

The Newsletter

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ICS 100 and NIMS 700? What is that?

The Incident Command System, or ICS, is a standardized, on-scene, all-hazard incident management concept. The National Incident Management System or NIMS identifies steps for improved coordination of Federal, State, local, and private industry response to incidents. ICS has been tested in more than 30 years of emergency and nonemergency applications, by all levels of government and in the private sector. ICS consists of procedures for controlling personnel, facilities, equipment, and communications. It represents organizational "best practices," and as a component of NIMS has become the standard for emergency management across the country.

ICS may be used for small or large events. It can grow or shrink to meet the changing needs of an incident or event. ICS principles are implemented through a wide range of management features including the use of common terminology, and a modular organizational structure. It seeks to blend and coordinate the strengths of many agencies responding to an incident under one management model with a clear plan of action and directions.

The ICS organizational structure develops in a top-down, modular fashion that is based on the size and complexity of the incident. As incident complexity increases, the organization expands from the top down as functional responsibilities are delegated. The Incident Command can be Single Command involving an Incident Commander and single resources, or it may be a complex organizational structure with an Incident Management Team. Single Command would be used in events like a forest fire or an ice storm and the response is directed from within the community emergency management team. A Unified Command is larger in scope as it seeks to unify multiple agencies/jurisdictions under one incident command structure. An example would be an earthquake or tornado that knows no geographical boundaries requiring several agencies/town departments working together in response on multiple different levels.

Considerable emphasis is placed on developing effective Incident Action Plans. An Incident Action Plan (IAP) is an oral or written plan containing general objectives reflecting the overall strategy for managing an incident. An IAP includes the identification of operational resources and assignments and may include attachments that provide additional direction. Every incident must have a verbal or written Incident Action Plan. The purpose of this plan is to provide all incident supervisory personnel with direction for actions to be implemented during the operational period identified in the plan. At the simplest level, all Incident Action Plans must have four elements:

- What do we want to do?
- Who is responsible for doing it?
- How do we communicate with each other?
- What is the procedure if someone is injured?

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Needed:

Volunteers to staff
Flu vaccine clinics
Some evening clinics and
some Saturday clinics
Please call
978-928-3834 to
volunteer or for
additional information



The five major management functions are:

- **Command:** Sets objectives and priorities and has overall responsibility at the incident or event.
- **Operations:** The Operations function is where the tactical fieldwork is done, and most incident resources are assigned to it. The Operations Section Chief will develop and manage the Operations Section to accomplish the incident objectives set by the Incident Commander. This is where MRC members will most likely work when 'deployed'.
- **Planning:** Prepares and documents the Incident Action Plan to accomplish the objectives, collects and evaluates information, maintains resource needs status, and maintains documentation for incident records.
- **Logistics:** Ordering, obtaining, and maintaining essential personnel, equipment, and supplies including food services, transportation, medical services to personnel and communication planning and resources.
- **Finance/Administration:** Monitors costs related to the incident. Provides accounting, procurement, time recording, and cost analyses.

The Incident Commander at an incident may work initially with only a few single resources or staff members. The organization will expand to include needed levels of supervision as more and more resources are deployed. Each person will report only to one team leader and each team leader will only have 3-7 people to direct. This is called Span of Control. If span of control exceeds 7 personnel, then a new team is formed to keep the number of each team between 3 and 7.

- **Sections:** The organizational levels with responsibility for a major functional area of the incident (e.g., Operations, Planning, Logistics, Finance/Administration). The person in charge of each Section is designated as a Chief.
- **Divisions:** Used to divide an incident geographically. The person in charge of each Division is designated as a Supervisor.
- **Groups:** Used to describe functional areas of operations. The person in charge of each Group is designated as a Supervisor.
- **Branches:** Used when the number of Divisions or Groups exceeds the span of control. Can be either geographical or functional. The person in charge of each Branch is designated as a Director.
- **Task Forces:** A combination of mixed resources with common communications operating under the direct supervision of a Task Force Leader.
- **Strike Teams:** A set number of resources of the same kind



NIMS:

NIMS is not an operational incident management or resource allocation plan. Instead, it represents a core set of doctrines, concepts, principles, terminology, and organizational processes. It enables effective, efficient, and collaborative incident management.

