**JOB ACTION SHEETS**

Job Action Sheets are included for the following FIC positions:

* Family Reunification Unit Leader
* FIC Family Services Specialist
* FIC Registration and Tracking Specialist
* FIC Unaccompanied Minors Specialist
* FIC Call Center Specialist
* FIC “Start Up” Job Action Sheet

Specialists in the FIC are responsible for specific functional areas and can be expanded into “groups” as required by the number of family members reporting to the FIC. In FIC activation, initial staffing may include only one Family Reunification Unit Leader, Registration and Tracking Specialist and Family Services Specialist. Additional staff as well as an Unaccompanied Minors Specialist and call center staff may be added as required. It is assumed that other support services, including security, mental health counseling, spiritual support, facility maintenance, and nursing will be provided as needed by existing units within the healthcare entity.

In some cases, a single person may be assigned the responsibility to “start up” and operate the FIC until additional staffing can be provided. The “Start Up” Job Action Sheet is provided for this purpose.

Family Reunification Unit Leader

**Mission:** Organize and manage the operations of the FIC, including personnel, equipment, and supplies.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: ICS Patient Family Assistance Branch Director** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| --- | --- | --- |
| Receive appointment and briefing from the Patient Family Assistance Branch Director.  |  |  |
| Read this entire Job Action Sheet and review incident management team chart (ICS Form 207).  |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| **Establish a call center** as part of the FIC or notify the facility’s existing call center regarding the anticipated increase in calls from families seeking patient information. Obtain the extension for the call center. |  |  |
| Determine need for and appropriately appoint FIC team members, distribute corresponding Job Action Sheets / Information Sheets and position identification. Complete the Group Assignment List. |  |  |
| **Contact the MAC to determine if the FAC is activated**. Ensure that the FAC telephone number (for use by designated FIC staff only, not for families), and the FAC address, are noted. Obtain a primary contact for the FAC and for other FICs that may be activated. |  |  |
| Document all key activities, actions, and decisions in an Operational Log (ICS Form 214) on a continual basis. |  |  |
| **Brief the FIC team members** on current situation; outline action plan and designate time for next briefing. |  |  |
| **Ensure that the FIC has been inspected** and that any unsafe conditions have been corrected. |  |  |
| **Coordinate with Security** to ensure that appropriate security arrangements have been put into place. |  |  |
| Confirm the designated FIC area is available, to include the call center, and begin distribution of personnel and equipment resources. |  |  |
| Assess problems and needs; coordinate resource management. |  |  |
| Instruct all FIC team members to periodically evaluate equipment, supply, and staff needs and report status to you; collaborate with Logistics Section Supply Group Supervisor to address those needs; report status to supervisor. |  |  |
| **Notify the Command Center and administrative staff that FIC is activated**. Request that the Command Center notify appropriate external stakeholders including EMS, the incident FAC, and the jurisdictional EOC. |  |  |
| Document all communications (internal and external) on an Incident Message Form (ICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit. |  |  |
| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
| **Meet regularly with supervisor for status reports**, and relay important information to FIC team members. |  |  |
| Continue coordinating activities in the FIC. |  |  |
| Ensure prioritization of problems when multiple issues are presented. |  |  |
| Coordinate use of external resources; coordinate with Liaison Officer if appropriate. |  |  |
| **Develop and submit a FIC Incident Action Plan** or a portion thereof, to supervisor if requested. |  |  |
| Ensure documentation is completed correctly and collected. |  |  |
| Advise your supervisor immediately of any operational issue you are not able to correct or resolve. |  |  |
| Ensure staff health and safety issues being addressed; resolve with the Safety Officer or other available safety supervisor. |  |  |
| If unaccompanied minors are present at the FIC, request Unaccompanied Minor Group staff be assigned to the FIC, and **initiate establishment of an Unaccompanied Minor Safe Area**. |  |  |
| Provide regularly and frequent updates to staff regarding the incident and FIC operations. |  |  |
| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| Continue to monitor the FIC team’s ability to meet workload demands, staff health and safety, resource needs, and documentation practices. |  |  |
| Coordinate assignment and orientation of external personnel sent to assist. |  |  |
| Work with the Operations Chief and Liaison Officer, as appropriate, on the assignment of external resources. |  |  |
| **Rotate staff on a regular basis.** |  |  |
| Document actions and decisions on a continual basis. |  |  |
| Continue to provide the Patient Family Assistance Branch Director with periodic situation updates. |  |  |
| 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. Report concerns to the Employee Health & Well-Being Group Supervisor. Provide for staff rest periods and relief. |  |  |
| **Upon shift change, brief your replacement** on the status of all ongoing operations, issues, and other relevant incident information. |  |  |
| **Demobilization/System Recovery** | **Time** | **Initial** |
| As needs for the FIC decrease, return staff to their normal jobs and combine or deactivate positions in a phased manner, in coordination with the Demobilization Group Supervisor. |  |  |
| Ensure the return/retrieval of equipment/supplies/personnel.  |  |  |
| **Debrief staff** on lessons learned and procedural/equipment changes needed. |  |  |
| Upon deactivation of your position, brief the Patient Family Assistance Branch Director on current problems, outstanding issues, and follow-up requirements. |  |  |
| Upon deactivation of your position, **ensure all documentation and FIC Operational Logs (ICS Form 214) are submitted** to the Patient Family Assistance Branch Director. |  |  |
| Submit comments to the Patient Family Assistance Branch Director for discussion and possible inclusion in the After Action Report; topics include:1. Review of pertinent position descriptions and operational checklists
2. Recommendations for procedure changes

