

RMOC HOSPITAL REPRESENTATIVE

Mission: Coordinate patient movement and transfer to control surge in collaboration with the Regional Medical Operations Center (RMOC) through the Hospital Command Center (HCC). Assist with decision making on regional medical care issues as they arise to promote the best possible care. Coordinate communication with assigned sister hospitals.

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

Position Reports to: Hospital Command Center Signature: _____

Hospital Command Center (HCC) Location: _____ Telephone: _____

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

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive activation from STRAC via EverBridge or other means. Obtain situational awareness briefing from Hospital Command Center (HCC). Obtain the RMOC Binder, if possible, and report to the San Antonio Emergency Operations Center at Brooks City Base.		
Notify your usual supervisor of your RMOC assignment.		
Establish and maintain communications with the HCC, report that you have arrived at the RMOC and ensure the accurate flow of information. Obtain situational awareness briefing from Hospital Command Center (HCC).		
Read this entire Job Action Sheet and review incident information available in the RMOC.		
Initiate the Section Personnel Time Sheet (HICS Form 252) to document time spent in the RMOC for accounting purpose.		
Log into WebEOC, if able, to monitor the situation. Once logged in, open the Incident Significant Event Board, MCI Transports Board, Medical Dashboard and Medical Events Board .		
In consultation with the HCC, establish the surge capabilities of your facilities (update Bed Availability numbers) at that present time and for the current operational period.		
Make contact with assigned Sister Hospital(s) and brief them on the situation and current actions being taken. Establish surge capabilities for their facilities (insure their bed Availability numbers are updated).		
Insure that San Antonio Metropolitan Health District (SAMHD) issues are addressed at the Hospital table within the RMOC.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Ensure the HCC is regularly updated and document any status reports from the RMOC.		
Regularly update and receive feedback information from the Sister Hospital(s).		
Monitor the MCI Transport Board to stay current on number and types of patients being transported and to what facilities. Insure that the HCC is also monitoring this board (filter to look at only patients being sent to your facility)		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Meet regularly with the other RMOC Representatives to collaborate on the status of the		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
patient disbursement, planning and ongoing event status as directed.		
Attend HCC briefings and meetings via teleconference as required.		
Continue to update Sister Hospital(s).		
Maintain contact with SAMHD representatives and update incident actions as necessary.		
Continue to conduct regular planning meetings with the HCC to develop and modify the hospital's Incident Action Plan.		
Coordinate the rotation schedule for personnel to properly staff the RMOC over the upcoming operational period(s).		
Update the Section Personnel Time Sheet (HICS Form 252) when shift changes occur.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information.		
On-coming RMOC Representatives will contact the HCC and the Sister Hospital(s) and update the representative on duty information.		
Continue to monitor WebEOC for patient transport updates and regularly brief the HCC and Sister Hospital(s).		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the HCC and COSA EOC Staff. Provide for staff rest periods and relief.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Meet regularly with the other RMOC Representatives to collaborate on the status of the patient disbursement, planning and other issues as necessary.		
Continue to receive projected activity reports from within the RMOC at designated intervals to prepare status reports and update the hospital's Incident Action Plan.		
Continue to maintain the Operational Log (HICS Form 214)		
Continue to monitor WebEOC for patient transport updates and regularly brief the HCC and Sister Hospital(s). Conduct regular situation briefings with the HCC and Sister Hospital(s).		
Maintain contact with SAMHD representatives and update incident actions as necessary.		
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 HCC and COSA EOC Staff. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information.		
On-coming RMOC Representatives will contact the HCC and the Sister Hospital(s) and update the representative on duty information.		
Document times on the Section Personnel Time Sheet (HICS Form 252) for accounting purposes.		

Demobilization/System Recovery	Time	Initial
Continue to meet regularly with the other RMOC Representatives to collaborate on the status of the patient disbursement, planning and ongoing event status.		

Demobilization/System Recovery	Time	Initial
Continue to maintain the Operational Log (HICS Form 214)		
Assist RMOC staff and COSA EOC staff in restoring RMOC to normal standby mode.		
Coordinate final reporting of patient information with external agencies through Liaison Officer and/or the Incident Commander and Public Information Officer.		
Work with Planning and Finance/Administration Sections to complete cost data information.		
Begin development of the Incident After-Action Report and Improvement Plan as it relates to RMOC activation, operation and demobilization.		
Debrief staff on lessons learned and procedural/equipment changes needed.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the hospital's Documentation Unit.		
Upon deactivation, brief the HCC on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the HCC and RMOC for discussion and possible inclusion in an after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • RMOC Binder • Laptop Computer • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • HICS Form 257 – Resource Accounting Record • HICS Form 254 – Disaster Victim/Patient Tracking Form • HICS Form 252 – Section Personnel Time Sheet • Hospital organization chart • Hospital telephone directory