The following is a synopsis of each major component of NIMS.

- **Preparedness.** Effective incident management and incident response activities begin with a host of preparedness activities conducted on an ongoing basis, in advance of any potential incident. Preparedness involves an integrated combination of planning, procedures and protocols, training and exercises, personnel qualification and certification, and equipment certification.
- **Communications and Information Management.** Emergency management and incident response activities rely on communications and information systems that provide a common operating picture to all command and coordination sites. NIMS describes the requirements necessary for a standardized framework for communications and emphasizes the need for a common operating picture.
- **Resource Management.** Resources (such as personnel, equipment, and/or supplies) are needed to support critical incident objectives. NIMS defines standardized mechanisms and establishes the resource management process to: identify requirements for, order and acquire, mobilize, track and report, recover and demobilize, reimburse for, and inventory resources.
- **Command and Management.** The Command and Management component within NIMS is designed to enable effective and efficient incident management. The structure is based on three key organizational constructs: the **Incident Command System, Multiagency Coordination Systems, and Public Information.**
- **Ongoing Management and Maintenance.** DHS/FEMA manages the development and maintenance of NIMS. This includes developing NIMS programs and processes as well as keeping the NIMS document current.

NIMS Components

Preparedness

**Communications and
Information Management**

Resource Management

• **Command and Management**

Ongoing Management and Maintenance

**Incident
Command System**

**Multiagency Coordi-
nation Systems**

Public Information

****ICS 100 and NIMS 700 are introductory courses that MRC members should review and take the test. Flu vaccine clinics as well as emergency response events function under the ICS system. These free courses (slide shows) can be found at <http://training.fema.gov/IS/crslst.asp> or follow the links from our website <http://www.wachusettmrc.org>*

The information for this article was excerpted and edited from the ICS 100 and NIMS 700 courses offered by FEMA.

ussion and planning that is happening. You only need to remember the many animals rescued in New Orleans to understand that this is a need that requires planning way ahead of any potential disaster event. SMART (www.smart-mass.org) is a group started and growing to address issues related to animal care during an emergency event. SMART is a coordinated network of organizations, agencies and individuals who are committed to responding to the needs of the animal population in disaster situations. This is part of an overall effort to provide a timely and effective response to any intentional or unintentional emergency.

Animals (domestic, livestock, and wild) are an integral part of the environment in which we live. Animal protection in disasters directly and significantly impacts human safety, public health, mental health and economic systems. In hurricanes, floods, wildfires and other disasters, people will risk their own lives and the lives of response personnel in order to protect their animals.

There are seven teams that make up SMART. During a disaster any or all of these teams may be activated depending on the situation. For example, a disaster involving a wildfire may require only the Animal Control Officers and Wildlife Services teams to be activated, while a hurricane may require activation of all teams.

Assessment

The Assessment Team will assess damages and the stability of the area they are activated to. This team will prioritize tasks and determine what, if any other teams should be activated.

Search and Rescue

The Search and Rescue Team will search for missing, hurt and/or stranded animals. Rescued animals will be given to Veterinary Services or Shelter Operations depending on the animal's condition.

Veterinary Services

The team comprising Veterinary Services will provide acute medical care based on triage of animals. The team will monitor the health of rescued animals and those in sheltering.

Shelter Operations

Shelter operations will set up shelters to house and care for rescued animals and those of displaced disaster victims. The shelters will provide adequate accommodations and care dependent on species (i.e. large walking/running area for dogs).

Animal Control Officer

The Animal Control Officer will assist the Search and Rescue and Shelter Operations teams. The Officer will note abandoned, hurt and deceased animals for the Search and Rescue team to respond to. Members must be a current Animal Control Officer in the State of Massachusetts.

Deceased Animal Removal and Disposal

The Deceased Animal Removal and Disposal team will locate and dispose of deceased animals to prevent public health issues. The team will document information on all deceased animals for later identification.