 Branch accomplishments and issues |  |  |
| Participate in stress management and after action debriefings. Participate in other briefings and meetings as required. |  |  |
| **Documents/Tools** |
| * Incident Action Plan
* ICS Form 207 – Incident Management Team Chart
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* FIC Activation/Operational Plan
* FIC Assignment List
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Key contacts list (including ReddiNet, LAC DMH, DHV, and others)
* Radio/satellite phone
 |

FIC REGISTRATION AND TRACKING Specialist

**Mission:** Responsible for the registration (and badging, if required) of staff and family members. This specialist maintains the FIC Sign-In and Tracking Forms and FIC Tracking Log for staff and family in the FIC, and is responsible for tracking whether family members have been notified regarding the status of their loved one.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: Family Reunification Unit Leader** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

|  |  |  |
| --- | --- | --- |
| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| Receive appointment and briefing from the Family Reunification Unit Leader. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (ICS Form 207). Put on position identification. |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| **Coordinate with IT/IS Unit** to ensure access to IT systems with e-mail/intranet communication including ReddiNet. |  |  |
|  Implement the FIC Plan to access patient information.  |  |  |
| Document all key activities, actions, and decisions in an Operational Log (ICS Form 214). |  |  |
| Document all communications (internal and external) on an Incident Message Form (ICS Form 213).  |  |  |
| **Contact law enforcement** to determine whether they have moved uninjured people to a designated location and whether this has been communicated to healthcare facilities. |  |  |
| **Review information obtained** from families in the FIC and compare with admitted patient data.  |  |  |
| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
| Greet all incoming family members. Ensure completion of registration and tracking forms. **Ensure all family members are issued appropriate identification.** |  |  |
| **Notify the Family Reunification Unit Leader immediately if unaccompanied minors are presen**t in the FIC. |  |  |
| Continue to monitor ReddiNet for patient location information. |  |  |
| Continue to coordinate with medical staff concerning the location and condition of patients. |  |  |
| Continue to implement the FIC Plan to access patient information and compare with information from family members concerning suspected patients.  |  |  |
| If positive match between admitted patients and family members in the FIC can be made, coordinate with medical and social service staff to **facilitate reunification**. |  |  |
| Upon confirmation that the patient that family members are seeking has not been admitted and is not in transit, seek to determine location via ReddiNet, contact with incident FAC, or contact with other receiving healthcare entities. Advise family members of patient location if determined. |  |  |
| If an unidentified patient has been admitted that potentially matches description provided by family members, advise family members and **request assistance from Family Support Group if mental health or spiritual care counseling is needed**. |  |  |
| Monitor ReddiNet for notification that a patient may be on the way to the facility. The EMS representative at the FAC will send information via ReddiNet when the FAC determines that a patient is in transit, to include any known injuries or treatment needs. |  |  |
| If patient is confirmed deceased, follow standard procedures for NOK notification. Request assistance from Family Support Group as needed. |  |  |
| Identify need for assistance or equipment and report to the Family Reunification Unit Leader. |  |  |
| Advise the Family Reunification Unit Leader immediately of any operational issue you are not able to correct or resolve. |  |  |
| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| Continue to meet regularly with the Family Reunification Unit Leader for status reports. |  |  |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. |  |  |
| Continue activities listed in Intermediate section above. |  |  |
| Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to appropriate Employee Health & Well Being Group Supervisor. Provide for staff rest periods and relief. |  |  |
| **Upon shift change, brief your replacement** on the status of all ongoing operations, issues, and other relevant incident information. |  |  |
| **Demobilization** | **Time** | **Initial** |
| **Upon deactivation of your position, ensure all documentation and Operational Logs (ICS Form 214) are submitted** to the Family Reunification Unit Leader. |  |  |
| **Upon deactivation of your position, brief the Family Reunification Unit Leader** on current problems, outstanding issues, and follow-up requirements. |  |  |
| Submit comments to the Family Reunification Unit Leader for discussion and possible inclusion in the after-action report; topics include:* Review of pertinent position descriptions and operational checklists
* Recommendations for procedure changes
* Group accomplishments and issues
 |  |  |
| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. |  |  |
| **Documents/Tools** |
| * Incident Action Plan
* ICS Form 207 – Incident Management Team Chart
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* FIC Activation/Operational Plan
* FIC Assignment List
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Key contacts list (including ReddiNet, LAC DMH, DHV, and others)
* Radio/satellite phone
 |

