The Incident Command System 1 CEU  
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Objectives:

By the end of this lecture, the participant should be able to...

1. List the FIRESCOPE objectives
2. List the objectives of the incident command system
3. Describe the function of the Incident Commander
4. Describe the function of the Safety Officer
5. Describe the function of the Liaison Officer
6. Describe the function of the Public Information Officer
7. Describe the function of the Critical Incident Stress Management Team
8. Describe the function of the Triage, Treatment and Transport Officers
9. Define the triage categories Red, Yellow, Green and Black
10. Describe the function of the Staging Officer
11. Describe the function of the Logistics Officer
12. Define the importance of communication

Introduction

- The organization and management of incidents has occurred for thousands years, stemming back to the days of Roman fighting.
- The Romans were pioneers in developing a structurally organized system, utilizing highly trained individuals who coordinated with a central commander executing a plan.
- Since Roman times, there have been great advancements with our military experience and tactics.
- We need more than just eager to fight soldiers and all of the latest, high-tech weaponry to be victorious in battle, as was seen with the Civil War and World War II.
- During World Wars II and I, the triage system was developed.
- Triage, which comes from the French word meaning “to sort,” was a system used on the battlefields to sort patients according to injury.
- Those who were not seriously injured were treated and sent back in to fight and those patients who needed immediate care were transferred to surgical wards and hospitals.

Reference


Triage

- Triage is just one of the many components that may be needed to be coordinated during an incident.
- All of these lessons and techniques learned from the military have contributed to modern incident management.
- In the 1970s, after a series of devastating brush fires in southern California, the Incident Command System or ICS was developed.
The combination of municipal, county, State, and Federal fire authorities linked forces and created the Firefighting Resources of California Organized for Potential Emergencies, known as FIRESCOPE.

These agencies began to meet along with emergency agencies and planners to develop several objectives.

Reference

FIRESCOPE Incident Command System

These objectives included:
1. “A system of command, where a single individual (or unified command team) is responsible for the ultimate outcome of the incident.”
2. “A system of common terminology.”
3. “A system of coordination among diversified agencies.”
4. “A communication system with shared frequencies and common radio language.”
5. “A system for resource allocation, including prioritizing and staging.”

Reference

National Incident Command System

Thus from these objectives a national Incident Command System (ICS) was born.

Five components were designed to coordinate and organize resource requirements.

These components are command, planning, operations, logistics, and finance/administration.

The Incident Commander coordinates his Command Staff through the planning, operations, logistics, and finance/administration sections.

As the system began to take shape, other outside agencies took notice and urged for the development of a command plan that incorporated non-fire organizations and as a result developed the National Interagency Incident Management System (NIIMS).

Reference

Incident Commander

The Incident Commander, contrary to the title, does not command an incident, but is in a position to lead and manage the situation.

Some key aspects of a good Incident Commander are: an in-depth training background, knowledgeable of the ICS, familiarity with the local disaster plan, and able to stay at one’s own command post without performing hands-on operations.
Other ways to ensure effective command of the incident is the ability to remain calm and objective, think quickly, handle responsibilities, be flexible, realistic, and capable of delegating tasks (FEMA, 2001).

The incident commander is initially the senior first responder to the incident, however, as time and complexity progress, command is transferred to the primary authority who will be controlling the incident.

If command is to be transferred, it is done face-to-face by the current Incident Commander directly to the one relieving them.

This is done so the new Incident Commander has a clear understanding of the current situation.

Reference

Incident Management

Two ways an incident may be managed is by using singular command or unified command.

Singular command works especially well in small-scale events that do not involve outside agencies.

For example, a large traffic accident will require the services of fire, police, and EMS in which all three agencies may have fire assume overall command.

Unified command can be established on incidents of explosions, terrorist attacks, and large-scale disasters that can require coordination with other agencies in outside jurisdictions.

The amount of resources any one Incident Commander or supervisor can efficiently and effectively manage is known as the span of control, where the range is three to seven resources with five being ideal.

The Command Post

In situations like these, fire, police, and EMS will all work together to coordinate the incident.

Having the agency or agencies together in one location, or command post, will allow them to meet, coordinate tasks, and select management staff.

The command post should be close enough to the scene so the situation can be monitored, but far enough away so as not to interrupt operations. There must also be available in the command post area access to telephones, restrooms, and shelters, particularly if the event will last several days or weeks.

The Incident Commander must be easily identified, especially in larger incidents.

