire ACS including proper execution of the ACS Plan. Additional responsibilities include executing all policies and procedures. This individual is responsible for the flow of information out of the ACS. The ACS Administrator directly oversees the Communications Section, Security/Safety Section, Community Liaison Section, Records/Planning, Medical Operations, Supply/Logistics and the Finance Sections, which are described below.

2.2 GVSU Alternate Care Site Administrator

Qualifications: This position of authority must be a GVSU administrative executive with knowledge and expertise in GVSU operations.

Duties:

The ACS Administrator is responsible for the collaborative command and control functions of the entire ACS including proper execution of the ACS Plan. Notifying GVSU Academic Affairs with the need to cancel or reschedule classes at CHS will be the direct responsibility of this administrator. It will be the responsibility of GVSU Academic Affairs to manage the rescheduling of classes and sending notification to faculty and students.

Added responsibilities include accommodating the needs of the ACS and keeping GVSU officials apprised of the ACS operational status. This individual is also responsible for setting up the physical command center and serving as the POC (Point of Command) in the absence of the Spectrum ACS Administrator.

2.3 Communications Section (CS) Director

Qualifications. This director should have some knowledge of Spectrum and GVSU emergency operations, including the knowledge required to set up voice and data networks internally and externally.

Duties. The Communications Director is responsible for setting up all communications within the ACS, beginning with the CS. Responsibilities include establishing external communications with emphasis on the community's EOC (Emergency Operations Center), supporting Hospital Command Center (HCC), and the Casualty Relocation Unit (CRU). This individual is also responsible for setting up the physical command center and serving as the POC (Point of Command) in the absence of the GVSU ACS Administrator.

A communications specialist assists the Communications Director.

The CS located within the ACS Command Center will be established as the hub of administrative activity of the ACS. The function of the ACS's CS is to maintain an activity log that documents all activities, including bed status reports, operational problems, and similar items. Representatives (Section Directors) from the other operating sections of the ACS will have a desk within the CS to facilitate communication and coordination of all actions. The Casualty Relocation Unit (CRU), also a MEMS (Modular Emergency Medical System) component, will maintain its dispatch office within the ACS's CS using CRU internal communication while fully coordinating all patient transports with the ACS staff.

Communication is the most crucial function of the CS because it is the hub of incoming and outgoing information. The ACS Spectrum Administrator maintains command and control from the CS with the assistance of the Communications Director. It is critical that the CS has a dedicated telephone and communication system to receive and transmit Hospital Command Center and supporting hospital requests. Telephones need to be available in all offices, staff workstations, administrative areas, and nursing subunits. The use of multifunction, wireless communication devices should be considered if feasible.

Public telephones will need to be placed in the designated waiting areas; but if not feasible, signs (in English and other languages) should be placed indicating their location.

Staff workstations should have dedicated internal lines or radio channels, if possible. If resources are scarce, the simplest system, which is face-to-face verbal communication using runners, may be employed.

Spectrum Health Hospital will, if possible, use their current standardized electronic information system to support clinical management and patient tracking. GVSU computers will need to be made available in patient care areas.

An area within the CS will need to be established and known as the Communications Base required by ambulance personnel for report writing and communications with their respective headquarters.

2.4 Security/Safety Section Director

Qualifications. This director must be an experience security officer at Spectrum or GVSU with a background in law enforcement. Skills such as emergency treatment and/or basic life support (BLS) would be desirable. Responsibilities include supervising the staff security guards and managing personnel issues. This director ensures the overall safety and security of the ACS. It is essential that this individual have the ability to work under pressure and manage stressful situations in a manner designed to de-escalate intensity.

Duties. This director is responsible for maintaining the security of the ACS building and personnel, issuing security staff ID badges, and controlling access to the building (security personnel at all access points, pharmacy, medical supply, temporary morgue, and periodic patrol of parking lots). The Security/Safety Director will also be responsible for contacting the businesses renting space within CHS and gathering a list of authorized staff allowed to access the building during the operation of the ACS and notifying businesses that they will be required to show a picture ID to gain access to the building while the ACS is operational. Additional responsibilities include the maintenance and security of evidence until proper authorities are notified and receive the evidence. This individual maintains close communications with the city EOC and law enforcement agencies. The Security/Safety Director should assist the ACS Administrator in updating the current status of any emergency incident outside the ACS.

Under the direction of the Security/Safety Director, the ACS should maintain an internal staff of security guards who are on duty 24 hours a day, 7 days a week. The nature of the facility, particularly the number of access points, will determine the exact requirements for security staff. Security personnel stationed at access points are tasked with checking the ID of anyone entering the facility.

2.5 Community Liaison Section Director

Qualifications. This individual should have experience in public relations and must have superior communication and interpersonal relations skills. The functions of this director should be aligned with the city public relations department, the Public Information Office (PIO) at the Joint Information Center (JIC), the emergency management operations, and the supporting hospital.

Duties. The Community Liaison Section Director will establish and maintain a relationship with the community's Office of Emergency Management (OEM) & the internal GVSU community to issue information from and channel information to the ACS. The Community Liaison Director's role is to respond to the community concerns that affect the ACS and its mission. An essential function of this director is to interface with other local support agencies to obtain additional resources. The director must also establish contact with liaison counterparts of all cooperating agencies. This individual must function as a community representative and point of contact (POC). Coordination of ACS activities with the supporting hospital and neighborhood emergency help center (NEHC) is essential. This director also coordinates information provided to the local community. The Community Liaison Director will perform job responsibilities with the help of a liaison assistant(s).

2.6 Finance Section Director

Qualifications. This director should be experienced in financial management, preferably with accounting experience in a healthcare facility. Experience is needed in cost accounting, financial resources and resource management.

Duties. This director will be responsible for developing a cost accounting plan that will include tracking of expenses and documentation of expenditures relevant to the emergency incident.

Data management includes information relative to personnel, supplies, FEMA reimbursement and miscellaneous expenses. In addition, this person will be responsible for working with the other Section Directors on activities such as providing monies for procuring special equipment or supplies, contracting with any vendors, timekeeping, cost analysis, consultation with GVSU Human Resources for the compensation of

faculty/staff time, if appropriate, and other financial aspects of the incident. An additional Cost Accounting Unit Leader may need to be allocated for this function.

2.7 Supplies and Logistics Section Director

Qualifications. This director should be experienced with GVSU Pew campus operations.

Duties. Responsibilities of this position include the initial setup of the ACS, the facility, medical equipment, and all supplies, medical and non-medical. This individual is also responsible for setting up a transportation section for non-patient transportation needs. Another important part of this role is coordination of all equipment maintenance, medical and non-medical. This individual is also responsible for managing the temperature in the temporary morgues or if needed sending a notification to the Communication Section Director to request freezer trucks from the KC-EOC.

This section is responsible for all of the services and support needs of the ACS, including obtaining and maintaining the facility, equipment, and supplies. This section consists of the following six functional units:

- Materials/Supply
- Food Service
- Resource Transportation
- Housekeeping
- Maintenance
- Childcare

This section is tasked with the ordering activities for the procurement of equipment, supplies, food, and drink, as well as the handling of all contracting for services, supplies, and equipment.

The Supply/Logistics Section is responsible for ensuring that all the supplies needed throughout the ACS are obtained with the exception of pharmaceutical supplies. Due to the specialized procedures surrounding the acquisition of drugs, this function should be the responsibility of pharmacy services in the Medical Operations Section.

There are specific refrigeration needs in any inpatient facility, including a temporary one such as an ACS. First, it is essential to have the capability to refrigerate medications separately from any bodily fluid specimens collected.

To ensure that adequate nutrition levels are met, a Food Service Unit Leader should be appointed to coordinate the proper feeding of both patients and staff. This individual can arrange for the delivery of food to the facility through Spectrum Health Hospital, GVSU catering or local catering sources. The Bagel Beanery located within CHS may continue normal operations while the ACS is functional.

The Supply/Logistics Director should also appoint a Resource Transportation Unit Leader to manage the internal and external transportation services for personnel, supplies, and equipment. Close communication among the Supply/Logistics Director, the ACS Administrator, and other Section Directors is essential to ensure that the facility's resource needs are anticipated and met.

2.8 Records/Planning Section Director

This section consists of three functional units:

- Admissions/Registration
- Labor Pool
- Internal Patient Transportation

The Records/Planning Director should work very closely with the ACS Administrator to ensure that patient and personnel status is kept up to date. This section will manage all paperwork generated within the ACS. The Records/Planning Director will staff the Admissions/Registration area with a Patient Care Coordinator (PCC) and will maintain a control register identifying those patients admitted to the ACS. The PCC, will likely co-located with the Records/Planning Section, will support the whole ACS. The PCC's role is similar to a nursing supervisor in a traditional hospital. The PCC will maintain awareness of nursing staff and bed availability. The PCC will direct new patients into nursing subunits that have an available bed and staffing level that is able to receive the patient. As nursing subunits fill up, the PCC will direct patients to the proper subunit. The ACS is strictly an inpatient facility where patients are sent directly from the Spectrum Health hospital via ambulance or private car. Nonetheless, a record should still be kept of anyone who is administered care, even if that person did not arrive through conventional means (walk-ins).

The Records/Planning Section should also maintain staffing logs identifying anyone working at the ACS in any capacity. Patient registration, treatment, and disposition records are also the responsibility of this section. In addition, this section is responsible for managing all personnel who are not actively assigned to another section within the ACS, such as spontaneous volunteers or staff members who are in an available or out-of-service status within the facility. If staffing permits, a Labor Pool Unit Leader can be appointed to assist the Records/Planning Director with tracking the facility's personnel resources and providing extemporaneous training to new ACS staff members as necessary including assisting with registering staff with the Michigan Volunteer Registry.

The Records/Planning Director will also supervise the internal patient transport section. The internal patient transport section will be responsible for moving patients from the Admissions/ Registration area to their assigned bed or from their assigned bed to discharge or the morgue. Depending on their availability and the needs of the nursing staff, the internal transport staff may even be asked to assist in physically repositioning bed bound patients.

2.9 Medical Operations Section Director

The Medical Operations Section encompasses all clinical areas of the ACS. The Medical Operations Director is a physician responsible for directing the medical care for every patient entering the ACS. Spectrum Health will assign one or two of their Physicians as Medical Operations Section Director(s) at CHS who will manage the day-to-day Medical Operations Section of the ACS which includes:

- Nursing Subunits
- Pharmacy Services
- Family Services (if the ACS Administrator so chooses)
- Temporary Morgue

Because the Medical Operations Director is responsible for directing the medical care in the facility, this individual and the nursing subunit supervisors are tasked with ensuring that the staff members in the ACS are operating within the scope of their practice and training. The director should have inpatient privileges at a Spectrum Health Hospital to ensure continuity and knowledge of the Hospital policies and procedures. The Medical Operations Director should also oversee any ancillary operations within the ACS. If staffing levels permit, each nursing subunit (50 beds) within the ACS should have a unit leader (either a physician or registered nurse [RN]) assigned to expedite and optimize patient care rendered.