FIC family sERVICES Specialist

**Mission:** Manage and coordinate provision family support services in the FIC, and/or provide referrals to appropriate internal or external units.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: Family Reunification Unit Leader** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

|  |  |  |
| --- | --- | --- |
| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| Receive appointment, briefing, and appropriate forms and materials from the Family Reunification Unit Leader. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (ICS Form 207). Put on position identification. |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| As needed, identify, assign and brief staff to provide social services/mental health, spiritual care, call center, and/or unaccompanied minor support. Arrange for regular briefings with staff.  |  |  |
| Document all key activities, actions, and decisions in an Operational Log (ICS Form 214) on a continual basis. |  |  |
| **Meet with family members** to determine family support needs. Request assistance as needed from other internal organizational units (mental health, nursing, chaplain, etc.) |  |  |
| **Provide referrals to external agencies** for support services as required. |  |  |
| **Be alert to family members with disabilities**, mobility and other functional needs. Request needed supplies, equipment, and services from Logistics as required. |  |  |
| Document all communications (internal and external) on an Incident Message Form. |  |  |
| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
| Communicate and coordinate with the Family Reunification Unit Leader on the availability of staff and resources needed to support family members. |  |  |
| Continue to ensure the provision of support for family members with disabilities and mobility and other functional needs. |  |  |
| Ensure that appropriate support and/or referrals are being provided to family members. |  |  |
| **Ensure patient records information is kept confidential**. |  |  |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. |  |  |
| Advise the Family Reunification Unit Leader immediately of any operational issue you are not able to correct or resolve. |  |  |
| **Report equipment and supply needs** to the Family Reunification Unit Leader. |  |  |
| Ensure staff health and safety issues are being addressed; resolve with Family Reunification Unit Leader and Employee Health and Safety Unit Leader, when appropriate. |  |  |
| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| Continue monitoring the need for, and provision of family support services. |  |  |
| Continue to keep the Family Reunification Unit Leader apprised of current conditions. |  |  |
| Observe staff, volunteers, and patients for signs of stress and inappropriate behavior. Report concerns to FIC Director. |  |  |
| Continue to document actions and decisions on an Operational Log (ICS Form 214) and send to the Family Reunification Unit Leader at assigned intervals and as needed. |  |  |
| **Upon shift change, brief your replacement** on the status of all ongoing operations, issues, and other relevant incident information. |  |  |
| **Demobilization** | **Time** | **Initial** |
| Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment. |  |  |
| **Upon deactivation of your position, brief the Family Reunification Unit Leader** on current problems, outstanding issues, and follow-up requirements. |  |  |
| **Upon deactivation of your position, ensure all documentation and Operational Logs (ICS Form 214) are submitted** to FIC Director. |  |  |
| Submit comments to FIC Director for discussion and possible inclusion in after action report. Comments should include:* Review of pertinent position descriptions and operational checklists
* Procedures for recommended changes
* Group accomplishments and issues
 |  |  |
| Participate in after-action debriefings. Participate in other briefings and meetings as required. |  |  |
| **Documents/Tools** |
| * Incident Action Plan
* ICS Form 204 – Branch Assignment List
* ICS Form 207 – Incident Management Team Chart
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* FIC Activation/Operational Plan
* Contact information for external services (Red Cross, LAC DMH, etc.)Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Radio/satellite phone
 |