Special Species Team

This group works intimately with the Veterinary services group to address the needs of non-traditional pets, livestock, research animals, and wildlife during an emergency. Veterinarians, technicians and animal care personnel are welcome as members, especially those with specialized training or practical experience with these specific groups of animals.

Other organizations:

- Central Mass Disaster Animal Response Team (CMDART) is a group of individuals from the Blackstone Valley and Worcester, MA area encouraging training for disaster service. www.cmdart.org
- The American Veterinary Medical Association (AVMA), has educational materials to assist veterinarians, animal owners, and others interested in the well-being of animals to prepare for animal safety in the event of a disaster.

http://www.avma.org/animal_health/default.asp

DON'T LEAVE YOUR PET BEHIND!

It's always best to be prepared BEFORE a disaster strikes. Make a pet disaster kit and store it in a closet so that you'll have it ready if you need it.

Pet Disaster Kit:

Items to be packed up and stored away in bag

- Copies of current medical records including vaccinations
- Extra leash and collar
- Identification tags for all collars or harnesses
- Current photographs and written descriptions of your pets
- Extra bowls
- Small bag of cat litter and small cat litter box
- Can opener
- Number of veterinarian
- Extra Towels

Items on checklist that must be brought if disaster occurs

- Two week supply of any medications needed should always be kept in the house
- Carrier
- Two week supply of food should always be kept in the house
- Pet beds
- Pet toys
- 3 day supply of water



From the National Office



Dear MRC Leaders,
I am pleased to announce that Dr. Regina Benjamin was recently sworn in as our United States Surgeon General. VADM Benjamin will continue to support the Medical Reserve Corps (MRC) and our mission to promote a healthier and safer nation. Expect to hear from her soon! VADM Benjamin will also be an integral leader in our nation's response to H1N1. As you know, I frequently share information regarding MRC unit's involvement in activities such as the H1N1 response with the Surgeon

General and other high-level officials. The activities that you report to our office show the many different ways that MRC volunteers can affect community resiliency at the local, state, and national level. For example, here are a few of the many H1N1-related activities from across the country reported to us in just the past few weeks:

- Union County MRC (NJ) volunteers assisted in immunizing over 7,000 people.
- In Ohio, the Delaware County MRC and the Franklin County & Columbus MRC units both supported H1N1 vaccination clinics, where they each administered ~1,500 vaccines.
- The Eastern Nebraska/Western Iowa Medical Reserve Corps assisted its health department and the Visiting Nurse Association in administering nearly 5,000 H1N1 vaccines to priority groups.
- The Southeastern Idaho MRC volunteers are supporting the health department staff by responding to H1N1 hotline questions from the public.
- The Wachusett MRC (MA) facilitated a puppet show called "Whack the Flu," which is being presented to elementary schools and estimated to reach about 2,000 children.
- The Rhode Island MRC, in coordination with RI DMAT, has been asked by the RI Department of Health to lead the vaccination of all school children in RI (~158,000). Approximately 1,000 volunteers are expected to participate.
- Fifteen volunteers with the MRC of Eastern Washington assisted their local health department in providing 2,800 H1N1 vaccinations.

I could go on and on...

The MRC was founded as a way for volunteers to help strengthen the public health, preparedness and response capabilities of their communities. Your activities continually show that the MRC concept is valid, and that MRC units and volunteers are great local assets. Keep up the great work!

Warmest Regards,

Rob

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Announcements



We have been very busy these past few weeks with the Whack the Flu program. Out of the 10 towns that we cover, we have been in 7 towns bringing the program to every elementary school and the Head Start program of Gardner. We passed out close to 2500 take home booklets about the flu with

an activity page for the children. A special thank you to Mary Beth Yentz, Jennifer Abazorius, Meagan Murray, Mary Davis, Claire Comptois, Deborah Pressey. We still have some requests to fulfill so if you want in on the fun, give us a call.