3. ACS Design

3.1 Patient Flow

Casualties will arrive at CHS's east entrance off the main lobby primarily through Spectrum Health's Emergency Department or the Casualty Relocation Unit (CRU) by ambulance. The Region 6 Medical Coordination Center (R6MCC) outside of CHS will determine where the patients will be admitted (hospital or ACS) and communicate that location back to the CRU staff. The R6MCC will also communicate to the ACS

that there are incoming patients. The information to be relayed will include the total number of patients and any other pertinent details, such as how many patients require transfer by stretcher versus wheelchair.

Patient registration will be located in the main floor lobby. Patients will be registered there and then assigned to a nursing subunit with bed availability. Patients will be transported to their assigned nursing subunit by one of the two patient transporters assigned to the patient's nursing subunit.

Any walk-in family members will be directed to the worried well area located in the main lobby CHS 013, CHS 107, CHS 290 or CHS 307. Other individuals seeking care who were not sent via the R6MCC will be directed to the triage nurse for evaluation.

There will be a total of 5 different nursing subunits each identified by number and color. Subunit job action sheets will be unit color specific so that subunit staff can easily identify their associated subunit members. As nursing subunit staff is identified Spectrum Health Hospital will provide identification badges. Each subunit staff member will also receive a job action sheet for their assigned position. Once subunit staff is given an identification badge and job action sheet they will assist in the set-up of their subunit until subunits are ready to receive patients. At the end of each subunit staff member's shift they will return their job action sheet to CHS 123.

When patients are ready for discharged the nursing subunit will notify the Admissions/Registration area of the location to which the patient is being discharged. This information will also be recorded on the patient register. The patient will then be escorted or transported from their unit to the main floor lobby to wait for the next available bus to Spectrum Health Medical Center or the Seward Street Parking ramp. All family members picking up patients will need to do so at the Pew Campus DASH Lot located at the corner of Lake Michigan Drive and Seward Street, See Appendix C, bus route map.

3.2 Standing Orders

To facilitate rapid admission and treatment of casualties, standing predefined admission orders can be used. These admission orders provide a template for physicians to use in order to direct inpatient care. These standing predefined admission orders should address the basic components of agent-specific and ongoing supportive care therapy, such as antibiotics or vaccines, hydration, bronchodilators, pain management, and other provisions of basic patient care. Included in this is an example of an appropriate template for an ACS admission. See Appendix B, Sample Admission Orders and Patient Care Documentation Sheets.

3.3 Nursing Subunit Locations

Nursing Subunit #1 - Green

Location: 12 beds in CHS 307, 18 beds in CHS 315 and 20 beds in CHS 309 (No Phones)

Unit Supplies: CHS 313 (No Phone)

Staff Room: CHS 336 (Phone #331-5913)

Family Conference: CHS 337 (Phone # 331-5903)

Nursing Subunit #2 - Orange

Location: 25 bed in CHS 357 (No Phone) & 25 beds in CHS 351/353 (Phone # 331-5978)

Unit Supplies: CHS 371 (No Phone)

Staff Room: CHS 343 (Phone # 331-5905)

Family Conference: CHS 345 (Phone # 331-5907)

Nursing Subunit #3 - Blue

Locations: 25 beds in CHS 469 (No Phone), 10 beds in CHS 421 (Phone # 331-5958) & 15 beds in CHS 425 (No Phone) (Move furniture from 421 to 436 & 413) (Move Furniture from 425 to 431)

Unit Supplies: CHS 477 (Phone # 331-5964)

Staff Room: CHS 440 (Phone # 331-5894)

Family Conference: CHS 443 (No Phone)

Nursing Subunit #4 Red

Location: 50 beds in CHS 253 (No Phone)

Unit Supplies: CHS 233 (No Phone)

Staff Room: CHS 277 (Phone # 331-5975)

Family Conference: CHS 243 (No Phone)

Nursing Subunit #5 - Yellow

Location: 25 beds in CHS 215 (Phone # 331-5969) & 25 beds in CHS 255 (No Phone)

Unit Supplies: CHS 223 (Phone # 331-5938)

Staff Room: CHS 211 (No Phone)

Family Conference: CHS 236 (Phone # 331-5971)

3.4 Locations for other Essential Components of ACS

<i>Component</i>	<i>Room/Phone #</i>	<i>Component</i>	<i>Room/Phone #</i>
ACS Command Center	CHS 490/331-5929	Labor Pool Briefing	CHS 119/331-5832
ACS Staff Locker room & Bathroom	CHS 239	Medical Operations Director Extra Staffing Room	CHS 240/331-5893
ACS Staff Lounge with Bathroom	CHS 331/331-5926	Morgue – West Elevator Only - LR	CHS LL001/331-5898
ACS Staff Sleeping area	CHS 207	Pharmacy	CHS 340/331-5892
Admissions & Nursing Triage	CHS 009	Security	CHS 015/331-5814 CHS Main Lobby Desk & CHS 189
Area Designated for ACS Staff to register with the Michigan Volunteer Registry	CHS 191	Spectrum Health Staffed ID & Job Action Sheet Distribution	CHS 123
Family Service Areas & Worried Well	Main Floor Lobby CHS 013 CHS 107 CHS 290 CHS 307 Overflow CHS 507	Stored Wheelchairs/Walkers	CHS 205, CHS 257 CHS 311 & CHS 371
Food Prep Area	CHS LL Parking & CHS 161	Infant Scales (6 total)	CHS 305 & CHS 315
Housekeeping	CHS 113	Washer & Dryer	CHS 371
Ice Makers	CHS 161 & CHS 257	Childcare	Drop off/Pick up: CHS 140/331-5891 Awake Children: CHS 145 Asleep Children: CHS 127
Receiving Dock	CHS LL012/331-5813		

3.5 Furniture Storage

In the process of setting up each nursing subunit the Supplies and Logistics Section Director will oversee the moving and relocation of all GVSU furniture. The majority of furniture can be relocated to the Pent House or to other rooms within CHS not designated for use in the ACS e.g. CHS 115, CHS 113, CHS 209, CHS 431 & CHS 413

3.6 Patient Records

A functional medical record must be established for every individual who is treated at the ACS either through the use of paper or if access is obtainable through Spectrum Health's electronic medical records program. Individual records accompany each patient throughout his/her stay and is available to the medical staff as needed for documenting the treatment provided and the patient's response to such. All records must be complete, legible, and thorough. Initially, each patient will arrive at the ACS with some paper documentation that was started in either the NEHC or the transferring hospital's ED. Upon arrival to the ACS, additional components of the patient's medical record will need to be added. A basic admission package of paperwork should be minimally composed of preprinted standing admission orders and multidisciplinary progress notes (for documenting vital signs, intake and output [I&O], activities of daily living [ADL], etc.). Nursing documentation requirements should be scaled down as much as possible, and charting by exception is highly recommended. See Appendix B, for sample patient record forms.

3.7 Patient Tracking

Patient tracking is the responsibility of the Records/Planning Director. Patient demographics will be captured on each patient at the time of admission. The Admissions/ Registration area will maintain a patient register (patient logbook) that includes information such as the dates of the patient's admission and discharge and the nursing subunit where the patient was admitted. When the patient is ready for discharge, the nursing subunit will notify the Admissions/Registration area of the location to which the patient is being discharged. This information will also be recorded on the patient register. A copy of the patient register should go to the community's EOC/R6MCC and the Command Center at the ACS because they are responsible for handling requests for patient location and bed availability. Accurate patient tracking is a critical function of the ACS as relatives, media, and incident investigators will be trying to locate individuals during this stressful time. See Appendix F, for a predesigned patient tracking spreadsheet.

3.8 Communications Message Forms

Communications Message forms will be used within the ACS to communicate unit needs and share pertinent information between areas of the ACS. Transporters will be used as "runners" when needed to deliver forms. See Appendix H, for Sample Message Form.

3.9 Provisions for Children and Family Members

Childcare will be provided for children of ill parents and ACS staff. Children will be dropped off and picked up in CHS 140. A signature and picture ID will be required at the time of drop off and pick up. Each child will have an adhesive name tag placed on the back of their shirts with both their first, last names and a parent phone number written on the tag (adhesive name tags can be located in the disaster kit). Provisions for awake children will be provided in CHS 145. Provisions for sleeping children will be provided in CHS 127.

3.10 Parking

Parking for all ACS Administrators, Section Directors, State and Region 6 emergency response personnel and GVSU faculty/staff assigned to assist in the implementation of the ACS will be available in the main level parking area. All community volunteers, GVSU faculty/staff nursing subunit volunteers, student volunteers, family members and media crews will need to park in the Pew campus Seward Parking ramp and use Rapid Buses to and from CHS. All Spectrum Health staff should park in their normal assigned parking locations. The Rapid Buses will need to include stops at Spectrum Health to drop patients off that have parked their cars in one of the Spectrum Health Medical Center's lots.

The additional lot on Lafayette will be used for staff members of businesses renting space within CHS in addition to supply delivery overflow and staging for the ACS. Security personnel through radio communication can hold deliveries in this lot until there is room for delivery at the CHS loading dock. If additional storage space is required, supplies can be stored at Spectrum Health Medical Center or at the Spectrum Health warehouse.

No parking will be available in the lower level parking area or the uncovered lower level gated parking area (behind the parking attendant booth). All lower level parking areas must remain open for semi-truck maneuverability.

3.11 Supply Deliveries

All supplies including food will be delivered through the CHS receiving dock LL012 and lower level parking garage.

4. Staffing Requirements

The capacity of each nursing subunit will be established to best meet the needs of the incident. For planning purposes, however, a 50-bed capacity has been selected. Staffing of this area is intended to maintain a feasible patient-to-provider ratio to sustain adequate care. The staff in the nursing subunits is in addition to the Medical Operations Director and the Patient Care Coordinator since both of them are responsible for all of the ACS nursing subunits.

Suggested minimum staffing per 12-hour shift for a 50-bed nursing subunit

- 1 Physician
- 1 Nurse Practitioner or Physician Assistant (NP or PA)
- 6 Registered or Licensed Practical Nurses (RN or LPN)
One of six Registered Nurses will be assigned as Unit Leader
- 4 Nursing Assistants (Nursing Students, 3rd semester and above)
- 2 Med Clerks
- 1 Respiratory Therapist (RT)
- 1 Case Manager
- 1 Social Worker (MSW)
- 2 House Keepers
- 2 Patient Transporters

The absolute minimum number of staff providing direct patient care on the 50-bed nursing subunit per 12- hour shift is 12, which includes the physician, one physician assistant or nurse practitioner, 6 nurses, and 4 nursing assistants. The physician will be assigned the entire subunit, while the nursing staff will operate in a team approach. Members of the patient care team will have tasks assigned that are consistent with their scope of practice.

Units will submit written or verbal request for staff, indicating the type of staff needed. The Labor Pool will work with those areas to determine the skill level of the individual needed and attempt to incorporate volunteers into a unit. The Labor Pool will maintain time records and the Finance Section. Communication with the Records/Planning Director will be continual regarding staffing needs and staff procurement.

