

# HICS INCIDENT ACTION PLAN (IAP) QUICK START

## COMBINED HICS 201—202—203—204—215A

<b>1. Incident Name</b>  <b>NCW HERC Public Health Update Call</b>	<b>2. Operational Period (# 13 )</b>  DATE: FROM: 11/15//23 TO: 10/18/2023  TIME: FROM: 1300 TO: 1400
<b>3. Situation Summary</b> <span style="float: right;">HICS 201 —</span> <b>Location:</b> Virtual  <b>Attendees:</b> Ty Zastava, Robbie Deede, Becky, Daniel Bedford, Meghan Williams, Brittany Mews, Makala Williams, Michelle Edwards, Ruth Koepke, Kristin Bath, Christopher Weisgram, Hope Gilligan, Jacee Shepard, Sandra Supinski, Laura Scudiere, Brittany Fry, Joyce, Rachael Cornelius  <b>Discussion Topics:</b> <ul style="list-style-type: none"> <li>• Introductions and Welcome</li> <li>• HERC Coordinator Updates           <ul style="list-style-type: none"> <li>○ Coordinator – Ty Zastava has accepted the position of NCW HERC Coordinator</li> <li>○ HAZMAT               <ul style="list-style-type: none"> <li>▪ Annex – out for open comment and review to all partners, provide comments to Ty by Dec. 8</li> <li>▪ TTX – Feb. 14 from 1:00 – 3:30 (logistics, format TBD)</li> </ul> </li> <li>○ MRSE – April 10 from 1:00 – 4:00               <ul style="list-style-type: none"> <li>▪ Have injects for all partners invited</li> </ul> </li> <li>○ HVA               <ul style="list-style-type: none"> <li>▪ Ty is working on analyzing results; report should be ready by early next year</li> </ul> </li> </ul> </li> <li>• Essence Overview – Ruth Koepeke and Daniel Bedford           <ul style="list-style-type: none"> <li>○ Shared overview of a surveillance system linked with Emergency Department data that public health can access</li> <li>○ Presentation slides will be shared with meeting minutes</li> <li>○ We could potentially create a regional dashboard through the HERC</li> <li>○ If you have questions or want more information, email: <a href="mailto:DHSSyndromicSurveillance@dhs.wisconsin.gov">DHSSyndromicSurveillance@dhs.wisconsin.gov</a></li> <li>○ <a href="#">WastewaterSCAN</a> dashboard – Wausau data (a different surveillance system than ESSENCE)</li> </ul> </li> <li>• Communication Platforms           <ul style="list-style-type: none"> <li>○ EMResource               <ul style="list-style-type: none"> <li>▪ Receive alerts on hospital capacity and diversions</li> <li>▪ In an MCI event, would be notified of surge and could determine if Family Reunification Center would be needed</li> <li>▪ State resource: <a href="https://www.dhs.wisconsin.gov/preparedness/systems/emresource.htm">https://www.dhs.wisconsin.gov/preparedness/systems/emresource.htm</a> <ul style="list-style-type: none"> <li>• How to register</li> <li>• Step by step guides on how to do specific things</li> </ul> </li> <li>▪ Dashboard with EMResource data in PCA Portal               <ul style="list-style-type: none"> <li>• Hospitalization and Capacity dashboard broken down by regions</li> <li>• Need WILMS ID to access – request access from state</li> </ul> </li> </ul> </li> <li>○ EMTrack               <ul style="list-style-type: none"> <li>▪ Free state tool you could use to track people in Family Reunification Center</li> </ul> </li> </ul> </li> </ul>	



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- More info at: <https://www.dhs.wisconsin.gov/preparedness/systems/emtrack.htm>
- WISCOM – continue to drill with hospitals and work on participation rates
- eICS – this platform will be tabled this year and we will look to educate and train on in future
- PHEP Performance Measures
  - Looking for juicy and delicious performance measures related to PHEP, please send to Ty or Robbie
- [Outbreak Simulation](#) Tool
  - A game type tool on CDC website
- LCWG Meeting Update
  - Group met and talked about reoccurring deliverables
  - POD list management tool needs updating, but will likely be in contract next year
  - Looking at what justification is of why deliverables are there
- Respiratory Illness Season
  - Vaccination continues
  - Healthcare system vaccination seems to be declining in some counties
  - Some counties are still struggling to get vaccine
- Current Responses
  - None
- Open Discussion
  - None
- Next Meeting
  - December 20<sup>th</sup> at 1:00