FIC UNACCOMPANIED MINORS Specialist

**Mission:** Provide support, care, and a secure environment for unaccompanied minors in the FIC.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: Family Reunification Unit Leader** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

|  |  |  |
| --- | --- | --- |
| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| Receive appointment and briefing from the Family Reunification Unit Leader. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (ICS Form 207). Put on position identification. |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| Confirm the set-up of the unaccompanied minor area as specified in the FAC Plan.  |  |  |
| Ensure that you are familiar with facility policy regarding unaccompanied minors. |  |  |
| **Coordinate with IT/IS Unit** to ensure access to IT systems with e-mail/intranet communication including ReddiNet. |  |  |
| Implement the FIC Plan to access patient information.  |  |  |
| Document all key activities, actions, and decisions in an Operational Log (ICS Form 214). |  |  |
| **Notify LAC Department of Child and Family Services if any unaccompanied minors are present in the FIC**. |  |  |
| Document all communications (internal and external) on an Incident Message Form (ICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit |  |  |
| Upon direction of the Family Reunification Unit Leader and using the Ideal Location Checklist, specifically the section pertaining to Unaccompanied Minors, **oversee establishment of the Unaccompanied Minor Safe Area.**  |  |  |
| Go to <http://ncdmph.usuhs.edu/KnowledgeLearning> and review the on-line course “Tracking and Reunification or Children in Disasters.” Review takes less than 30 minutes. |  |  |
| **Review information obtained from families in the FIC and compare with admitted patient data.**  |  |  |
| Coordinate with Security to ensure that appropriate security measures are in place for the Safe Area. |  |  |
| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
| **Obtain clearance from LAC Department of Children and Family Services before releasing any unaccompanied minor from the FIC**. |  |  |
| Continue to implement the FIC Plan to access patient information and compare with information from family members concerning suspected patients.  |  |  |
| Ensure continuous monitoring of the Safe Area. Provide for age-appropriate activities for all unaccompanied minors in the safe area. |  |  |
| **Establish procedures for documentation of identity information** to include information provided by the minor; physical description including identifying scars, birthmarks or tattoos; clothing and jewelry; name of school or child care facility. Take photographs.  |  |  |
| Coordinate with Family Support Group to obtain mental health, social services, or other need support services. |  |  |
| Coordinate with the Reunification Group to facilitate reunification of unaccompanied minors with patients. |  |  |
| **Ensure that unaccompanied minors are not released to an adult without positive identification of an appropriate relationship.** |  |  |
| Request assistance from the Family Support Group if any support services are needed. |  |  |
| Notify Security and the Family Reunification Unit Leader immediately if any security, safety, or health threat to unaccompanied minors is detected. |  |  |
| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| Continue to meet regularly with the Family Reunification Unit Leader to obtain and provide updates. |  |  |
| Continue activities listed in Intermediate section above. |  |  |
| 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. Report concerns to appropriate Employee Health & Well Being Unit Leader.  |  |  |
| **Upon shift change, brief your replacement** on the status of all ongoing operations, issues, and other relevant incident information. |  |  |
| **Demobilization** | **Time** | **Initial** |
| **Upon deactivation of your position, ensure all documentation and Operational Logs (ICS Form 214) are submitted** to the Family Reunification Unit Leader. |  |  |
| **Upon deactivation of your position, brief the Family Reunification Unit Leader** on current problems, outstanding issues, and follow-up requirements. |  |  |
| Submit comments to the Family Reunification Unit Leader for discussion and possible inclusion in the after-action report; topics include:* Review of pertinent position descriptions and operational checklists
* Recommendations for procedure changes
* Group accomplishments and issues
 |  |  |
| Participate in after-action debriefings. Participate in other briefings and meetings as required. |  |  |
| **Documents/Tools** |  |  |
| * Incident Action Plan
* ICS Form 207 – Incident Management Team Chart
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* ReddiNet
* <http://ncdmph.usuhs.edu/KnowledgeLearning>
* Ideal Location Checklist
* FIC Activation/Operational Plan
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Radio/satellite phone
* Access to appropriate IT systems
 |  |  |

FIC CALL CENTER SPECIALIST

**Mission:** Organize and manage a FIC call center, including personnel, equipment, and supplies.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: Family Reunification Unit Leader** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