4.1 Physicians.

Qualifications. Board certified and licensed physician. Medical or osteopathic degree with residency training (2 years beyond postgraduate) required for physicians.

Duties: Physicians are responsible for directing the medical care provided in the ACS.

This includes the medical evaluation, diagnosis, treatment, and disposition of the patient. All physicians who staff the ACS should be credentialed, including the Medical Operations Director.

4.2 Physician Assistants (PA)/Nurse Practitioners (NP).

Qualifications. PAs and NPs must have completed the required education and passed the appropriate licensure examination. Pediatric experience is strongly suggested if caring for children.

Duties. The physicians, PAs, and NPs are responsible for all medical care provided.

This includes the evaluation, diagnosis, treatment, disposition of the patient, and the direction and coordination of all other care provided to the patient. Per pod, one of these persons may be assigned to assist the Medical Operations Director in the administrative aspects of medical care as well as provide oversight of the other physicians.

4.3 Nurses.

Qualifications. Graduation from an appropriate accredited program and current licensure in a U.S. state is required. One year of practical experience and current cardiopulmonary resuscitation (CPR) certification is required. Pediatric experience would also be helpful. For placement in a supervisory capacity, this RN should have some staff supervisory experience.

Duties. These nurses are responsible for the nursing care of all patients, including assessment planning, treatment, and evaluation of response to medical interventions. Additional requirements include assisting physicians in exams, treatment, and procedures. The RN is also responsible for performing all activities essential for the provision of quality care as well as initial patient contact, screening, and assessment. Provision of patient follow-up instructions, administration of medications, documentation, and the recording of all controlled substances dispensed on a narcotic count sheet are also required functions. The nurse must also document assessment procedures and outcomes on charts as per protocol. It is also required that the nurse be able to abandon traditional concepts of total patient care and accept the disaster protocols for rapid evaluation/distribution of patients; he/she must be able to remain calm in a crisis. Proficient patient assessment skills are essential.

4.4 RN Unit Leaders.

Qualifications: Graduation from an appropriate accredited program and current licensure in a U.S. state is required. One year of practical experience and current cardiopulmonary resuscitation (CPR) certification is required. Pediatric experience would also be helpful. For placement in a supervisory capacity, this RN should have some staff supervisory experience.

Duties: One RN for each subunit will be assigned as Unit Leader. The Unit Leader is responsible for communications out of the unit including the needs/status of the unit and bed availability to the Medical Operations Section Director or Records/Planning Section Director.

Unit Leaders are also members of the nursing team responsible for nursing care of all patients, including assessment planning, treatment, and evaluation of response to medical interventions. Additional requirements include assisting physicians in exams, treatment, and procedures. The RN is also responsible for performing all activities essential for the provision of quality care as well as initial patient contact, screening, and assessment. Provision of patient follow-up instructions, administration of medications, documentation, and the recording of all controlled substances dispensed on a narcotic count sheet are also required functions. The nurse must also document assessment procedures and outcomes on charts as per protocol. It is also required that the nurse be able to abandon traditional concepts of total patient care and accept the disaster protocols for rapid evaluation/distribution of patients; he/she must be able to remain calm in a crisis. Proficient patient assessment skills are essential.

4.5 Medical Clerical Personnel.

Qualifications. This individual must be a high school graduate, and some medical office training is preferred. A medical clerk must be familiar with medical record keeping and terminology and must have experience in controlling a busy traffic flow area. A calm, poised, mature individual displaying sound judgment is required. This clerk must also be willing to assist staff as necessary.

Duties. The clerk is responsible for maintaining a casualty disposition log in addition to managing the flow of patients, answering telephones, managing paperwork and supplies for the area, and coordinating patient transportation with internal transportation services.

4.6 Emergency Medical Technicians (EMT) and Nursing Assistants. These technicians are responsible for providing assistance to the nursing staff in the care and treatment of patients in the ACS. EMTs must possess current licenses, while nursing assistants should show evidence of either recent relevant experience in providing direct patient care or certification as a nursing assistant or a similar role. Both EMTs and nursing assistants should have actual experience in the medical field using their license/certificate/training. Nursing, Physician Assistant and medical students may also be potential sources of labor for filling this role.

4.6 Communications Specialist

Qualifications. A person filling this role should be a high school graduate with a background in emergency medical operations and communications. Some knowledge of medical facility security is important, and skills such as emergency treatment and/or Basic Life Support (BLS) would be desirable.

Duties. The specialist is responsible for establishing and maintaining a log of all communications into and out of the ACS. This individual will be the “eyes” and “ears” of the ACS Administrator and will facilitate all required reports to and from the ACS Command Center and the community’s EOC, and will facilitate communications with the CRU and the supporting hospital. Additionally, this individual will maintain a status board of all current actions and issues for the ACS Administrator and Communications Director.

4.7 Security Guard

Qualifications. This guard must be a high school graduate with a background in law enforcement. Ideally, this individual should be an experienced security officer at Spectrum or GVSU. Skills such as emergency treatment and/or BLS would be desirable.

Duties. The Security Guard is responsible for the security of the ACS building and personnel. Added responsibilities include issuing staff ID badges and controlling access to the building (security personnel at all access points, pharmacy, medical supply, temporary morgue, and periodic patrol of parking lots). Additionally, the guard is responsible for maintaining security of evidence until proper authorities are notified and receive the evidence. Another important function is to secure patients’ personal belongings upon admission and retrieve them upon discharge. If a patient dies, it is the responsibility of the Security Guard to turn over personal belongings to the next of kin if available, in accordance with ACS policy.

4.8 Liaison Assistant

Qualifications. This assistant must be a high school graduate with a background in public relations and media relations. Ideally, job responsibilities can be aligned with the city’s public relations department, the city’s emergency planning department, or the supporting hospital.

Duties. This individual is responsible for coordinating with the city and supporting the Hospital’s public relations departments to ensure that accurate and appropriate information is released to the public. It is important that this assistant be completely conversant on all activities in the ACS that might be newsworthy and provide information to the appropriate people.

4.9 Admissions Clerk

Qualifications. The Admissions Clerk should have experience within the supporting hospital and have knowledge in admitting paperwork and regulations. The clerk designated as the supervisor should have some clerical supervisory experience in a healthcare setting.

Duties. The Admissions Clerk will maintain the admissions control register. Additional responsibilities include initiating the inpatient record using the incoming paperwork and combining it with predefined ACS paperwork. This process will produce a medical record that will accompany the patient to a nursing subunit. The clerk will also issue the patient ID labels. An important job responsibility is the continual communication with the Communications Director regarding patient tracking and all admissions.

4.10 Labor Pool Unit Leader

Qualifications. This unit leader should be a high school graduate with experience in supplemental staffing. Previous experience as a healthcare recruiter or recruiter in a volunteer based organization is helpful. This individual must be able to make criteria-based decisions and deal with conflict.

Duties. The labor pool unit leader will work with all sections of the ACS to identify staffing needs. This individual must be able to identify personnel resources in a variety of settings and work to recruit qualified individuals. An essential element of this individual's job responsibilities will include tracking information relative to the credentialing of all licensed staff. Because the Labor Pool Unit Leader is expected to be busy, he/she should consider using people who are in the labor pool, waiting for assignments, to assist him/her by performing routine duties such as answering the phone.

4.11 Volunteers

Admissions Volunteers

Qualifications. These individuals must be able to read and write and have no physical limitations.

Duties. Admission area volunteers will assist the PCC in moving and directing patients as they enter the ACS and may assist the transporters in moving patients to the nursing subunits

Nursing Volunteers

Qualifications. Nursing area volunteers must be able to provide a basic level of nonmedical care to patients and must be able to read and write. These individuals must also be calm, poised, and mature, and have the ability to move around easily without physical limitations.

Duties. These volunteers deliver requested supplies to the medical practitioners and assist patients and families in activities of daily living (ADL), such as turning, moving, and patient personal hygiene while in the ACS.

Morgue Volunteers

Qualifications. These volunteers must be able to work around human remains, must be mature, responsible, and handle remains with dignity and respect at all times.

Duties. The morgue volunteer is responsible for assisting the mortuary clerk with preparing the remains, and assisting the internal transporters in moving, loading, and unloading of remains. The patient's personal belongings should be inventoried on admission and secured at that time. Therefore, upon the death of a patient, personal belongings can be easily returned to the next of kin, without interfering in the procedures for the disposition of remains.

Transportation Volunteers

Qualifications. These volunteers must be able to physically move patients onto stretchers or wheelchairs and push them for transport. Transporters must become thoroughly familiar with the patient flow pattern and locations for patient distribution.

Duties. They must be responsible for moving all non-ambulatory patients throughout the ACS and moving deceased patients to the temporary morgue as required. This volunteer is also responsible for notifying appropriate area clerks when a patient has entered the area. Essential responsibilities also include assisting with the loading and unloading of patients from vehicles as needed and ensuring that patient paperwork accompanies all transported patients.

Supply Volunteers

Qualifications. These volunteers must be able to read, lift, and carry.

Duties. The supply volunteers are responsible for unpacking supplies as they arrive in the ACS and organizing them within the storage area. Added responsibilities may include moving equipment and supplies into the supply area and distributing these items throughout the ACS.

4.12 Internal Patient Transportation Unit Leader

Qualifications. This unit leader should be a high school graduate with experience in a healthcare transportation department. Some supervisory experience is needed to manage personnel and multiple requests for assistance. Experience with body mechanics and personnel safety is also important.

Duties. This individual will be responsible for personnel and transportation resource management. Directing personnel, managing workload, monitoring equipment, and record keeping are essential functions. This individual will work to ensure appropriate staffing staff utilization, and activity monitoring of transportation personnel.

4.13 Transporter

Qualifications. The transporter must be able to lift heavy objects and persons. A high school education is preferred, and good interpersonal skills are beneficial. This individual must be able to take direction in a constructive manner.

Duties. This individual is responsible for transporting patients from the Admissions/Registration area to the assigned nursing subunit, transporting or accompanying patients being discharged to the discharge portion of the Admissions/Registration area or to security to retrieve personal belongings, and then transporting them to their vehicle, if available. This transporter may be asked to move supplies, pass patient food, and perform other similar acts associated with “runners.”

4.14 Transportation Clerk

Qualifications. The clerk must have at least a high school education; some medical office, medical terminology, and recordkeeping experience is preferred. The clerk also needs to have experience in controlling a busy flow area and exhibit good communication skills. Willingness to assist staff in whatever way is needed, including the physical movement of patients, is also necessary.

Duties. This clerk is responsible for ensuring the smooth flow of all patients throughout the ACS. An essential responsibility includes ensuring that acutely ill patients receive priority transport. Additional responsibilities include answering telephones and maintaining and supervising the volunteers in the internal transportation services. Related duties include coordinating with the CRU staff to assist when a patient requires transfer to the supporting hospital.

4.15 Respiratory Therapist

Qualifications. Must be a licensed RT with preferably 1 year experience.

Duties. The RT will oversee the pulmonary care of patients who require noninvasive respiratory treatments while in the ACS and will manage the logistics of oxygen delivery, if provided within the ACS.