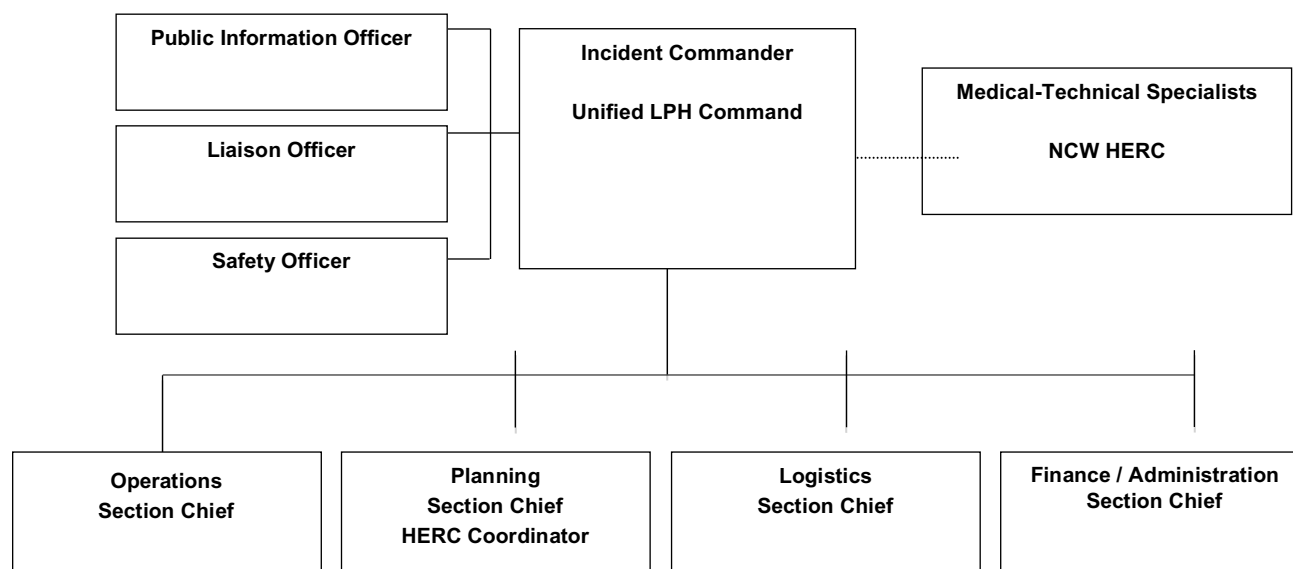


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**4. Current Hospital Incident Management Team** (fill in additional positions as appropriate)  
203 —

— HICS 201,



**5. Health and Safety Briefing** Identify potential incident health and safety hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.  
HICS 202, 215A —

Responder Readiness  
Information Sharing and Situational Awareness  
Responder Safety and Health

**6. Incident Objectives**  
202, 204 —

— HICS

6a. OBJECTIVES	6b. STRATEGIES / TACTICS	6c. RESOURCES REQUIRED	6d. ASSIGNED TO
Introductions and Welcome	Group Roll Call	Zoom, Discussion	Robbie Deede
HERC Coordinator Updates	Group Discussion	Zoom, Discussion	Ty Zastava



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<b>ESSENCE Overview</b>	<b>Training</b>	<b>Zoom, Discussion</b>	<b>Ruth Koepeke and Daniel Bedford</b>
<b>Communication Platforms</b>	<b>Group Discussion</b>	<b>Zoom, Discussion</b>	<b>Ty Zastava and HERC Partners</b>
<b>PHEP Performance Measures</b>	<b>Group Discussion</b>	<b>Zoom, Discussion</b>	<b>Robbie Deede</b>
<b>Outbreak Simulation Tool</b>	<b>Group Discussion</b>	<b>Zoom, Discussion</b>	<b>Robbie Deede</b>
<b>LCWG Update</b>	<b>Meeting Overview</b>	<b>Zoom, Discussion</b>	<b>Brittany Fry</b>
<b>Respiratory Illness Season</b>	<b>Group Discussion</b>	<b>Zoom, Discussion</b>	<b>Robbie Deede</b>
<b>Current Responses</b>	<b>Share current response status/findings</b>	<b>Zoom, Discussion</b>	<b>HERC Partners</b>
<b>Open Discussion</b>	<b>Group Discussion</b>	<b>Zoom, Discussion</b>	<b>HERC Partners</b>



**Purpose:** Short form combining HICS Forms 201, 202, 203, 204, and 215A  
**Origination:** Incident Commander or Planning Section Chief  
**Copies to:** Command Staff, Section Chiefs, and Documentation Unit Leader

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**7. Prepared by**

PRINT NAME: \_\_\_\_Ty Zastava\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE/TIME: 10/16/2023 1100

FACILITY: NCW HERC

**PURPOSE:** The Incident Action Plan (IAP) Quick Start is a short form combining HICS Forms 201, 202, 203, 204 and 215A. It can be used in place of the full forms to document initial actions taken or during a short incident. Incident management can expand to the full forms as needed.

**ORIGINATION:** Prepared by the Incident Commander or Planning Section Chief.

**COPIES TO:** Duplicated and distributed to Command and General staff positions activated. All completed original forms must be given to the Documentation Unit Leader.

**NOTES:** If additional pages are needed for any form page, use a blank HICS IAP Quick Start and repaginate as needed. Additions may be made to the form to meet the organization's needs.

NUMBER	TITLE	INSTRUCTIONS
1	<b>Incident Name</b>	Enter the name assigned to the incident.
2	<b>Operational Period</b>	Enter the start date (m/d/y) and time (24-hour clock) and end date and time for the operational period to which the form applies.
3	<b>Situation Summary</b>	Enter brief situation summary.
4	<b>Current Hospital Incident Management Team</b>	Enter the names of the individuals assigned to each position on the Hospital Incident Management Team (HIMT) chart. Modify the chart as necessary and add any lines/spaces needed for Command staff assistants, agency representatives, and the organization of each of the General staff sections.
5	<b>Health and Safety Briefing</b>	Summary of health and safety issues and instructions.
6	<b>Incident Objectives</b>	
	<b>6a. Objectives</b>	Enter each objective separately. Adjust objectives for each operational period as needed.
	<b>6b. Strategies / Tactics</b>	For each objective, document the strategy/tactic to accomplish that objective.
	<b>6c. Resources Required</b>	For each strategy/tactic, document the resources required to accomplish that objective.
	<b>6d. Assigned to</b>	For each strategy/tactic, document the Branch or Unit assigned to that strategy/tactic.
7	<b>Prepared by</b>	Enter the name and signature of the person preparing the form. Enter date (m/d/y), time prepared (24-hour clock), and facility.