



Pandemic Plan for the Church

Ministering to the Community in a Time of Crisis

Incident Command System

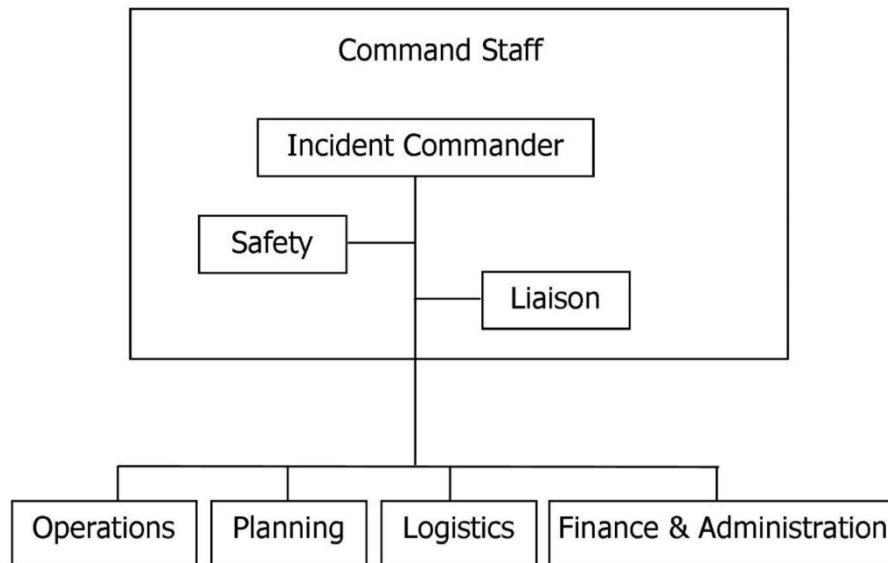
As questions are raised and answered, it is vital to know who is responsible for making decisions and communicating the answers both to the staff and to the community. Healthcare facilities accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) are required to use an incident management system that assimilates with that of the community

Incident Command System (ICS), also known as the Incident Management System (IMS), is not generally considered a medical term. It is; however, used regularly by military and emergency services. Advantages to setting up a plan based on this system allow for changes to be made to fit the scope of the event, as well as allowing your organization to communicate effectively with others in the community. According to JCAHO, the use of similar terms as those in the community allows for smooth integration when communicating with others outside of the organization during the event.

Incident management is based on the Incident Command System (ICS) which is a structured system controlling personnel, facilities, equipment, and communications. Please don't let this structured system intimidate you. As a matter of fact, there is probably a fire fighter or EMT that attends your services who can explain this structure and help to set one up. Once you understand how it works, you may even apply it to your daily operations. Perhaps to try it out you might apply the strategy to your next big event like a special speaker, concert, or revival. It provides the framework to identify and access the problem, develop a plan, implement the plan, and procure and pay for necessary resources. These features include:

- Common terminology – use of plain English, not codes, ensures efficient and clear communication
- Modular organization
- Management by objectives
- Reliance on an incident action plan
- Chain of command and unity of command
- Manageable span of control
- Integrated communications
- Transfer of command
- Accountability

The ICS structure is designed to be flexible, expanding or contracting with the needs of the incident. As needs and demands of the incident expand, the incident commander (IC) will assign people, called “Section Chiefs”, to help manage the incident. The structure and section chiefs are seen in the chart below.



Incident Command Structure

Although this may seem a much-regimented format for church members, remember you are coming alongside your healthcare community. This type of structure has been adopted by all those in emergency systems and healthcare for the sake of being able to work together in a communal way with others in continuity. Learning and understanding the ICS structure will benefit you with communications, following instructions, and increase your effectiveness.

- Incident Commander - The Incident Commander performs all major ICS command and staff responsibilities unless delegated and assigned. This is the only position that is always staffed. If the Incident Commander must leave the premises, the position is then delegated to another qualified person. This position might be occupied by the pastor, or someone chosen who is more qualified. Perhaps a staff member from the health care facility or health department may fill this place.

The Incident Commander should only be in contact with other team leaders. Other personnel should only be approaching their respective team leaders. Following this chain of command avoids confusion, and additional stress on the commander.

All contacts with the media should be directed to the Incident Commander. No one should be speaking to the press, unless otherwise delegated.