4.16 Licensed Practical Nurse

Qualifications. This person must be an LPN with patient care experience, the ability to function to the full capacity of their license in addition to an active license to practice. Adult or pediatric patient care experience is necessary. This individual must be able to take direction and work as part of a team.

Duties. The LPN will be responsible for direct patient care under the direction of the RN. Collaboration with other providers and functions is essential, and the ability to take initiative relative to the needs of patients and families will be necessary.

4.17 Triage Nurse

Qualifications. This person must be an RN with at least 1 year experience in medical triage.

Duties. This person will evaluate individuals who walk into the ACS requesting medical care and will either recommend them for admission to the ACS, advise them on where they can see appropriate care in the community or direct them to the worried well/family care locations.

4.18 Case Manager

Qualifications. The case manager can be a RN or social worker. These individuals need to have at least 1 year experience in the clinical setting.

Duties. This individual will offer victim assistance to patients and ensure that upon discharge patients have the necessary resources to continue their recovery. Cross-coverage with the duties of the social worker may be required.

4.19 Social Worker

Qualifications. This individual should be a licensed (or licensed clinical) social worker.

Duties. The social worker is responsible for offering victim assistance to families, orphans, and religious needs, and the like, to patients and families in the ACS. Cross-coverage with the duties of the case manager may be required.

4.20 Pharmacy Unit Leader.

Qualifications. The Pharmacy Unit Leader must be a licensed pharmacist. This individual should have a hospital-based pharmacy background and be experienced in processing bulk drug orders.

Duties. This person is responsible for ordering, receiving, and dispensing pharmaceuticals to the nursing subunits. Additional responsibilities include creating a pharmaceutical cart re-supply system, supervising pharmacy staff, and maintaining the pharmacy stockroom.

4.21 Pharmacist

Qualifications. This position must be filled by a licensed pharmacist. The Pharmacist should have a hospital-based pharmacy background and be experienced in processing bulk drug orders.

Duties. The Pharmacist is responsible for receiving and dispensing pharmaceuticals to the nursing subunits, breaking down bulk pharmaceuticals and supervising the delivery to each nursing subunit cart, keeping a pharmaceutical log to account for all dispensed pharmaceuticals, and serving as a resource for the nursing subunits for all dispensing issues.

4.22 Pharmacy Technician

Qualifications. The Pharmacy Technician must be a high school graduate with advanced training as a pharmacy technician. This individual must be trustworthy because he/she will handle pharmaceuticals.

Duties. This technician is responsible for helping the pharmacist maintain the pharmacy

carts and moving the carts to the nursing subunits. Assisting with the maintenance of the pharmacy log for dispensed pharmaceuticals is an added job responsibility.

4.23 Morgue Unit Leader.

Qualifications. This individual must be a high school graduate and have experience in a pathology department working with remains of the deceased. The ideal candidate has experience working in a healthcare facility pathology department or medical examiner's office in a supervisory capacity.

Duties. This unit leader will supervise the mortuary clerk and work with the disaster management agencies regarding safe, confidential, and dignified handling of the deceased. Additional responsibilities include the appropriate paper trails and accountability of both remains and personal effects. This individual is expected to communicate with both internal and external functions in performing these responsibilities.

4.24 Mortuary Clerk.

Qualifications. This individual must be a high school graduate, and some medical office or mortuary training is preferred. Familiarity with medical recordkeeping and terminology is preferred. This individual must be calm, poised, mature, and display sound judgment.

Duties. The clerk establishes a case file on all individual fatalities, oversees the volunteers who transport the remains, and conducts and documents inventory of personal effects. This individual must ensure that all remains and personal effects, if not already removed, are properly labeled and provided to security. Additional responsibilities include ensuring that each case file and all personal effects accompany the remains during transfer, and that all remains are handled with care and dignity. The clerk must also maintain a fatality disposition log and arrange for transfer of remains. Coordination of the stocking and ordering of supplies for the temporary morgue area also constitute job responsibilities.

4.25 Maintenance Unit Leader.

Qualifications. The Maintenance Unit Leader should be experienced in maintenance with work experience with GVSU Pew campus operations. This individual must be able to supervise others and be a resource on physical maintenance and operation. It is essential that this individual also have experience working with hazardous materials and medical/regulated wastes.

Duties. This individual will be responsible for developing a maintenance and emergency intervention plan for all equipment used within the ACS. Fire and evacuation plans must be developed and communicated to others within the facility. All maintenance personnel will be managed by this unit leader, and close communication with the supporting hospital must be maintained.

4.26 Materials Supply Unit Leader.

Qualifications. This unit leader must be a high school graduate with medical supply background and be familiar with medical equipment terminology and recordkeeping. This individual must be trustworthy because duties involve receiving and dispensing supplies and equipment.

Duties. This unit leader is responsible for ordering, receiving, and dispensing medical supplies to the nursing subunits. Other job responsibilities include creating a medical cart resupply system, supervising supply clerks, and maintaining the materials supply stock room. Another important function is communicating with the Supply/Logistics Director on all supply issues and operations.

4.27 Supply Clerk.

Qualifications. This clerk must be a high school graduate and some medical office

training is preferred. Familiarity with medical equipment terminology and recordkeeping is also important. This individual must be trustworthy because he/she will handle and dispense supplies and equipment and must be willing to assist staff however necessary.

Duties. Job responsibilities include maintaining equipment supply logs and requests as well as distributing materials. Essential functions include ensuring that required supplies and equipment are given to requesting areas as needed. This individual must maintain communication with the materials supply unit leader when supplies are low and need to be reordered.

4.28 Food Service Unit Leader.

Qualifications. This supervisor should be at least a high school graduate, and a registered dietician is desirable. This person needs to have extensive experience in hospital food service operations.

Duties. Responsibilities include supervising all ACS food service activities. Additional responsibilities include planning and ordering all food service supplies and equipment. Supervisory responsibilities include meeting with the Supply/Logistics Director, the Medical Operations Director, and the PCC on setting policies and procedures for food service operations.

4.29 Food Service Ordering Clerk.

Qualifications. The clerk should have experience in hospital food service operations and especially in the ordering of prepared foods.

Duties. Responsibilities include receiving and consolidating food orders from all sections and nursing subunits. When a consolidated order has been placed, this clerk is responsible for notifying the Finance Section of the cost of the order. When food is received from the caterer, this clerk verifies that all items ordered have been received. This clerk also provides assistance to the food service workers in breaking down the order by section and dispensing meals.

4.30 Food Service Worker.

Qualifications. The food service worker should be a high school graduate and understand hospital food service policies and infection control procedures.

Duties. Responsibilities include grouping food according to section and ensuring the food is dispensed to the proper destination, such as a nursing subunit or to an individual patient.

4.31 Housekeeping Unit Leader.

Qualifications. This supervisor should be a high school graduate and have extensive experience in Spectrum Health Hospital housekeeping requirements and regulations.

Duties. Responsibilities include supervising all ACS housekeeping activities. This individual is also responsible for planning and ordering all housekeeping supplies and equipment and for setting the ACS housekeeping standards. This supervisor is responsible for scheduling housekeeping services within each ACS area and for issuing housekeeping supplies and equipment to the individual housekeepers. Job responsibilities include training the housekeeping staff on personal protection measures, housekeeping standards for each section, and handling of infectious waste.

4.32 Housekeeper.

Qualifications. This individual should have experience in housekeeping requirements and regulations.

Duties. A housekeeper is responsible for cleanliness and up-keep of his/her assigned

area of responsibility. These activities include sweeping, mopping, wiping, cleaning toilets and washbasins, and any other housekeeping tasks that fall within their area. Additional responsibilities include obtaining and replacing housekeeping supplies for their responsible area. The housekeeper is also responsible for disposing of all regular and hospital wastes.

4.33 Cost Accounting Unit Leader.

Qualifications. This individual should be familiar with GVSU financial operations. Ideally, this individual should have experience in an accounting setting with formal education in this field. This unit leader must be attentive to detail and be comfortable working with numbers.

Duties. This individual will work in conjunction with Spectrum Health Human Resources (payroll) and will be responsible for monitoring personnel work time, costs associated with equipment and supplies, and cost analysis. The depth of financial operation will depend upon the relationship with the supporting hospital

4.34 Childcare Provider Unit Leader.

Qualifications. Some college education, professional childcare care provider with supervisory experience.

Duties. Organize, identified GVSU sites for childcare site. Assign adequate number of childcare providers minimum ratio of one childcare provider to every five children.

4.35 Childcare Provider.

Qualifications. This individual should be a high school graduate with some childcare experience.

Duties. Care and ensure safety of children of patient's or volunteers.

5. Glossary of Acronyms

ACS	Alternate Care Site
ACLS	Advanced Cardiac Life Support
ADL	Activities of Daily Living
ALS	Advanced Life Support
APIC	Association for Professionals in Infection Control and Epidemiology, Inc.
ATLS	Advanced Trauma Life Support
BLS	Basic Life Support
BW	Biological Warfare
BW IRP	Biological Weapons Improved Response Program
CDC	Centers for Disease Control and Prevention
CISM	Critical Incident Stress Management
CPR	Cardio-Pulmonary Resuscitation
CRU	Casualty Relocation Unit
CS	Communication Section
DMAT	Disaster Medical Assistance Team
DP	Domestic Preparedness ED
	Emergency Department
EMS	Emergency Medical System
EMT	Emergency Medical Technician
EMTALA	Emergency Medical Treatment and Active Labor Act
EOC	Emergency Operations Center
EPA	Environmental Protection Agency
ESF # 8	Emergency Support Function # 8
FTE	Full-time Equivalent
HCC	Hospital Command Center
HEICS	Hospital Emergency Incident Command System

Appendix K

Job Action Sheets

(Print and fold into plastic hanging name badge holders)

ADMINISTRATOR

GVSU ACS

Qualifications. This position of authority must be a GVSU faculty or staff administrator or executive with knowledge and expertise in GVSU operations.

Completed the four NIMS courses.

Mission: Co-organize and direct the establishment, staffing, and operations of the Alternate Care Site (ACS). Manage and supervise the day-to-day operations of the ACS in accordance with predetermined policies.

Located: ACS Command Center CHS 490 (# 331-5929)

Reports to: State and Region 6 Disaster Response Teams
Telephone #'s: _____
State/Region _____
MCC _____ Spectrum _____

Immediate

- ___ Co-Initiate the ACS Emergency Incident Command System by assuming role of GVUS ACS Administrator.
- ___ Read this entire Job Action Sheet.
- ___ Put on position identification badge
- ___ Apprise both the Dean of Nursing and the Dean of the College of Health Professions of the situation.
- ___ Establish communications with GVSU Facilities Management, President's office and Office of Academic Affairs.
- ___ Request that Facilities Management unlock all internal CHS rooms within CHS for ACS use and open LR elevator access to the designated morgue and loading dock elevator.
- ___ Notify GVSU Crisis Communication Group that CHS will be closed to all academic activities.
- ___ Attending meetings with Spectrum ACS Administrator and all the pre-selected Section Directors and critical staff.
- ___ Assign a Documentation Recorder/Aide.
- ___ Review status reports and discuss an initial Action Plan with the Spectrum ACS Administrator as the ACS is physically established.
- ___ Assist the Spectrum ACS Administrator with facilitating needed accommodations with GVSU for the implementation of the ACS.