This can be accomplished by wearing reflective, color-coded vests with the inscription of Incident Commander on it.

References
Managing an Incident

- Life safety, incident stabilization, and property conservation are three main priorities in managing an incident.
- A key to maintaining life safety is incident stabilization.
- One way to keep an incident safe is to determine if the incident is an open incident or closed incident.
- Open incidents or unstable incidents at any one time can potentially create additional patients, whereas a closed incident or stable incident is not likely.
- In addition, property conservation must be observed unless it is necessary to be damaged by rescue personnel so life safety or incident stabilization can be achieved.

References

Delegate Authority

- As an incident develops, the Incident Commander may need to delegate authority.
- To work alongside the Incident Commander, a person to handle the functions of safety, liaison, public information officer, and critical incident stress management are added as needed.
- These parts of the staff do not directly supervise any major command functions, such as operations, planning, or logistics, and usually do not have secondary personnel unless the complexity and severity of the incident warrant them.
- When these responsibilities become too demanding for the Incident Commander, a staff person will then be assigned.
- One aspect that may be of aid in an incident is that this staff does not have to be medical personnel, allowing medical personnel to handle the incident.
- For example, the safety person can be a fire officer and the liaison officer can be an Emergency Management director or EMS administrator.

Reference

Safety Officer

- The duty of the Safety Officer is to monitor conditions at the incident ensuring all personnel are kept safe and advise the Incident Commander of procedures can increase or reduce risk.
- Their job also requires the safety officer to observe any changes in partially damaged structures or downed power lines, chemical hazards, weather, and darkness to name a few.
- In addition to monitoring the physical arena where an incident occurs, the safety officer is also responsible for the safety of rescue personnel.
- For example, by ensuring they are wearing proper personal protection equipment and observing appropriate patient care handling.
Liaison Officer

- The Liaison Officer links the Incident Command System with outside agencies or systems.
- The Liaison Officer will meet with representatives from the Red Cross or the Environmental Protection Agency (EPA) among other technical support agencies, groups, and organizations.
- One of the primary functions of the Liaison Officer is to direct outside agency resources to Operations Section and to receive requests for other resources from incident personnel.
- If any conflicts occur during an incident, it is the Liaison Officer’s job to mediate between them.

Public Information Officer (PIO)

- The task of the Public Information Officer (PIO) is to collect information about the incident and release it to the press or media.
- The Public Information Officer also must keep those working the incident portrayed in good light with the media.
- The PIO reports directly to the Incident Commander and receives authority to authorize press release information as well as keeping up to date with information at the incident.
- Any questions or concerns the media may have are directed to the PIO.

Critical Incident Stress Management (CISM) Team

- With almost any incident, there comes some degree of stress, especially when situations involve a great deal of trauma, death, and children.
- To help keep those working within the incident healthy from incident related stress, the Critical Incident Stress Management (CISM) Team can intervene to assist with emotional maintenance.
- The CISM Team monitors those working at the incident and provides support as needed.
- A person may react emotionally, physically, behaviorally or a combination of all three.
- CISM Teams can be accessed through local Trauma Intervention Programs (TIP) that will provide mental health workers and other personnel that are familiar with emergency operations.

References

Critical Incident Stress Management (CISM) Team Continued

- The CISM Team will also advise the Incident Commander in reducing noise on scene, maintaining scene control, and providing adequate comfort and emotional care for families, all of which can reduce stress around the incident.
- A diffusing session immediately follows an incident, and within 24 to 72 hours, a debriefing session is held.
- There are several important points an Incident Commander must remember when dealing with stress management.
- During an incident, emergency service people are the greatest value.
- The component of a CISM Team should not be overlooked in an Incident Command System, and if an incident appears to necessitate the use of a CISM Team, one should have already been contacted.

Reference

Incident Command System “tree”

- The components to follow next in the Incident Command System “tree” can be comprised of branches, groups, divisions, units, and sectors.
- Branches can be organized by either role or geography, whereas groups are based upon function, and divisions are based upon geography.
- Units are specific groups that can be found in either groups or divisions.
- The term sector can be used to describe branches, groups, or divisions, but it does not identify a functional or geographical area.
- For example, EMS is a branch from Operations. Within the EMS branch is a group/division such as Triage.
- If required, a unit such as a strike team and/or task force can be formed and added to a group/division.
- A strike team is composed of a group of personnel or units with similar attributes that operate under a single leader.
- Several ambulances can be combined for only transport and thus create a strike team.
- A task force may be assembled with EMS and law enforcement or any other two different components, brought together to perform a specific task.
- Forming strike teams and task forces allow Operations Chiefs to quickly solve problems with ease and flexibility.