|  |  |  |
| --- | --- | --- |
| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| Receive appointment and briefing from the Family Reunification Unit Leader. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (ICS Form 207).  |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| If applicable, notify your facility telephone operator of the establishment of a call center and the process of forwarding calls to call center staff that pertain to families seeking patient information. |  |  |
| Determine need for and appropriately appoint call center staff. As needed, identify, assign and brief staff to provide call center support to include but not limited to social services, referrals and the provision of patient information. |  |  |
| **Establish a call center** as part of the FIC to respond to the anticipated increase in calls from families seeking patient information to include all personnel, equipment and supplies.  |  |  |
| Ensure that appropriate information and/or referrals are being provided to family members. |  |  |
| Ensure proper processes and procedures regarding sensitive and confidential information. |  |  |
| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
| Continue to coordinate the provision and support of call center services. |  |  |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. |  |  |
| Advise the Family Reunification Unit Leader immediately of any operational issue you are not able to correct or resolve. |  |  |
| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
| Continue to meet regularly with the Family Reunification Unit Leader to obtain and provide updates regarding call center services. |  |  |
| Continue call center activities. |  |  |
| 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. Report concerns to appropriate Employee Health & Well Being Unit Leader.  |  |  |
| **Demobilization** | **Time** | **Initial** |
| As needs for the FIC decrease, return staff to their normal jobs and combine or deactivate positions in a phased manner, in coordination with the Demobilization Group Supervisor. |  |  |
| **Documents/Tools** |
| * Incident Action Plan
* ICS Form 207 – Incident Management Team Chart
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* FIC Activation/Operational Plan
* FIC Assignment List
* Support Services Referral List
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Key contacts list (including ReddiNet, LAC DMH, DHV, and others)
* Radio/satellite phone
 |

FIC “Start-up” JOB ACTION SHEET

**Mission:** Organize and manage the operations of the FIC until additional staff can be assigned. Coordinate with normal facility units to obtain support services as needed.

|  |
| --- |
| Date: Start: End: Position Assigned to: Initial: **Position Reports to: ICS Patient Family Assistance Branch Director** Signature: Command Center Location: Telephone: Fax: Other Contact Info: Radio Title:  |

|  |  |  |
| --- | --- | --- |
| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
| Receive appointment and briefing from the Patient Family Assistance Branch Director. Obtain FIC activation packet. |  |  |
| Read this entire Job Action Sheet. |  |  |
| Notify your usual supervisor of your FIC assignment. |  |  |
| **Establish a call center** as part of the FIC or notify the facility’s existing call center about the anticipated increase in calls from families seeking patient information. |  |  |
| **Contact the MAC to determine if the FAC is activated**. |  |  |
| Review the JIT Training materials. |  |  |
| Document all key activities, actions, and decisions in an Operational Log (ICS Form 214) on a continual basis. |  |  |
| **Establish contact with key facility support services** to coordinate availability, if needed. (Support services may include nursing/medical, mental health counseling, security, and facility maintenance, among others.) |  |  |
| Establish contact and procedures with medical staff and admissions to track patient status. |  |  |
| **Log on to ReddiNet** and monitor for relevant information, and update as required. |  |  |
| Confirm the designated FIC area is available; required equipment and supplies are in place; and the area is appropriately configured. |  |  |
| **Ensure that the FIC has been inspected** and that any unsafe conditions have been corrected. |  |  |
| **Coordinate with Security** to ensure that appropriate security arrangements have been put into place. |  |  |
| **Notify the Command Center and administrative staff that the FIC is activated**. Request that the Command Center notify appropriate external stakeholders. |  |  |
| **Contact the MAC and advise them that that FIC is activated.** Determine if one or more FACs or FICs have been activated. Note contact information for the FAC and other FICs. |  |  |
| Document all communications (internal and external) on an Incident Message Form (ICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit. |  |  |
| Greet all incoming family members. **Ensure that all family members are registered and receive appropriate identification.** Maintain check-in/check-out procedures. |  |  |
| Monitor all family members in the FIC to detect any support needs or signs of mental or physical distress. Request support from appropriate facility support services as needed. |  |  |
| Keep family members informed of patient status in coordination with medical staff. Follow established procedures for NOK notifications and family briefings in the event of serious or critical injury. |  |  |
| If positive identification of admitted patients is made, coordinate with facility medical and social service staff to **facilitate reunification**. |  |  |
| Refer to ReddiNet and/or contact the MAC for assistance in locating un-admitted patients who are being sought by family members in the FIC or via telephone inquiries. |  |  |
| **Documents/Tools** |  |  |
| * Incident Action Plan
* ICS Form 213 – Incident Message Form
* ICS Form 214 – Operational Log
* FIC Sign In and Tracking Form
* ICS Form 400A FIC Tracking Log
* Unidentified Adult/Unaccompanied Minors Sign-In and Tracking Form
* Ideal Location Checklist
* FIC Activation/Operational Plan
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Key contacts list (including ReddiNet, LAC DMH, DHV, and others)
* Radio/satellite phone
* Access to email, ReddiNet, and internet
 |  |  |