Intermediate

- ___ Authorize resources as needed or requested by Spectrum ACS Administrator.
- ___ Establish routine briefings with the Spectrum ACS Administrator to receive status reports and update the Action Plan regarding the continuance and termination of the Action Plan.
- ___ Communicate status of the ACS to GVSU Facilities Management, President's office and Office of Academic Affairs.

Extended

- ___ Send any press releases to GVSU media for approval.
- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

ACS OPERATIONS SECTION

The GVSU ACS Administrator has co-responsibility with the Spectrum ACS Administrator for the entire facility. The following sections are the main components of the ACS:

- Communications Section
- Security/Safety Section
- Community Liaison Section
- Records/Planning Section
- Medical Operations Section
- Supply/Logistics Section
- Finance Section

The sections above are further divided into the following subsections of areas or units:

- **Records/Planning Section**

- Admissions/Registration
- Labor Pool
- Internal Patient Transportation

- **Medical Operations Section**

- Nursing Subunits
- Family Services
- Pharmacy Services
- Temporary Morgue

- **Supply/Logistics Section**

- Maintenance
- Materials/Supply
- Resource Transportation
- Food Service
- Housekeeping

- **Finance Section**

- Cost Accounting
- Time
- Procurement

SPECTRUM ACS ADMINISTRATOR

Immediate

- ___ Initiate the ACS Emergency Incident Command System by assuming role of Spectrum ACS Administrator.
- ___ Read this entire Job Action Sheet.
- ___ Put on position identification badge
- ___ Meet with all the pre-selected Section Directors and critical staff. Direct each section chief to establish his/her section according to procedures established in this document and under the direction of the ACS Administrators.
- ___ Establish communications with the community's Emergency Operations Center (EOC), the Casualty Relocation Unit (CRU) and the supporting hospital's Medical Command Center (MCC).
- ___ Assign a Documentation Recorder/Aide.
- ___ Announce a schedule of status/Action Plan meetings of all Section Directors and Unit Leader
- ___ Receive status reports and discuss an initial Action Plan with Section Directors and Unit Leaders as the ACS is physically established. Determine appropriate level of service to be provided in the ACS based on planning guidance from the MCC.
- ___ Obtain patient census and status from MCC Planning Section Chief. Emphasize the necessity of proactive actions from the Command Center and the Functional Units within the Planning Section. Call for a hospital-wide projection report for 4, 8, 24, and 48 hours from time of initial opening of the ACS. Adjust projections as necessary.

Qualifications. This position of authority must be a healthcare administrator, nurse, or physician executive with knowledge and expertise in Spectrum Health Hospital operations.
Completed the four NIMS courses.

Mission: Co-organize and direct the establishment, staffing, and operations of the Alternate Care Site (ACS). Manage and supervise the day-to-day operations of the ACS in accordance with predetermined policies.

Located: ACS Command Center CHS 490 (#331-5929)

Reports to: State and Region 6 Disaster Response Teams
Telephone #'s:

State/Region _____

MCC _____ Spectrum _____

- ___ Coordinate with the Medical Operations Director to authorize a patient prioritization assessment to allow for designating appropriate early discharge if additional beds are needed.
- ___ Ensure that contact and resource information has been established with outside agencies through the Community Liaison Director.
- ___ Schedule routine meetings with the GVSU ACS Administrator to discuss current status and needs of the ACS.

Intermediate

- ___ Authorize resources as needed or requested by Section Directors.
- ___ Establish routine briefings with Section Directors to receive status reports and update the Action Plan regarding the continuance and termination of the Action Plan.
- ___ Communicate status of the ACS (e.g. bed availability, staffing, etc.) to chairperson of the Hospital Board of Directors and the MCC.
- ___ Consult with Section Directors on needs for staff, physician, and volunteer responder food and shelter. Consider needs for dependents. Authorize plan of action.

Extended

- ___ Approve media releases submitted by _____.
- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

ACS OPERATIONS SECTION

The Spectrum ACS Administrator has co-responsibility with the GVSU ACS Administrator for the entire facility. The following sections are the main components of the ACS:

- Communications Section
- Security/Safety Section
- Community Liaison Section
- Records/Planning Section
- Medical Operations Section
- Supply/Logistics Section
- Finance Section

The sections above are further divided into the following subsections of areas or units:

- Records/Planning Section**

- Admissions/Registration
- Labor Pool
- Internal Patient Transportation

- Medical Operations Section**

- Nursing Subunits
- Family Services
- Pharmacy Services
- Temporary Morgue

- Supply/Logistics Section**

- Maintenance
- Materials/Supply
- Resource Transportation
- Food Service
- Housekeeping

- Finance Section**

- Cost Accounting
- Time
- Procurement

COMMUNICATIONS DIRECTOR

Immediate

- ___ Receive appointment.
- ___ Read this entire Job Action Sheet and review the organizational chart.
- ___ Put on position identification Badge.
- ___ Obtain briefing from ACS Spectrum Administrator.
- ___ Establish a Communications Center in the Communication Section.
- ___ Assess current status of internal and external communication and Cerner computer systems and report to ACS Spectrum Administrator.
- ___ Establish a pool of runners.
- ___ Use pre-established message forms to document all communication.
- ___ Instruct all assistants to do the same.
- ___ Establish contact with Community Liaison Director.
- ___ Receive and hold all documentation related to internal facility communications.
- ___ Monitor and document all communications sent and received via the emergency communication network or other external communication.

Intermediate

- ___ Establish mechanism to alert Fire Suppression Team to respond to internal physical emergencies (i.e., fires, etc).

Extended

- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

Qualifications: This director should have some knowledge of Spectrum emergency operations, IT experience including the knowledge required to set up voice and data networks internally and externally. Completed the four NIMS courses.

Mission: Organize and coordinate internal and external communications; act as custodian of all logged and documented communications.

Location: ACS Command Center CHS 490 (#331-5929).

Reports to: Spectrum ACS Administrator

COMMUNICATIONS SECTION

Function

The function of the Communications Section is to provide command and administrative functions within the ACS and to communicate and coordinate with the city's Emergency Operations Center (EOC).

Staffing/Organization

The Communications Section will be the primary location of the ACS Administrator. All command and administrative functions should be controlled and coordinated out of the CS. The primary communications system will be located within the CS under the direction of the Communications Director. All external communications, reporting, and patient tracking will be accomplished via the Communications Director. Additionally, the Casualty Relocation Unit (CRU) may maintain a communications area within the CS. Two people, the director and a communications specialist, will staff the communications section each shift.

Section Training

All CS staff members must receive ramp-up/extemporaneous training before the opening of the ACS. This training should include, at a minimum, the following information:

- Operational considerations of the city emergency management operations
- Communication channels, both internal and external
- Responsibilities to the supporting hospital
- Organizational structure
- Interdisciplinary workflow
- Financial considerations relative to the emergency event

DIRECTOR LIAISON COMMUNITY

Qualifications: This individual should have experience as In public relations and must have superior communication and interpersonal relations skills. The functions of this director should be aligned with the city public relations department, the Public Information Office (PIO) at the MEMS, the emergency management operations, and the supporting hospital. Completed the four NIMS courses.

Mission: Function as incident contact person for representatives from other agencies.

Location: CHS 490 – ACS Command Center #331-5929

Report to: ACS Spectrum Administrator

Immediate

- ___ Receive appointment from the ACS Administrator.
- ___ Read this entire Job Action Sheet and review the organizational chart.
- ___ Put on position identification badge.
- ___ Obtain briefing from ACS Spectrum Administrator.
- ___ Establish contact with Communications Director in the Communication Section. Obtain one or more aides as necessary from Labor Pool.
- ___ Review county and municipal emergency organizational charts to determine appropriate contacts and message routing. Coordinate with the Communications Director.
- ___ Attend assessment meeting with ACS Administrators.
- ___ Obtain information to provide the inter-hospital emergency communication network, municipal EOC and/or county EOC as appropriate, upon request.

The following information should be gathered for relay:

The number of patients that can be received and treated immediately (patient care capacity) in the ACS.

Any current or anticipated shortage of personnel, supplies, etc.

Current condition of facility and utilities (ACS's overall status).

Number of patients to be transferred by wheelchair/stretchers to the ACS.

Any resources requested by other facilities (i.e. staff, equipment supplies).

- ___ Establish communication with the assistance of the Communications Director with the hospital's emergency communication network, municipal EOC, or with county EOC/County Health Officer. Relay current ACS status.
- ___ Establish contact with liaison counterparts of each assisting and cooperating agency (i.e., municipal EOC). Keep governmental Liaison Officers updated on changes in and development of ACS.

Intermediate

- ___ Request assistance and information as needed through the inter-hospital emergency communication network or municipal/county EOC.
- ___ Respond to requests and complaints from incident personnel regarding inter-organization problems.
- ___ Prepare to assist Labor Pool Unit Leader with problems encountered in the volunteer credentialing process.
- ___ Relay any special information obtained to appropriate personnel in the receiving facility (i.e., information regarding toxic decontamination or any special emergency conditions).

Extended

- ___ Assist the Medical Operations Director and Labor Pool Unit Leader in soliciting physicians and other ACS personnel.
- ___ Inventory any material resources that may be sent upon official request.
- ___ Supply casualty data to the appropriate authorities; prepare the following

minimum data:

Number of casualties received and types of injuries treated

Number admitted and number discharged to home or other facilities

Number dead

Individual casualty data: name or physical description, sex, age, address, seriousness of injury or condition

- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

COMMUNITY LIAISON SECTION

Function

The Community Liaison Section is responsible for being the ACS's interface with volunteer organizations, Accepting donations, public relations, and media communication and is under direction of the Community Liaison Director. The community liaison section will work closely with the MEMS' PIO to release information to the media and general public. As the ACS functions in the concept of the MEMS, it will be the PIO at the MEMS that will normally speak to the media on behalf of the ACS and the MEMS as a whole. This section will maximize communication with the general public, media, and the city's EOC.

Staffing/Organization

The Community Liaison Section will be located near the ACS Administrators, Security/Safety Section, and Communications Section. Depending on the nature of the incident, this section may consist solely of the Community Liaison Director. In many incidents, the director may have one or more assistants depending on his/her needs. The Community Liaison Director will work closely with the ACS Administrators, Communications Director, and Security/Safety Director, as well as the community's OEM and the MCC to ensure that timely and accurate information and updates are disseminated to the public through all available means.

