

SCRIBE

Mission: Maintain accurate and complete documentation for the assigned work group.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initials: _____
Position Reports to: Planning Chief/Section Chief as assigned Signature: _____
 TMTS Command Location: _____ Telephone: _____
 Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive assignment and briefing from the Section Chief as assigned. Obtain packet containing Scribe Job Action Sheet.		
Read this entire Job Action Sheet and review the organizational chart. Put on position identification (if provided).		
Receive assigned radio and establish two-way communications with the Communications Unit Leader. Receive just-in-time training for the radio if needed.		
Coordinate with IT Unit to ensure access to IT systems with email/intranet communication to increase communication and document sharing with all Sections (if available).		
Prepare a system to receive documentation and completed forms from all Sections over the course of the TMTS activation.		
Provide duplicates of forms and reports to designated personnel as directed.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214).		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Planning Chief/MST.		
Participate in briefings and meetings as requested.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Advise designated personnel immediately of any operational issue you are not able to correct or resolve.		
Continue to accept and organize all documentation and forms submitted to assigned section.		
Check the accuracy and completeness of records submitted. Correct errors or omissions by contacting appropriate TMTS Section staff.		
Maintain all historical information and record consolidated plans.		

Demobilization/System Recovery	Time	Initial
Ensure all documentation from TMTS Section is received and compiled.		
Upon deactivation of your position, ensure all documentation and HICS forms are submitted to the Planning Section Chief.		
Upon deactivation of your position, brief the Planning Chief/MST on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the after-action report.		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> <input type="checkbox"/> HICS Form 204 Branch Assignment List <input type="checkbox"/> HICS Form 207 Incident Management Team Chart <input type="checkbox"/> HICS Form 213 Incident Message Form <input type="checkbox"/> HICS Form 214 Operational Log <input type="checkbox"/> HICS Form 251 Facility System Status Report <input type="checkbox"/> HICS Form 253 Volunteer Staff Registration <input type="checkbox"/> HICS Form 254 Disaster Victim Patient Track Form <input type="checkbox"/> HICS Form 255 Master Patient Evacuation Tracking Form <input type="checkbox"/> HICS Form 256 Procurement Summary Report <input type="checkbox"/> HICS Form 257 Resource Accounting Record <input type="checkbox"/> HICS Form 258 Hospital Resource Directory <input type="checkbox"/> HICS Form 260 Patient Evacuation Tracking Form <input type="checkbox"/> HICS Form 261 Incident Action Plan Safety Analysis <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"/> Access to appropriate IT systems