Reference
EMS Branch Director

- The EMS Branch Director coordinates these operations from within the operational area, as opposed to the Incident Commander who remains at the Command Post.
- The EMS Director works with logistics and other staff to maintain adequate resources to support EMS operations.
- One aspect that makes a good EMS Director is the ability to act as a manager and not become preoccupied with treating patients.
- If a director begins treating patients, there will be no one to manage EMS Operations.

Reference

EMS Branch

- The EMS branch typically consists of three groups:
  1. Triage
  2. Treatment
  3. Transport.
- Triage consists of sorting patients according to the level of treatment needed.
- Patients are assigned to one of four color-coded categories labeled red, yellow, green, and black.
- The red category indicates a patient is in need of immediate care or the patient will die.
- These patients may have airway complications or severe shock. The yellow category allows for delayed patient care.
- This group of patients may have injuries such as fractures or moderate bleeding and need care but are currently stable.
- Patients triaged to the green category, also known as the “walking wounded,” have minor injuries such as minor lacerations and abrasions and minor fractures that can either wait for treatment or treat their own injuries.
- The black category is for those who are deceased, including patients with no vitals and massive head and chest trauma.

Initial Priorities of Triage

- One of the essential concepts in triaging is to determine initial priorities instead of treating the first patient found on scene.
- This allows more lives to be saved and a better understanding of what type of treatment will be needed.
- In addition, those who are triaging must be conscious of the availability of resources, patients’ conditions, and local protocols.
- Patients are re-triaged during the treatment process to determine whether patients can be delayed or need immediate attention.

Reference
Triage Tag System

- During triage, patients are “labeled” with red, yellow, green, or black triage tags to identify which patients belong in each category.
- The triage tag system helps caretakers prioritize the patients.
- It also prevents the same patient from being re-triaged, and enables the patient to be tracked during treatment and transport.
- A system that enables efficiency and ease in triaging is the START system. Simple Triage and Rapid Treatment (START) was designed to rapidly sort patients by several signs and symptoms.
- These signs and symptoms are the patients’ ability to walk, respiratory effort, pulses/perfusions, and neurological status.

References

Triage Tag System Continued

- If a patient is able to walk, they are labeled with a green tag and are sent to follow a triage officer to the green area.
- Next are patients who have respiratory problems.
- Their breathing is quickly assessed and if there is evidence of agonal respirations or the respiratory rate is greater than 30 a min, they are tagged red.
- Patients who have no respirations are tagged as black.
- When assessing a patient’s pulse/perfusion the radial pulse is noted.
- Those with an absent radial pulse are tagged as red.
- The patient’s neurological status can be assessed by asking the patient to squeeze your hands.
- They are categorized as yellow if they can follow this command, red if they are unable to follow simple commands.

References

Treatment Officer

- The Treatment Officer supervises the treatment of patients.
- They must ensure all personnel who will be treating patients are adequately equipped.
- They must also ensure there is an area with appropriate staff designated to handle patient flow.
- Teams of four are usually sent to red, yellow, and green treatment areas. This minimizes risk of injury during patient movement.
- The red treatment unit will contain the majority of the medical resources including equipment and providers to stabilize patients and ready them for transport.
- Any physicians or nurses available will be utilized here.
Treatment Officer Continued

- The yellow treatment unit may include some ALS providers for patients who will need intravenous therapy.
- The main principle is to keep these patients stable and continuously monitored.
- In the green area, patients are closely monitored by providers who observe for any changes in a patient’s condition.
- At any time, a patient can be upgraded or downgraded in priority and transferred to a different area.
- Those labeled with black tags must be moved to an area away from the general treatment area.
- This area should be off limits to the public and media pending victim identification.

Reference

Transport Officer

- As patients are treated, they are prepared for transport.
- Transport can be provided by many different means such as ambulance, bus, or helicopter.
- The Transport Officer coordinates patients with ambulances and routs them to hospitals.
- The Transport Officer also keeps track of the patients who are sent to the hospitals by logging their triage tag number, transport unit, hospital destination, as well as any other information available.

Staging Area

- Staging is an important function to help maintain adequate resources and ensure they are not used up too quickly.
- The Staging area is under the control of the Staging Officer who maintains an area for ground and air ambulances, assigns ambulances based on requests from the Transport Officer, and maintains records of available ambulances.
- The Staging area can be a parking lot or roadway away from the incident but easily accessible to the incident when they are called upon.

