

COMMUNITY LIAISON/DISCHARGE TEAM LEADER

Mission: Document the time, transportation, and the facility the patient is discharged to from the treatment area. Track the destination of all patients departing the facility. Function as a contact in the TMTS for representatives from other agencies and community resources to facilitate patient disposition.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____
Position Reports to: Charge Nurse Signature: _____
 TMTS Location: _____ Telephone: _____
 Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive assignment and briefing from the Charge Nurse. Obtain packet containing Community Liaison/Discharge Unit Leader Job Action Sheet.		
Read this entire Job Action Sheet and review organizational chart. Put on position identification (if provided).		
Receive assigned radio and establish communications with the Communication Unit Leader. Receive just-in-time training for the radio if needed.		
Ensure that proper equipment, staffing, and resources are in the discharge areas.		
Brief team members on current situation and incident objectives.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Establish contact with local, county and/or state emergency organization agencies to ascertain current status, appropriate contacts and message routing.		
Obtain initial status and information from the Planning Section Chief/MST. Establish discharge information for patient transfer, which should include the following: <ul style="list-style-type: none"> • Current census of the “red”, “yellow”, and “green” patients waiting for transfer. • Mode of transportation required for patients transferring to other facilities. • Any current or anticipated shortage of critical resources including personnel, equipment, supplies, medications, etc., if transfer of patients is not expedited in a timely manner. 		
Establish communication with hospitals, local EOC, and/or local response agencies (e.g., public health). Report current TMTS status.		
Establish contact with liaison counterparts of each assisting and cooperating agency (e.g., local EOC, local shelters), keeping governmental Liaison Officers updated on changes in TMTS status and critical issues and resource needs.		
Ensure that a scribe has been assigned to the discharge area to update and maintain all documentation, including patient tracking.		
Assess problem and treatment needs in assigned discharge area; coordinate the team assigned to the discharge area to meet needs.		
Coordinate and forward requests for supply and equipment needs to the Logistics Chief.		

Immediate (Operational Period 0-2 Hours)	Time	Initial
Participate in briefings and meetings as requested.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Planning Chief/MST.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Ensure patient documentation is being prepared correctly and collected.		
Continue to track and display patient location and time of discharge for all patients; regularly report status to the Charge Nurse.		
Advise Charge Nurse immediately of any operational issue you are not able to correct or resolve.		
Meet regularly with Discharge Unit for status reports and relay important information to the Chief Nurse and/or Charge Nurse.		
Continue to report equipment and supply needs to Logistics Chief.		
Ensure staff health and safety issues are being addressed; resolve with Charge Nurse when appropriate.		
Upon shift change, brief your replacement on the situation, ongoing operations, issues and other relevant incident information.		
Request information and assistance as needed through the TMTS communication network or from the local and/or regional EOC.		
Attend all command briefings, IAP meetings to gather and share incident and TMTS information. Contribute TMTS information and community response activities and provide goals to the IAP.		
Obtain TMTS HICS Form 259 from Planning Chief and report to appropriate authorities the following: <ul style="list-style-type: none"> • Number of casualties received including: <ul style="list-style-type: none"> ○ Name or physical description ○ Sex ○ Age ○ Address ○ Serious of injury or condition • Current patient census. • Number of patients discharged home or transferred to other facilities. • Types of injuries or illness treated. • Number of dead. 		
Respond to requests and issues from incident management team members regarding inter-organization (e.g., local hospitals, governmental agencies, response partners) disposition problems.		
Continue to reach out to community resources and facilities for placement for patients needing to be discharged.		
Continue to document all actions and observations on the HICS Form 214 on a continual basis.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Communicate with Logistic Chief on status of supplies, equipment and other resources that could be mobilized to other facilities, if needed or requested.		
Consider need to deploy/maintain a Liaison Officer to local EOC; make recommendation to the Operations Chief.		
Prepare and maintain records and reports as appropriate.		
Ensure your physical readiness through proper nutrition, water intake, and rest.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Compile and finalize the Disaster/Victim Patient Tracking Form (HICS Form 254) and submit copies to the copies to the Planning Chief.		
Ensure return/retrieval of equipment and supplies.		
Upon deactivation of your position, ensure all documentation and HICS forms are submitted to the Planning Chief.		
Upon deactivation of your position, brief the Charge Nurse on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the after action report.		
Submit an after action report.		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<input type="checkbox"/> HICS Form 213 – Incident Message Form <input type="checkbox"/> HICS Form 214 – Operational Log <input type="checkbox"/> HICS Form 254 – Disaster/Victim Patient Tracking Form <input type="checkbox"/> TMTS organization chart <input type="checkbox"/> TMTS telephone directory <input type="checkbox"/> Radio/satellite phone – phone numbers and radio assignments <input type="checkbox"/> Local resources