Section Training

All staff members must receive ramp-up/extemporaneous training before the opening of the ACS. This training should include, at a minimum, the following information:

- Operational considerations of the city emergency management operations
- Communication channels, both internal and external
- Responsibilities to the supporting hospital
- Organizational structure
- Interdisciplinary workflow
- Who the community public information officer is (from the OEM or other local responsible agency)
- Local media points of contact (TV, radio, Internet)

MEDICAL OPERATIONS DIRECTOR

Immediate

- _____ Receive appointment, receive the Job Action Sheets for the Medical Operations Section and color coded maps of CHS.
- _____ Read this entire Job Action Sheet and review the organizational chart.
- _____ Put on position identification badge.
- _____ Meet with ACS Administrator and Section Directors for briefing and development of an initial action plan. Establish time for follow up meetings.
- _____ Appoint the Patient Care Coordinator (PCC), the Family Services, Pharmacy and Morgue unit leaders and the Nursing Subunit Supervisors and transfer the corresponding Job Action Sheets.
- _____ Assist in establishing a Medical Operations Section. Review Standing Orders
- _____ Meet with the PCC and Nursing Subunit unit leaders/charge nurses to discuss medical care needs, standing orders, staffing, and material needs in all patient care areas.
- _____ Provide medical staff support to assist with patient priority assessment to designate those eligible for early discharge.
- _____ Establish two-way communication (radio or runner) with Admissions Supervisor and Nursing Subunit Supervisors.

Intermediate

- _____ Meet regularly with PCC and Nursing Subunit Supervisors to assess current and project future patient care conditions.
- _____ Brief ACS Spectrum Administrator Routinely on the status/quality of Medical care.

Extended

- _____ Observe all staff, volunteers, and patients for signs of stress, fatigue, And inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

Qualifications: Licensed physician with experience in emergency medicine who should have inpatient privileges at Spectrum. Completed the four NIMS courses.

Mission: Organize and direct the overall delivery of medical care in all areas of the ACS.

Location: CHS 490 ACS Command Center (#331-5929) with addition staffing space in CHS 240 (331-5893).

Reports to: ACS Spectrum Administrator

MEDICAL OPERATIONS SECTION

The Medical Operations Section encompasses all clinical areas of the ACS. The Medical Operations Director is a physician responsible for directing the medical care for every patient entering the ACS. The Medical Operations Section consists of four main functional units:

- Nursing Subunits
- Pharmacy Services
- Family Services
- Temporary Morgue

Because the Medical Operations Director is responsible for directing the medical care in the facility, this individual and the nursing subunit supervisors are tasked with ensuring that the staff members in the ACS are operating within the scope of their practice and training. The director should have inpatient privileges at a nearby supporting hospital to ensure continuity and knowledge of the local policies and procedures. The Medical Operations Director should also oversee any ancillary operations within the ACS. If staffing levels permit, each nursing subunit (50 beds) within the ACS will have a registered nurse (RN) unit leader registered nurse assigned to expedite and optimize patient care rendered.

Suggested minimum staffing per 12-hour shift for a 50-bed nursing subunit follows:

- One physician
- One physician's assistant (PA) or nurse practitioner (NP) (physician extenders)
- Six RNs or a mix of RNs and licensed practical nurses (LPN)
- Four nursing assistants/nursing support technicians
- Two medical clerks (unit secretaries)
- One respiratory therapist (RT)
- One case manager
- One social worker
- Two housekeepers
- Two patient transporters

The minimum number of staff providing direct patient care on the 50-bed nursing subunit per 12- hour shift is 12, which includes the physician, 1 physician extenders, 6 nurses, and 4 nursing assistants. The ACS consists of five 50-bed nursing subunits. The physician will be assigned the entire subunit, while the nursing staff will operate in a team approach. Members of the patient care team will have tasks assigned that are consistent with their scope of practice.

RECORDS/PLANNING DIRECTOR

Immediate

- _____ Receive appointment from ACS Admin.
- _____ Read this entire Job Action Sheet and review the organizational chart.
- _____ Put on position identification badge.
- _____ Attend briefing with ACS Administrators and other Section Directors.
- _____ Recruit a documentation aide from the Labor Pool.
- _____ Brief Unit Leaders after meeting with ACS Administrators.
- _____ Provide for a Records/Planning Center.
- _____ Ensure the formulation and documentation of an incident-specific facility Action Plan. Distribute copies to ACS Administrator and all Section Directors.
- _____ Call for projection reports (Action Plan) from all Unit Leaders and Section Directors for scenarios 4, 8, 24, and 48 hours from time of facility opening. Adjust time for receiving projection reports as necessary.
- _____ Appoint individual to document/update status reports from all Section Directors and Unit Leaders for use in decision making and for reference in post-biological warfare evaluate recovery assistance applications.

Intermediate

- _____ Obtain briefings and updates as appropriate. Continue to update and distribute the facility Action Plan.
- _____ Schedule planning meetings to include Records/Planning Unit Leaders. Then brief other Section Directors and the ACS Admin. on continued update of the facility Action Plan.

Extended

- _____ Continue to receive projected activity reports from Section Directors and Records/Planning Unit Leaders at appropriate intervals.
- _____ Assure that all requests are routed and documented through the Communications Director.
- _____ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

Qualifications: Spectrum Employee familiar with admissions, discharge or staffing that has completed the four NIMS courses.

Duties: Organize and direct all aspects of Records/Planning Section operations. Ensure the distribution of critical information and data. Compile scenario and resource projections from all section chiefs and effect long-range planning. Document and distribute facility Action Plan.

Location: CHS 490 – ACS Command Center (#331-5929).

Reports to: ACS Spectrum Administrator

RECORDS/PLANNING SECTION

A Records/Planning Director heads this section. This section consists of three functional units:

- Admissions/Registration
- Labor Pool
- Internal Patient Transportation

The Records/Planning Director should work very closely with the ACS Administrators to ensure that patient and personnel status is kept up to date. This section will manage all paperwork generated within the ACS. The Records/Planning Director will staff the Admissions/Registration area with a Patient Care Coordinator (PCC) and will maintain a control register identifying those patients admitted to the ACS. The PCC, while likely co-located with the Records/Planning Section, will support the whole ACS. The PCC's role is similar to a nursing supervisor in a traditional hospital. The PCC will maintain awareness of nursing staff and bed availability. The PCC will direct new patients into nursing subunits that have an available bed and staffing level that is able to receive the patient. As nursing subunits fill up, the PCC will direct patients to the proper subunit.

The ACS is strictly an inpatient facility where patients are usually sent from the NEHC or a hospital's ED. Nonetheless, a record should still be kept of anyone who is administered care, even if that person did not arrive through conventional means (walk-ins).

The Records/Planning Section should also maintain staffing logs identifying anyone working at the ACS in any capacity. Patient registration, treatment, and disposition records are also the responsibility of this section. In addition, this section is responsible for managing all personnel who are not actively assigned to another section within the ACS, such as spontaneous volunteers or staff members who are in an available or out-of-service status within the facility. If staffing permits, a Labor Pool Unit Leader can be appointed to assist the Records/Planning Director with tracking the facility's personnel resources and providing extemporaneous training to new ACS staff members as necessary.

The Records/Planning Director will also supervise the internal patient transport section. The internal patient transport section will be responsible for moving patients from the Admissions/Registration area to their assigned bed or from their assigned bed to the morgue. Depending on their availability and the needs of the nursing staff, the internal transport staff may even be asked to assist in physically repositioning bed bound patients.

SECURITY/SAFETY DIRECTOR

Immediate

- ___ Receive appointment.
- ___ Read this entire Job Action Sheet and review the organizational chart.
- ___ Put on position identification Badge.
- ___ Obtain a briefing from the ACS Administrators.
- ___ Implement the facility's disaster plan emergency lockdown policy and personnel identification policy.
- ___ Establish Security Command Post.
- ___ Implement the use of radio communication system for security personnel.
- ___ Evacuate non-essential personnel and students from the building.
- ___ Establish ambulance and supply entry and exit routes in cooperation with Transportation Unit Leader.
- ___ Secure the Communication Section, Admissions Area, patient care units, morgue, and other sensitive or strategic areas from unauthorized Access.

Intermediate

- ___ **Contact the Rapid to provide continuous busing to Seward and Spectrum lots**
- ___ Keep Security and Safety staff alert to identify and report all hazards and unsafe conditions to the Security/Safety Director.
- ___ Secure areas where patients are evacuated to and from, to limit unauthorized personnel Access.
- ___ Initiate contact with fire and police agencies through the Community Liaison Director, when necessary.
- ___ Attend assessment meeting with ACS Admin.
- ___ Advise the ACS Administrator and Section Directors immediately of any unsafe, hazardous, or security-related conditions.
- ___ Prepare to manage large numbers of potential volunteers.
- ___ Confer with Community Liaison Director to establish areas for media personnel.
- ___ Establish routine briefings with ACS Administrator.
- ___ Provide vehicular and pedestrian traffic control.
- ___ Secure food, water and medical resources for staff.
- ___ Inform Security/Safety staff to document all actions and observations.

Extended

- ___ Establish routine briefings with Security/Safety staff.
- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

Qualifications. This director must be a Spectrum or GVSU security officer with a background in law enforcement. Skills such as emergency treatment and/or basic life support (BLS) would be desirable. Completed the four NIMS courses.

Mission: Monitor and have authority over the safety of patients and staff in the ACS. Organize and enforce facility protection and traffic security.

Location: CHS 490 – ACS Command Center (#331-5929) Security staff rooms; CHS 189, Main lobby (#331-5814) and CHS 015

Reports to: ACS Spectrum Administrator

SECURITY/SAFETY SECTION

Function

The Security/Safety Section's function is to monitor the safety and security of patients and staff in the ACS. This section will be responsible for providing, monitoring, and assessing the security needs of the ACS and its patients.

Staffing/Organization

All security personnel will report to the Security/Safety Director and will receive their assignments in CHS 189. All Security/Safety concerns and activities of the ACS are the responsibility of this section. All communications from this section to external sources will be coordinated with the ACS Administrator and the Community Liaison Director.

Section Training

All staff members must receive ramp-up/extemporaneous training before the ACS opens. This training should include, at a minimum, the following information:

- Operational considerations of the city emergency management operations
- Communication channels, both internal and external
- Responsibilities to the supporting hospital
- Organizational structure
- Interdisciplinary workflow
- Security access policies and procedures including Visitor/Staff ID checks at entry points

SUPPLIES & LOGISTICS DIRECTOR

Immediate

- _____ Receive appointment.
- _____ Read this entire Job Action Sheet and review the organizational chart.
- _____ Put on position identification Badge.
- _____ Obtain briefing from ACS Administrator.
- _____ Assign one to two individuals for the Following Unity Leader positions:
 - _____ Materials/Supply
 - _____ Housekeeping
 - _____ Maintenance
 - _____ Food Service
 - _____ Resource Transportation
- _____ Brief Unit Leaders on current situation; distribute Job Action Sheets, outline action plan and designate time for next briefing.
- _____ Establish Logistics Section in proximity to Communications Section (CS).
- _____ Attend assessment meeting with ACS Administrator.

Intermediate

- _____ Obtain information and updates regularly from Unit Leaders and Directors; maintain current status of all areas; pass status information to ACS Administrator.
- _____ Communicate frequently with ACS Administrator.
- _____ Obtain needed supplies with assistance of the Finance Director, Communications Director, and Community Liaison Director.

