

TMTS Administrator

Mission: Organize and direct all aspects of the Temporary Medical Treatment Station (TMTS).
Give overall strategic direction for incident/patient care management and support activities

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

Signature: _____ Initial: _____

TMTS Command Location: _____ Telephone: _____

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

Immediate (Operational Period 0-2 Hours)	Time	Initial
Assume role of Temporary Medical Station Administrator		
Read this entire Job Action Sheet and put on position identification.		
Determine roles for Medical Director and Operations Chief		
Initiate the Incident Briefing Form (HICS Form 201) and include the following information: <ul style="list-style-type: none"> • Nature of the problem (incident type, victim count, injury/illness type, etc.) • Safety of staff, patients and visitors • Risks to personnel and need for protective equipment • Need for decontamination • Estimated duration of incident • Appoint team required to manage the incident • Overall community response actions being taken • Status of local, county, and state Emergency Operations Centers (EOC) • Status of local, regional and state healthcare infrastructure 		
Determine need for and appropriately appoint Command Staff and Section Chiefs, or Branch/Unit/Team leaders and Medical/Technical Specialists as needed; distribute corresponding Job Action Sheets and position identification. Assign or complete the Branch Assignment List (HICS Form 204), as appropriate.		
Brief all appointed staff of the nature of the problem, immediate critical issues and initial plan of action. Designate time for next briefing.		
Assign one or more clerical personnel as the TMTS recorder(s).		
Distribute the Section Personnel Time Sheet (HICS Form 252) to Command Staff and Medical/Technical Specialist assigned to Command, and ensure time is recorded appropriately. Submit the Section Personnel Time Sheet to the Finance/Administration Section's Time Unit Leader at the completion of a shift or at the end of each operational period.		
Adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines during the demobilization phase.		
Initiate the Incident Action Plan Safety Analysis (HICS Form 261) to document hazards and define mitigation.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		

Immediate (Operational Period 0-2 Hours)	Time	Initial
<p>Receive status reports from and develop an Incident Action Plan with Section Chiefs and Command Staff to determine appropriate response and recovery levels. During initial briefing/status reports, discover the following:</p> <ul style="list-style-type: none"> • If applicable, obtain patient census and status from Planning Section Chief, and request a TMTS operations projection report for 4, 8, 12, 24 & 48 hours. Adjust projections as necessary. • Identify the operational period and TMTS shift change. • Ensure that appropriate contact with outside agencies has been established and facility status and resource information provided through the Liaison Officer. • Seek information from Section Chiefs regarding current “on-hand” resources of medical equipment, supplies, medications, food, and water as indicated by the incident. • Review security and facility surge capacity and capability plans as appropriate. 		
<p>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.</p>		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
<p>Authorize resources as needed or requested by Command Staff.</p>		
<p>Designate regular briefings with Command Staff/Section Chiefs to identify and plan for:</p> <ul style="list-style-type: none"> • Update of current situation/response and status of other area hospitals and treatment areas, emergency management/local emergency operation centers, and public health officials and other community response agencies • Deploying a Liaison Officer to local EOC • Critical facility and patient care issues • TMTS operational support issues • Risk communication and situation updates to staff • Implementation of TMTS surge capacity and capability plans • Ensure patient tracking system established and linked with appropriate outside agencies and/or local EOC • Family Support Center operations • Public information, risk communication and education needs • Appropriate use and activation of safety practices and procedures • Enhanced staff protection measures as appropriate • Public information and education needs • Media relations and briefings • Staff and family support • Development, review, and/or revision of the Incident Action Plan, or elements of the Incident Action Plan 		
<p>Oversee and approve revision of the Incident Action Plan developed by the Planning Section Chief. Ensure that the approved plan is communicated to all Command Staff and Section Chiefs.</p>		
<p>Continue to adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines.</p>		
<p>Communicate facility and incident status and the Incident Action Plan to local and state authorities or designee, on a need-to-know basis.</p>		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Ensure staff, patient, and media briefings are being conducted regularly.		
Review and revise the Incident Action Plan Safety Analysis (HICS Form 261) and implement correction or mitigation strategies.		
Evaluate/re-evaluate need for deploying a Liaison Officer to the local EOC.		
Evaluate/re-evaluate need for deploying a PIO to the local Joint Information Center.		
Ensure incident action planning for each operational period and a reporting of the Incident Action Plan at each shift change and briefing.		
Evaluate overall TMTS operational status, and ensure critical issues are addressed.		
Review /revise the Incident Action Plan with the Planning Section Chief for each operational period.		
Ensure continued communications with local, regional, and state response coordination centers and other TMTS through the Liaison Officer and others.		
Ensure your physical readiness, and that of the Command Staff and Section Chiefs, through proper nutrition, water intake, rest periods and relief, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Safety Officer and/or appropriate person.		
Upon shift change, brief your replacement on the status of all ongoing operations, critical issues, relevant incident information and Incident Action Plan for the next operational period.		

End of Shift/Demobilization/System Recovery	Time	Initial
<p>Assess the plan developed by the Demobilization Unit Leader and approved by the Planning Section Chief for the gradual demobilization of the HCC and emergency operations according to the progression of the incident and TMTS status. Demobilize positions in the TMTS as appropriate until the incident is resolved and the TMTS is cleared.</p> <ul style="list-style-type: none"> • Ensure outside agencies are aware of status change • Brief Medical Director on any problems, issues as needed 		
Adhere to Standard & Transmission Based Precautions as indicated by the CDC guidelines during the demobilization phase.		
<p>Ensure demobilization of the TMTS and restocking of supplies, as appropriate including:</p> <ul style="list-style-type: none"> • Return of borrowed equipment to appropriate location • Replacement of broken or lost items • Cleaning of TMTS facility • Environmental clean-up as warranted 		
<p>Ensure that after-action activities are coordinated and completed including:</p> <ul style="list-style-type: none"> • Collection of all TMTS documentation by the Planning Section Chief • Coordination and submission of response and recovery costs, and reimbursement documentation by the Finance/Administration and Planning Section Chiefs • Conduct of staff debriefings to identify accomplishments, response and improvement issues 		

End of Shift/Demobilization/System Recovery	Time	Initial
<ul style="list-style-type: none">• Writing the TMTS facility After Action Report and Improvement Plan• Participation in external (community and governmental) meetings and other post-incident discussion and after-action activities• Post-incident media briefings• Post-incident public education and information• Stress management activities and services for staff and volunteers		