**BILLETING UNIT LEADER**

**Mission:** Ensure that the staff has sleeping/resting accommodations during the event.

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| Date: Start: End: Position Assigned to: Initials: **Position Reports to:** **Finance Section Chief** Signature: TMTS Location: Telephone: Fax: Other Contact Info: Radio Title:  |

| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
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| Receive assignment and briefing from the Finance Section Chief. Obtain packet containing Billeting Unit Leader Job Action Sheets. |  |  |
| Read this entire Job Action Sheet and review the organizational chart. Put on position identification (if provided). |  |  |
| Collaborate with the Staffing/Accountability Unit Leader and assess the need of staff sleeping/resting accommodations. |  |  |
| Adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines.  |  |  |
| Assign a scribe (if needed) to track the number of staff needing accommodations. |  |  |
| Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis. |  |  |
| Receive assigned radio and establish two-way radio communications with the Communications Unit Leader. Receive just-in-time training for the radio if needed. |  |  |
| 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 Incident Message Form to the Planning Section Chief/ MST. |  |  |

| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
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| Meet regularly with the Finance Section Chief to obtain situation and status reports. |  |  |
| Ensure the accommodations meet the needs of the staff. |  |  |
| Continue to adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines.  |  |  |
| Meet regularly with the Staffing/Accountability Unit Leader to track the staff leaving and joining the event to ensure ample accommodations are acquired. |  |  |
| Maintain a message center in the labor pool area or designated area, to inform staff and volunteers of the current accommodations and any changes in accommodations as staff is rotated in and out of facility |  |  |

| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
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| Ensure your physical readiness through proper nutrition, water intake, and rest. |  |  |
| Continue to keep updated records on the number of staff and volunteers needing accommodations for sleeping/resting. |  |  |
| Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information.  |  |  |

| **End Shift/Demobilization/System Recovery** | **Time** | **Initial** |
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| Upon deactivation of your position, brief the Finance Section Chief on current problems, outstanding issues, and follow-up requirements. |  |  |
| Adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines during the demobilization phase.  |  |  |
| Upon deactivation of your position, ensure all documentation and HICS forms are submitted to the Planning Section Chief/ MST. |  |  |
| Submit comments in the after action report. |  |  |
| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. |  |  |