Extended

- _____ Ensure that all communications are copied to the Communications Director.
- _____ Document actions and decisions on a continual basis.
- _____ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

Qualifications. This director should be experienced with Spectrum Health operations. Completed the four NIMS courses.

Mission: Organize and direct those operations associated with maintenance of the physical environment and adequate levels of food, shelter, and supplies to support the medical objectives.

Location: CHS 490-ACS Command Center (#331-5929)

Report to: ACS Spectrum Administrator

SUPPLIES & LOGISTICS SECTION

A Supply/Logistics Director heads this area, often referred to as simply the Logistics Section. This section is responsible for all of the services and support needs of the ACS, including obtaining and maintaining the facility, equipment, and supplies. This section consists of the following six functional units:

- Materials/Supply
- Housekeeping
- Maintenance
- Food Service
- Resource Transportation
- Childcare

This section is tasked with the ordering activities for the procurement of equipment, supplies, food, and drink, as well as the handling of all contracting for services, supplies, and equipment. The Supply/Logistics Section is responsible for ensuring that all the supplies needed throughout the ACS are obtained with the exception of pharmaceutical supplies. Due to the specialized procedures surrounding the acquisition of drugs, this function will be the responsibility of pharmacy services in the Medical Operations Section.

There are specific refrigeration needs in any inpatient facility, including a temporary one such as an ACS. It is essential to refrigerate food, medications and any bodily fluid specimens collected separately.

To ensure that adequate nutrition levels are met, a Food Service Unit Leader should be appointed to coordinate the proper feeding of both patients and staff. This individual can arrange for the delivery of food to the facility through Spectrum's food service and local catering sources. Special attention will need to be given to disease related dietary restrictions.

The Supply/Logistics Director should also appoint a Resource Transportation Unit Leader to manage the internal and external transportation services for personnel, supplies, and equipment. Close communication among the Supply/Logistics Director, the ACS Administrators, and other Section Directors is essential to ensure that the facility's resource needs are anticipated and met.

FINANCE SECTION DIRECTOR

Immediate

- ___ Receive appointment.
- ___ Read this entire Job Action Sheet and review the organizational chart.
- ___ Put on position identification Badge.
- ___ Obtain briefing from ACS Administrator.
- ___ May assign a Cost Accounting Unit Leader if Needed .
- ___ Responsible for working with other section Directors on activities such as providing monies for procuring special equipment or supplies, contracting with vendors, timekeeping, cost analysis, consultation with GVSU Human Resources for compensation of faculty/staff time.
- ___ Attend assessment meeting with ACS Administrator.

Qualifications. This director should be experienced in financial management, preferably with accounting experience in a healthcare facility. Experience is needed in cost accounting, financial resources and resource management. Must have completed all four NIMS courses.

Mission: This director will be responsible for developing a cost accounting plan that will include tracking of expenses and documentation of expenditures relevant to the emergency incident. Data management includes information relative to personnel, supplies, FEMA reimbursement and miscellaneous expenses. In addition, this person will be responsible for working with the other Section Directors on activities such as providing monies for procuring special equipment or supplies, contracting with any vendors, timekeeping, cost analysis, consultation with GVSU Human Resources for the compensation of faculty/staff time, if appropriate, and other financial aspects of the incident. An additional Cost Accounting Unit Leader may need to be allocated for this function.

Location: CHS 490- ACS Command Center (#331-5929)

Report to: ACS Spectrum Administrator

Intermediate

- ___ Obtain information and updates regularly from Unit Leaders and Directors; maintain current status of all areas; pass status information to ACS Administrator.
- ___ Communicate frequently with ACS Administrator.
- ___ Obtain needed supplies with assistance of the Finance Director, Communications Director, and Community Liaison Director.

Extended

- ___ Ensure that all communications are copied to the Communications Director.
- ___ Document actions and decisions on a continual basis.
- ___ Observe all staff, volunteers, and patients for signs of stress, fatigue, and inappropriate behavior. Provide for staff rest periods and relief.

Other concerns: Return Job Action Sheet Badge to CHS 123 at the End of Shift.

SUBUNIT 1 PHYSICIAN

Qualifications: Medical or osteopathic degree with residency training (2 years beyond postgraduate) required for physicians. Board certified and licensed physician

Duties: Physicians are responsible for directing the medical care provided in the ACS. This includes the medical evaluation, diagnosis, treatment, and disposition of the patient. All physicians who staff the ACS should be credentialed, including the Medical Operations Director.

Located: 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903)
Reports to: Medical Operations Director CHS 490 (#1-5929) or Located in the Medical Command Center CHS 240 (#1-5893).

- ACS Command Center CHS 490, # 1-5929
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

**Return Job Action Badge to
CHS 123 at the End of Shift**

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PHYSICIAN ASSISTANT SUBUNIT 1

- ACS Command Center CHS 490
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby
CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

Qualifications: PAs must have completed their required education and passed the appropriate licensure examination. Pediatric experience is strongly suggested if caring for children.

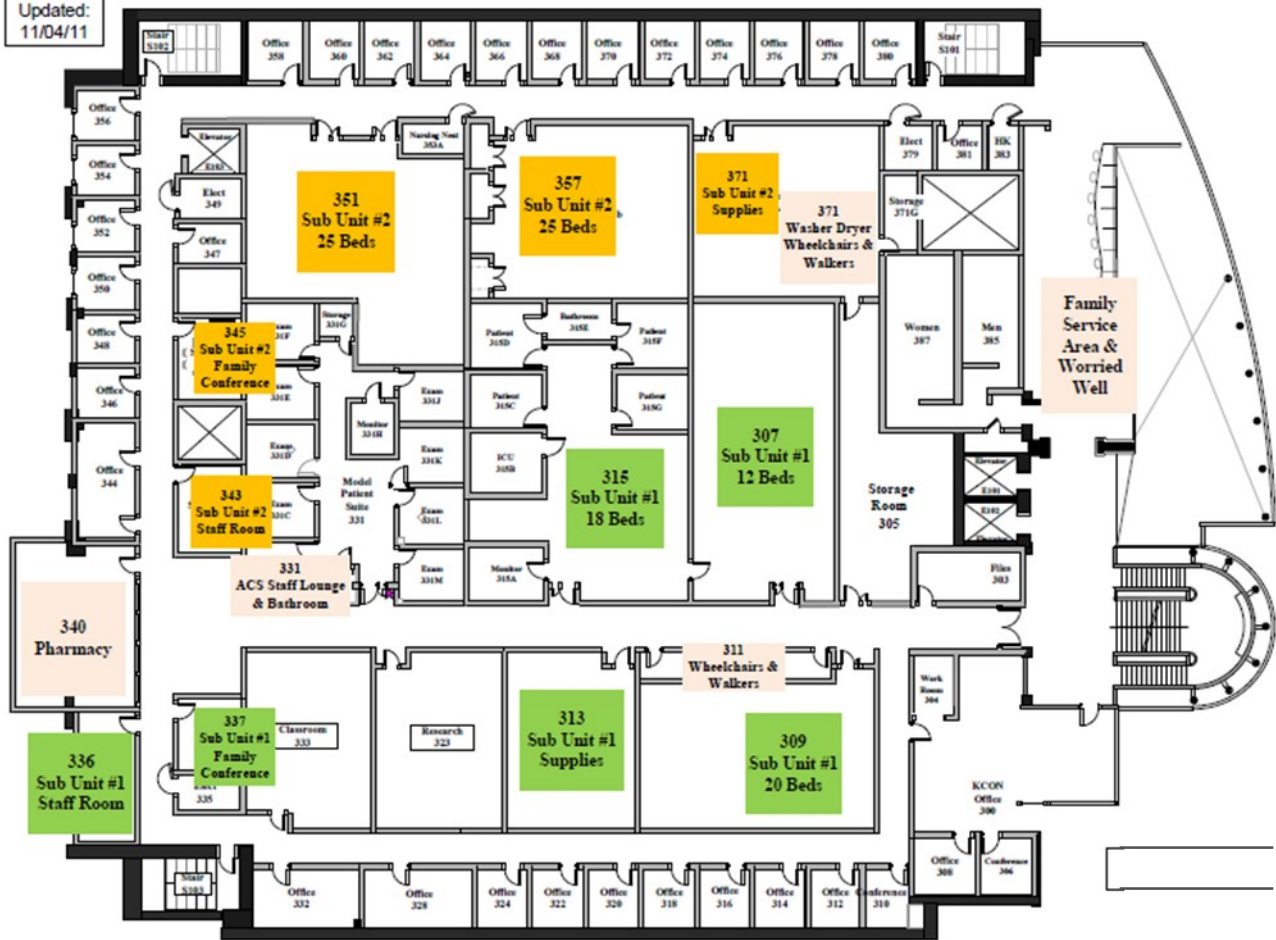
Duties: The physicians, PAs and NPs are responsible for all medical care provided. This includes the evaluation, diagnosis, treatment, disposition of the patient and the direction and coordination of all other care provided to the patient. Per pod, one of these persons may be assigned to assist the Medical Operations Director in the administrative aspects of medical care as well as provide oversight of the other physicians.

Located: 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903).

Reports to: Subunit-One Physician

Return Job Action Badge to CHS 123 at the End of Shift

Updated:
11/04/11



NURSE PRACTITIONER SUBUNIT 1

- ACS Command Center CHS 490
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby
CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

Qualifications: NPs must have completed their required education and passed the appropriate licensure examination. Pediatric experience is strongly suggested if caring for children.

Duties: The physicians, PAs and NPs are responsible for all medical care provided. This includes the evaluation, diagnosis, treatment, disposition of the patient and the direction and coordination of all other care provided to the patient. Per pod, one of these persons may be assigned to assist the Medical Operations Director in the administrative aspects of medical care as well as provide oversight of the other physicians.

Located: 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903).

Reports to: Subunit-1 Physician

Return Job Action Badge to CHS 123 at the End of Shift

Updated:
11/04/11



NURSE REGISTERED

Qualifications: Graduation from an appropriate accredited program and current licensure in a U.S. state is required. One year of practical experience and current cardiopulmonary resuscitation (CPR) certification is required. Pediatric experience would also be helpful.

Duties: These nurses are responsible for the nursing care of all patients, including assessment planning, treatment, and evaluation of response to medical interventions. Additional requirements include assisting physicians in exams, treatment, and procedures. The RN is also responsible for performing all activities essential for the provision of quality care as well as initial patient contact, screening, and assessment. Provision of patient follow-up instructions, administration of medications, documentation, and the recording of all controlled substances dispensed on a narcotic count sheet are also required functions. The nurse must also document assessment procedures and outcomes on charts as per protocol. It is also required that the nurse be able to abandon traditional concepts of total patient care and accept the disaster protocols for rapid evaluation/distribution of patients; he/she must be able to remain calm in a crisis. Proficient patient assessment skills are essential.

