LIAISON OFFICER

Mission: Function as the incident contact person in the Temporary Medical Treatment Station for representatives from other agencies.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____

Position Reports to: TMTS Administrator Signature: _____

TMTS Command Location: _____ Telephone: _____

Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the TMTS Administrator		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Appoint Liaison team members and complete the Branch Assignment List (HICS Form 204).		
Brief Liaison team members on current situation and incident objectives; develop response strategy and tactics; outline action plan and designate time for next briefing.		
Establish contact with the Communications Unit Leader, and confirm your contact information.		
Establish contact with local, county and/or state emergency organization agencies to ascertain current status, appropriate contacts and message routing.		
Consider need to deploy a Liaison Officer to local EOC; make recommendation to the TMTS Administrator		
Communicate information obtained and coordinate with Public Information Officer (PIO).		
Obtain initial status and information from the Planning Section Chief to provide as appropriate to the inter-hospital/facility emergency communication network and local and/or county EOC, upon request: • Patient Care Capacity – The number of "immediate (red)," "delayed (yellow)," and "minor (green)" patients that can be received and treated immediately, and current census. • TMTS Overall Status – Current condition of hospital structure, security, and utilities. • Any current or anticipated shortage critical resources including personnel, equipment, supplies, medications, etc. • Number of patients and mode of transportation for patients requiring transfer to other hospitals, if applicable. • Any resources that are requested by other facilities (e.g., personnel, equipment, supplies, medications, etc.). • Media relations efforts being initiated, in conjunction with the PIO.		
Establish communication with hospitals, local Emergency Operations Center (EOC), and/or local response agencies (e.g., public health). Report current hospital/facility status.		

Immediate (Operational Period 0-2 Hours)	Time	Initial
Establish contact with liaison counterparts of each assisting and cooperating agency (e.g., local EOC, Red Cross), keeping governmental Liaison Officers updated on changes in facility status, critical issues and resource needs.		
Request one or more recorders as needed from the Labor Pool and Credentialing Unit Leader, if activated, to perform all necessary documentation.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Attend all command briefings and Incident Action Planning meetings to gather and share incident and hospital/facility information. Contribute inter-hospital information and community response activities and provide Liaison goals to the Incident Action Plan.		
Request assistance and information as needed through the inter-hospital emergency communication network or from the local and/or regional EOC.		
Consider need to deploy a Liaison Officer to the local EOC; make this recommendation to the TMTS Administrator.		
Obtain Casualty/Fatality Report (HICS Form 259) from the Public Information Officer and Planning Section Chief and report to appropriate authorities the following minimum data: - Number of casualties received and types of injuries treated. - Current patient capacity (census) - Number of patients hospitalized, discharged home, or transferred to other facilities. - Number dead. - Individual casualty data: name or physical description, sex, age, address, seriousness of injury or condition.		
Respond to requests and issues from incident management team members regarding inter-organization (e.g., other hospitals, governmental entities, response partners) problems.		
Assist the Labor Pool & Credentialing Team Leader with problems encountered in the volunteer credentialing process.		
Report any special information obtained (e.g., identification of toxic chemical, decontamination or any special emergency condition) to appropriate personnel in the receiving area of the hospital (e.g., emergency department), HCC and/or other receiving facilities.		
Continue to document all actions and observations on the Operational Log (HICS Form 214) on a continual basis.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
In coordination with the Labor Pool & Credentialing Unit Leader and the local EOC, request physicians and other medical staff willing to volunteer as Disaster Service Workers, when appropriate.		
Communicate with Logistics Section 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 the recommendation to the TMTS Administrator.		
Prepare and maintain records and reports as appropriate.		
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 Safety Officer or appropriate person.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, brief the TMTS Administrator on current problems, outstanding issues, and follow-up requirements.		
Upon deactivation of your position, submit Operational Logs (HICS Form 214) and all completed documentation to the Planning Section Chief.		
Participate in after-action debriefings and document observations and recommendations for improvements for possible inclusion in the After-Action Report. Topics include: • Accomplishments and issues • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
☐ Incident Action Plan ☐ HICS Form 207 – Incident Management Team Chart ☐ HICS Form 213 – Incident Message Form ☐ HICS Form 214 – Operational Log ☐ HICS Form 259 – Hospital Casualty/Fatality Report ☐ TMTS emergency operations plan ☐ TMTS organization chart ☐ TMTS telephone directory ☐ Radio/satellite phone ☐ Municipal organization chart and contact numbers ☐ County organization chart and contact numbers