Logistics Branch

- The Logistics branch operates at the Command Post and reports directly to the Incident Commander.
- The Logistics Chief is involved in a high amount of communication, coordinating the acquisition and distribution of medical supplies as well as adequate food, water, restrooms, lighting, and any other resources that may be needed.
- Another important part of the Logistics branch is Security.
- Security includes traffic control in the area of the incident, as well as security in the treatment and morgue areas to prevent distraught family members and media from entering.
- Any disaster area or site of terrorism must be observed to prevent any further damage or injury to rescue personnel.
Communications

• One of the most critical areas of Logistics is Communication.
• Communication is essential to maintain incident management.
• The status of transport vehicles, resource consumption, and patient information can be supervised and managed with effective communication.
• New assignments can be relayed, and notification of changes drastic to the function of personnel can be transmitted.
• A very effective means of communication is through face-to-face meetings or briefings (Christen & Maniscalco, 1998).
• Briefings can quickly provide information and can act as an effective feedback tool.

Communications Continued

• Communication regarding patient care is essential information that must be clearly relayed to treatment teams and Medical Control.
• It is the responsibility of the EMS Communicator, also known as EMS Com, to accomplish this.
• EMS Com provides brief and concise patient information such as number of patients, condition, and any particularly pertinent information such as pregnancy.

Planning and Finance/Administration

• Planning and Finance/Administration are two areas that have important functions but are not necessarily in the middle of the incident.
• Planning provides information about past, present, and future conditions of the incident.
• They access weather reports, patient information, develop contingency plans, and ensure there are written standard operating procedures for mutual aid agreements when they are activated.
• Planning also tries to foresee any complications in the incident and develop plans to act accordingly.
Finance and Administration is rarely seen during small incidents but are responsible for paying for resources, and maintaining time sheets and personnel records.

Updates and concerns are relayed directly to the Incident Commander.

Reference

Training

The Incident Command System is a very effective means of managing an incident, however if personnel are not familiar with local emergency plans and are not versed in its operation, difficulties will be encountered during the incident.

Training is an essential component and can help eliminate many issues before they arise.

Through training, individuals and groups can learn their own roles in an incident, and learn how to interact with other groups effectively.

Once responders understand their own ICS, they can tailor the response to any size incident.

Even with thorough training things can and do go wrong.

Some common problems that occur during incidents include: lack of knowledge and identification of who is in charge at the incident, improper triage, lack of notification of the incident and communication, failure to distribute medical supplies adequately, and lack of preplanning.

Any one of these problems can disrupt the operation of an incident. Predicting and dealing with the most common issues ahead of time is the key to managing a successful Incident Command.

Reference

The State

If an incident is large enough to significantly deplete local resources, state and federal resources may be needed.

During the initial phase of the response, it is the responsibility of local government to establish a perimeter, perform emergency rescue and recovery, and secure the scene (OJP, 2001).

They must also keep the public safe and identify if this area qualifies an emergency or disaster.

The state government supplements local resources with personnel, equipment, and supplies.

They may even call for specialized resources such as the National Guard to add increased expertise, staffing, and equipment (OJP, 2001).

Reference
Federal aid

- Federal aid is activated by the governor when an incident overwhelms local and state resources.
- Follow local protocols when preparing to notify additional resources.
- Two important agencies to be notified, especially when the incident appears to be terrorism, are the Federal Bureau of Investigation (FBI) and the Federal Emergency Management Agency (FEMA).
- The FBI acts as the lead agency when the incident is for crisis management. This includes issues involving law enforcement and investigation.
- The FBI may direct control to FEMA if the incident requires consequence management in support of local and state agencies.
- Several abilities of FEMA are to assess damage, declare a disaster area, act as a military liaison, and support incident management.

Reference

Incident Command System

- The Incident Command System provides an excellent management tool to effectively and efficiently care for patients at an incident.
- With regular training, education, and familiarity of local and state resources, the ability to coordinate relief can be even more advantageous.
- Technology advancements will also help coordinate, organize, and maintain communication with resources and other agencies.
- Not every incident is preventable, but we can do our best to have a plan and be prepared.
- A beneficial tool for learning is to evaluate and critique past incidents.
- This can increase awareness about techniques that worked and those that didn’t.
- One of the best ways to learn is by doing, but hopefully conducting Incident Command operations in “real life” does not occur often.