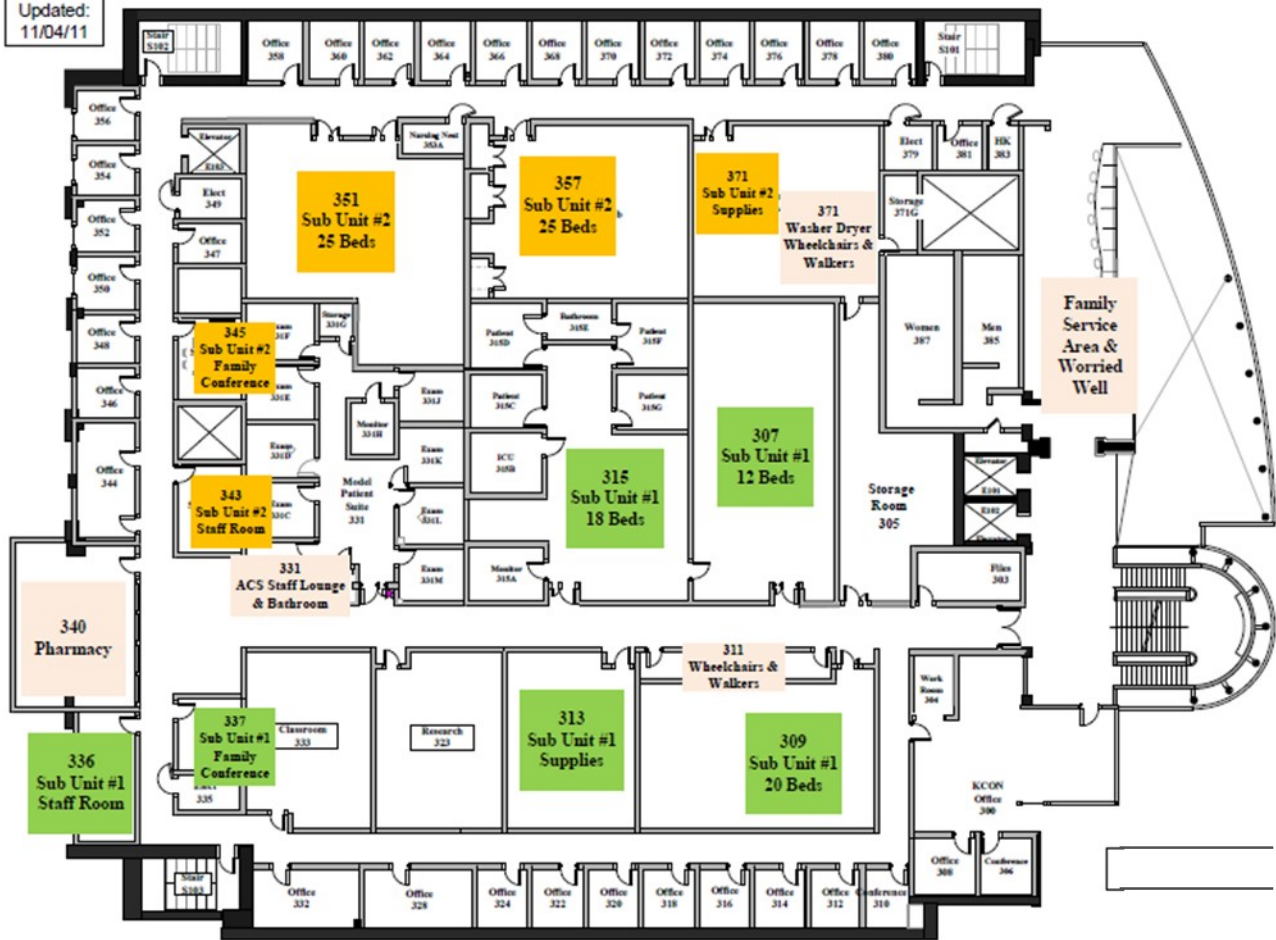
Located: 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903).

Reports to: Subunit 1 - Unit Leader

- ACS Command Center CHS 490
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby
CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

Return Job Action Badge to CHS 123 at the End of Shift

Updated:
11/04/11



RN UNIT LEADER SUBUNIT 1

- ACS Command Center CHS 490
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby
CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

Qualifications: Graduation from an appropriate accredited program and current Licensure in a U.S. state is required. One year of practical experience and current cardiopulmonary resuscitation (CPR) certification is required. Pediatric experience would also be helpful. For placement in a supervisory capacity, this RN should have some staff supervisory experience.

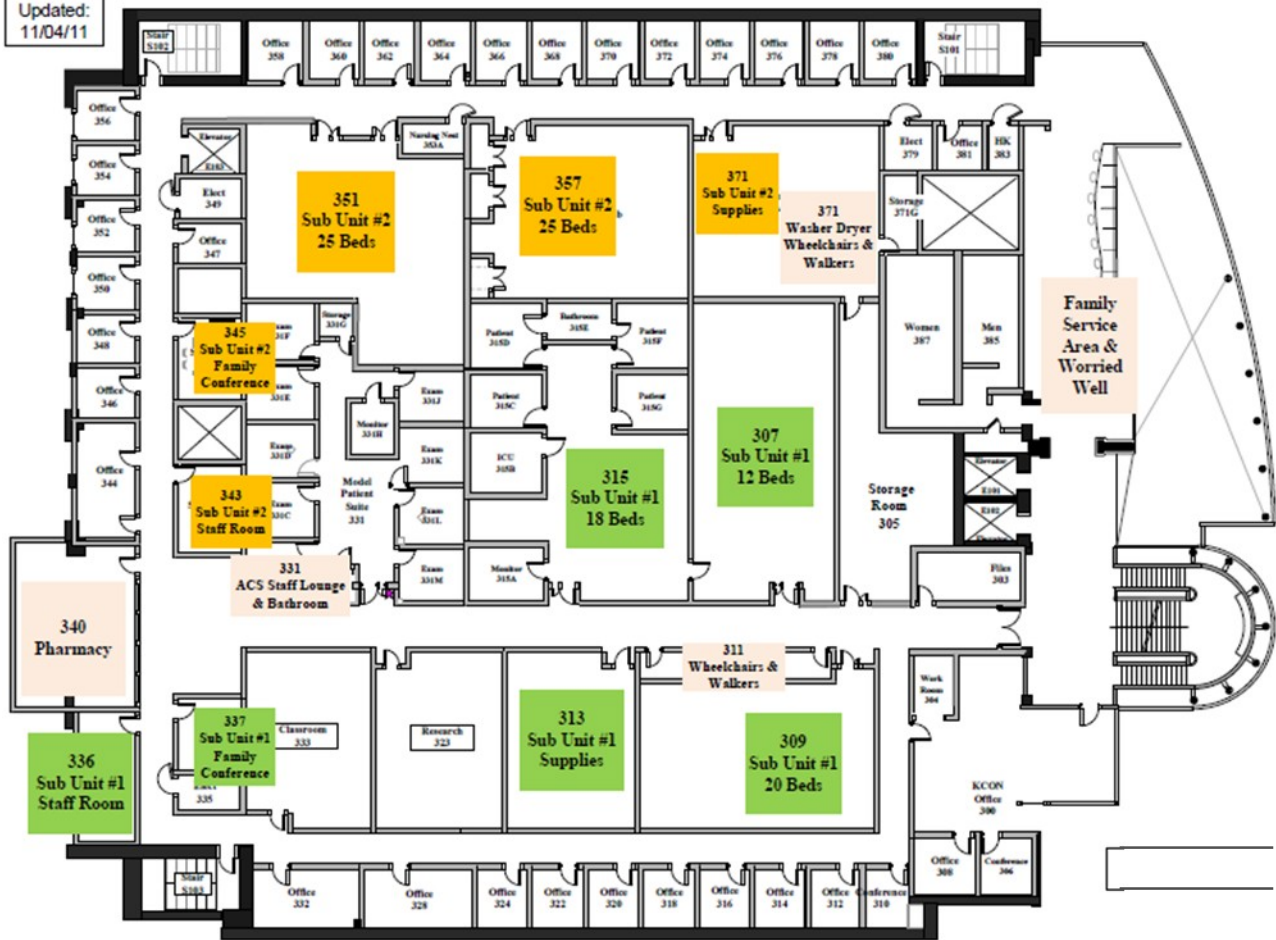
Duties: One RN for each subunit will be assigned as Unit Leader. The Unit Leader is responsible for communications out of the unit including the needs/status of the unit and bed availability to the Medical Operations Section Director or Records/Planning Section Director. Unit Leaders are also members of the nursing team responsible for nursing care of all patients, including assessment planning, treatment, and evaluation of response to medical interventions. Additional requirements include assisting physicians in exams, treatment, and procedures. The RN is also responsible for performing all activities essential for the provision of quality care as well as initial patient contact, screening, and assessment. Provision of patient follow-up instructions, administration of medications, documentation, and the recording of all controlled substances dispensed on a narcotic count sheet are also required functions. The nurse must also document assessment procedures and outcomes on charts as per protocol. It is also required that the nurse be able to abandon traditional concepts of total patient care and accept the disaster protocols for rapid evaluation/distribution of patients; he/she must be able to remain calm in a crisis. Proficient patient assessment skills are essential.

Located: 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903).

Reports to: Nursing Subunit 1 - Physician

Return Job Action Badge to CHS 123 at the End of Shift

Updated:
11/04/11



MEDICAL CLERK SUBUNIT 1

Qualifications: This individual must be a high school graduate, and some medical office training is preferred. A medical clerk must be familiar with medical record keeping and terminology and must have experience in controlling a busy traffic flow area. A calm, poised, mature individual displaying sound judgment is required. This clerk must also be willing to assist staff as necessary.

Duties: The clerk is responsible for maintaining a casualty disposition log in addition to managing the flow of patients, answering telephones, managing paperwork and supplies for the area, and coordinating patient transportation with internal transportation services.

Located: Subunit 1, 3rd Floor: 12 beds CHS 307, 18 beds CHS 315 and 20 Beds 309. Unit Supplies CHS 313, Staff Room CHS 336 (#1-5913) & Family Conference Room CHS 337 (#1-5903).

Reports to: Subunit 1 – RN Unit Leader

- ACS Command Center CHS 490
- ACS Staff Locker room & Bathroom CHS 239
- ACS Staff Lounge with Bathroom: CHS 331, #1-5926
- ACS Staff Sleeping area CHS 207
- Admissions & Nursing Triage: CHS 009
- Childcare: CHS 140, #1-5891
- Family Service Areas & Worried Well: Main Floor Lobby
CHS 013, 107, 290, 307 and overflow 507
- Food Prep Area: CHS lower level parking & CHS 161.
- Housekeeping: CHS 113 Ice Makers: CHS 161 & CHS 257
- Labor Pool Briefing: CHS 119, #1-5832
- Medical Command Center CHS 240, #1-5893
- Michigan Volunteer Registry CHS 191
- Morgue: CHS LL001, #1-5898
- Pharmacy: CHS 340, #1-5892
- Security: CHS Main Lobby Desk, #1-5814
- Spectrum Run ID & Job Action Sheet Distribution: CHS 123
- Stored Wheelchairs/Walkers: CHS 205, 257, 311, 371
- Washer & Dryer: CHS 371

Return Job Action Badge to CHS 123 at the End of Shift

Updated:
11/04/11



CHS - 3rd Floor