

ACCESS AND FUNCTIONAL NEEDS LIAISON OFFICER

Mission: The AFN Liaison Officer function is to represent the AFN community to the Hospital Command Center, and the Hospital Command Center to the AFN community. The AFN Liaison Officer is the primary point of contact for all representatives from public and private organizations regarding issues affecting the AFN community, and is to ensure that the Incident Commander and appropriate Command Staff are informed as to what the AFN needs are throughout each phase of the disaster. The AFN Liaison Officer will integrate AFN across the organization.

Position Reports to: Incident Commander		Command Location: _____
Position Contact Information: Phone: () - _____		Radio Channel: _____
Hospital Command Center (HCC): Phone: () - _____		Fax: () - _____
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
<p>Receive appointment</p> <ul style="list-style-type: none"> • Obtain briefing from the Incident Commander on: <ul style="list-style-type: none"> ○ Size and complexity of incident ○ Expectations of the Incident Commander ○ Incident objectives ○ Involvement of outside agencies, stakeholders, and organizations ○ The situation, incident activities, and any special concerns • Assume the role of AFN Liaison Officer • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment 		
<p>Assess the operational situation</p> <ul style="list-style-type: none"> • Initiate environmental monitoring as indicated by the incident or hazardous condition 		
<p>Determine the incident objectives, tactics, and assignments</p> <ul style="list-style-type: none"> • Establish contact with local public safety agencies as well as other hospitals, as appropriate to access any pertinent safety information • Provide information to the Incident Commander including AFN-related capabilities and limitations 		
<p>Activities</p> <ul style="list-style-type: none"> • Determine AFN risks of the incident and response activities to patients, hospital personnel, and visitors as well as to the hospital and the environment • Advise the Hospital Incident Management Team (HIMT) of any unsafe conditions and corrective recommendations • Evaluate the building or incident hazards and identify vulnerabilities 		



ACCESS AND FUNCTIONAL NEEDS LIAISON OFFICER

<ul style="list-style-type: none"> • Specify the type and level of personal protective equipment (PPE) to be used by hospital personnel to ensure their protection, based on the incident or hazard • Post non-entry signage around unsafe or restricted areas, as needed • Attend all briefings and Incident Action Plan (IAP) meetings to gather and share incident and hospital safety requirements • Monitor operational safety of decontamination operations, if applicable • Ensure that safety team members, if assigned, identify and report all hazards and unsafe conditions • Assess hospital operations and practices of staff; terminate and report any unsafe operation or practice; recommend corrective actions to ensure safe service delivery 		
<p>Documentation</p> <ul style="list-style-type: none"> • HICS 203: Review the Organization Assignment List • HICS 204: Appoint team members, if assigned, and complete the Assignment List • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis • HICS 215A: Complete the Incident Action Plan (IAP) Safety Analysis; document identified safety issues, mitigation strategies and assignments 		
<p>Resources</p> <ul style="list-style-type: none"> • Obtain non-entry signage around unsafe or restricted areas, as needed • Request one or more recorders as needed from the Logistics Section Labor Pool and Credentialing Unit Leader, if activated, to perform documentation and tracking 		
<p>Communication</p> <p><i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i></p>		
<p>Safety and security</p> <ul style="list-style-type: none"> • Determine safety risks of the incident and response activities to patients, staff and visitors as well as to the hospital and the environment • Advise Hospital Incident Management Team (HIMT) staff of any unsafe conditions and corrective recommendations • Evaluate building or incident hazards and identify vulnerabilities • Specify type and level of personal protective equipment (PPE) to be utilized by staff to ensure their protection, based on the incident or hazardous condition 		

Intermediate Response (2 – 12 hours)	Time	Initial
<p>Activities</p> <ul style="list-style-type: none"> • Transfer the Safety Officer role, if appropriate: <ul style="list-style-type: none"> ○ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital ○ Address any health, medical, and safety concerns ○ Address political sensitivities, when appropriate ○ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Continue to assess safety risks of the incident to all personnel, the hospital, and the environment • Ensure proper equipment needs are met and equipment is properly functioning throughout the response 		