Additionally we have sent to the middle schools and high schools a video from coughsafe.com about coughing into your sleeve. We have also distributed close to a thousand Whack the Flu posters. **If you want a poster or more to put up in a business, nursing home, or clinic office, just give us a call and we will send them out to you. 978-928-3834. (See website Flu Information page for a picture of the poster)**

We are helping the Rutland Board of Health and the Petersham Board of Health with setting up clinics for the first two weeks of December. **The clinics will be evening clinics during the week. We need many volunteers. Please call us if you can help in either town and we will definitely call you to schedule you into one or more of the clinics.**

Many Boards of Health are working with schools to set up frequent smaller clinics. Check with your town board if you would like to help with these clinics. It would be advantageous if you had your paperwork and CORI check done with us, and submitted a picture that you like of yourself for a badge. This would enhance your credentials.

Don't forget to check the website monthly. As reports come in from MSAR, DPH and other sources about the flu, we have been posting the ones with new information. The website was updated for December.

A Public Health Opportunity...

Gardner has for some time been screening the adolescents in the middle school for diabetes and other weight related issues. They have recently put together two committees to look at Youth and Alcohol and Youth and Obesity.

If you would like to join one of these committees to help define and develop programs to address these issues, please give us a call at 978-928-3834. We have an invitation to join and what is learned in Gardner may very well translate to your community as well.

Some additional resources to review:

- **CDC has an extensive coverage of adolescent health issues.** <http://www.cdc.gov/HealthyYouth/az/index.htm> To have the most positive impact on adolescent health, government agencies, community organizations, schools, and other community members must work together in a comprehensive approach. Providing safe and nurturing environments for our nation's youth can ensure that adolescents will be healthy and productive members of society.
- **Healthy Teen Network:** Healthy Teen Network prides itself on supplying the adolescent health community with relevant and timely resources, research and support to help professionals effectively reach our vulnerable young populations. Broad dissemination mechanisms – annual national conference, publications, weekly electronic newsletters, Advocacy Resource Guides, committees and more – advance the conversation and create a forum for change.
- Few public health challenges are more important today than stopping the epidemic of overweight and obesity. Obesity is second only to smoking as a preventable cause of death in the United States. In 2000, more than 100 agencies, organizations and individuals joined together as the Massachusetts Partnership for Healthy Weight to combat this problem. To learn more about the Partnership, or to search its list of over 5,000 places where you and your family can be physically active visit the [Partnership for a Healthy Weight website](#).



As the holiday season comes upon us, a wish for you that there may be many moments of laughter, joy, and happiness.



WACHUSETT MEDICAL
RESERVE CORPS

*PO Box 555
Hubbardston, MA 01452*

A graphic consisting of three overlapping, light blue oval shapes. The text "Phone: 978-928-3834" is centered within the middle oval.

**Phone:
978-928-3834**

Remember December!! (2008)

Last year I canceled Christmas. Last year I intended to provide Christmas gifts to the then 6 children that we watch over as grandparents/godparents. Well, they did get their presents but in late January. They understood as 4 of the 6 lived through it themselves. We are fast approaching December again. This year I hope to provide Christmas presents to 7 children on time. I am an optimist. Two things I would request of you this year to avoid some of the troubles that December 2008 brought upon us unsuspecting souls of north central Massachusetts...

1. Be Prepared. As those in the Midwest are reminded starting in February to have their tornado disaster plans ready and practiced, and those who live along the Gulf coast are reminded starting in August to have supplies and a plan ready for hurricane season, we too should be reminded and take heed now in November to prepare and have a plan ready for blizzards and ice storms. As MRC members we need to care for our family first, our neighbors second and the community third. Please take the time to check your supplies and set a plan just in case that 'storm of the century' decides to come around again twice in a decade. For suggestions www.ready.gov

2. The Wachusett MRC has been spending considerable time this past year calling nurses, contacting day care providers, trying to speak with clergy etc to build a database of folks who can help in a time of need. Last year many other MRC volunteers from other MRC units came to assist central Massachusetts. We continue to seek volunteers, medical and non-medical, to assist in emergency situations like shelters and in non emergency situations like health promotion activities or flu vaccine clinics. Take some time to review the program at www.wachusettmrc.org and then invite a friend to join with you as company. For more information or other ideas about how to spread the word about community volunteers, please call and leave a message at 978-928-3834. We will call you back, promise.

Judie O'Donnell RN MPH, President