- Safety Officer – Advises the Incident Commander of issues regarding safety. This position works with Operations to ensure the safety of all personnel. In a pandemic event, this position ensures compliancy of personnel in wearing PPE, hand washing,

proper use of disinfectants, and other infection control practices. This position will also ensure the safety of the patients and that they too are compliant in wearing masks. For more information on PPE, see the section on “Infection Control”.

In addition to ensuring all personnel take effective infection control measures, the Safety Officer is in charge of all aspects of safety on the premises, including all phases of duties performed at the ACF.

- Liaison Officer – assists the Incident Commander by serving as the point of contact for outside organizations who are helping to support the operation but are not directly under the ICS. This position also provides the answers to the questions that may have been raised by supporting groups. This might include communicating with the health department, the hospital, emergency services, or even other churches in the community. This helps free up the Commander from getting involved in outside conversations.
- Operations Officer – oversees all activities in the area of operations. This officer is responsible for determining the appropriate strategies for an incident. In a clinic scenario, this would include overseeing the staff and clinical duties carried out during the disaster. In many cases this position may be broken down into additional sections for further delegation if the duties exceed the span of control. This particular position would need the expertise of both the healthcare community and a member of the church. If this position were divided equally between a healthcare provider and a church staff member, then all parties’ interests would be considered when making decisions.

Since the primary operation of an ACF is to provide medical care, some of the responsibilities of this position are:

- Ensure the check in process of patients is being handled properly
 - Ensure proper documentation is being completed by team members
 - Ensure proper assessments are being conducted.
 - Ensure proper placement of patients
 - Ensure patient flow is smooth and ascertains any problems
 - Be the contact for communications with other sections
 - Ensure personnel are getting food, rehydration, and breaks
 - Ensures patient care is being rendered to the standard of care established.
 - Ensures housekeeping duties are being performed properly
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- Planning – This person should be someone who has been a part of the planning process from the beginning. They are responsible for maintaining the flow of the plan in action. They should be familiar with all aspects of the overall operation, so they would be considered technical advisors. They should observe, collect and

evaluate information, and maintain any documentation for the incident record. This position may also be assigned to oversee specific areas in operations.

- Logistics – The logistics officer is responsible for meeting the operational objectives. For example, communications and information technology systems (computers), staff health and well-being, food and water for personnel, supplies, labor pool (volunteers), and maintenance of the equipment and facilities. Basically, this is the person who keeps everything running smoothly. This position would work closely with both operations and finance, after all they will be serving operations, but it is finance that will be providing the funds for procurement.
- Financing and Administration – The responsibilities for this position include timekeeping and salaries, cost analysis, handling claims, and billing. For the purposes of this plan, it would also include patient records and handling of funds. The money involved in an ACF is not only that which is collected from the healthcare facility for patient care. This should be led by a healthcare administrative person. There are costs involved such as the purchase of food and water, fuel, operational costs such as heating and electricity. This position requires the accounting for all money exchanged for the duration of the event. It is also this position that keep records for the patients as well as the volunteers. It would be the responsibility of this officer to obtain patient records and ensure that HIPPA laws are maintained to protect the patient's privacy. In addition, the records of volunteers, credentials, and photos should all be maintained. In essence all paperwork that is generated at the ACF is to be funneled to and maintained by this officer.

While working with the healthcare provider during the planning process, determine up front what costs will be covered by the provider. Also be aware that if a state of emergency is called, there may be some compensation for money spent. If you have a person on your team who understands grants, consider applying for one. I know where God guides, God provides.

Expanding on each position and naming deputies and team leaders would be prudent, especially in a large and extended event. Bearing in mind the scope of each position, depending upon the experience of your staff or members, you may consider allowing the healthcare facility to choose the personnel. However, it is vital that you and your church play a role in ensuring that all is being handled according to our beliefs and practices. Remember this is for the glory of God and to further His Kingdom.

Enacting an Incident Command System enables those responding and working in operations clear and concise channels to follow when dealing with problems or questions that may arise. A clear chain of command avoids miscommunications, and keeps staff focused on the task they are assigned. While still in the planning stages, when you meet with the health department or hospital with whom you will be partnering, ask for their help in this area. They should be very familiar with ICS.

For more information, printed materials, and even online courses, please visit the Incident Command System Resources web page at <https://www.fema.gov/incident-command-system-resources#>.