ACCESS AND FUNCTIONAL NEEDS LIAISON OFFICER

<ul style="list-style-type: none"> Attend all command briefings and Incident Action Plan (IAP) meetings to gather and share incident and hospital information Contribute safety issues, activities, and goals to the IAP Advise Hospital Incident Management Team (HIMT) staff of any unsafe conditions and corrective recommendations 		
Documentation <ul style="list-style-type: none"> HICS 204: Document assignments and operational period objectives on Assignment List HICS 213: Document all communications on a General Message Form HICS 214: Continue to document all actions and observations on the Activity Log on a continual basis HICS 215A: Continue to update the Incident Action Plan (IAP) Safety Analysis for inclusion in the hospital IAP 		
Communication <i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i>		
Safety and security <ul style="list-style-type: none"> Continue to assess safety risks of the incident to all personnel, the hospital, and the environment Ensure proper equipment needs are met and equipment is properly functioning throughout the response 		

Extended Response (greater than 12 hours)	Time	Initial
Activities <ul style="list-style-type: none"> Transfer the Safety Officer role, if appropriate <ul style="list-style-type: none"> Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital Address any health, medical, and safety concerns Address political sensitivities, when appropriate Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) Continually reassess the safety risks of the extended incident to patients, hospital staff, and visitors and to the hospital and the environment Identify corrective actions and revise the HICS 215A: Incident Action Plan (IAP) Safety Analysis Attend all briefings and IAP meetings to gather and share incident and hospital information Advise Hospital Incident Management Team (HIMT) staff of any unsafe conditions and corrective recommendations Observe hospital personnel and volunteers for signs of stress and inappropriate behavior Respond to any reports of stress or inappropriate behavior in conjunction with the Logistics Section Employee Health and Well-Being Unit Leader Contribute safety issues, activities, and goals to the IAP as needed beyond HICS 215A: Incident Action Plan (IAP) Safety Analysis 		
Documentation <ul style="list-style-type: none"> HICS 204: Document assignments and operational period objectives on 		

ACCESS AND FUNCTIONAL NEEDS LIAISON OFFICER

<p>Assignment List</p> <ul style="list-style-type: none"> • HICS 213: Document all communications on a General Message Form • HICS 214: Continue to document all actions and observations on the Activity Log on a continual basis • HICS 215A: Continue to update the Incident Action Plan (IAP) Safety Analysis for inclusion in the hospital IAP 		
<p>Communication <i>Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners</i></p>		
<p>Safety and security</p> <ul style="list-style-type: none"> • Continue to assess hospital operations and practices of staff, and terminate and report any unsafe operation or practice, recommending corrective actions to ensure safe service delivery • Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques • Observe all staff and volunteers for signs of stress and inappropriate behavior • Respond to any reports of stress or inappropriate behavior in conjunction with the Logistics Section Employee Health and Well-Being Unit Leader 		

Demobilization/System Recovery	Time	Initial
<p>Activities</p> <ul style="list-style-type: none"> • Transfer the Safety Officer role, if appropriate: <ul style="list-style-type: none"> ○ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital ○ Address any health, medical, and safety concerns ○ Address political sensitivities, when appropriate ○ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • As objectives are met and needs for incident related safety decrease, return staff to their normal jobs and combine or deactivate positions in a phased manner, as applicable • Ensure the return or retrieval of equipment and supplies used during the response • Participate in stress management and after action debriefings • Participate in other briefings and meetings as required • Brief the Incident Commander on current problems, outstanding issues, and follow-up requirements • Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Improvement Plan. Topics include: <ul style="list-style-type: none"> ○ Review of pertinent position activities and operational checklists ○ Recommendations for procedure changes ○ Accomplishments and issues 		
<p>Documentation</p> <ul style="list-style-type: none"> • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to Planning Section Documentation Unit 		

ACCESS AND FUNCTIONAL NEEDS LIAISON OFFICER

Documents and Tools

- Incident Action Plan
- HICS 203 - Organization Assignment List
- HICS 204 - Assignment List
- HICS 205A - Communications List
- HICS 213 - General Message Form
- HICS 214 - Activity Log
- HICS 215A - Incident Action Plan (IAP) Safety Analysis
- HICS 221 - Demobilization Check-Out
- HICS 252 - Section Personnel Time Sheet
- Hospital Emergency Operations Plan
- Incident Specific Plans or Annexes
- Material safety data sheets (MSDS) or other information regarding involved chemicals (ATSDR, CHEMTREC, NIOSH handbook)
- Hospital organization chart
- Hospital telephone directory
- Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication