



## Incident Command Demobilization & COVID-19 Monitoring

As the MultiCare Health System (MHS) System Incident Coordination Center (SICC) continues to develop a demobilization plan outlining its process for transitioning from an active response mode to a monitoring phase, SICC staff will continue to coordinate with local incident command elements to ensure a collaborative and coordinated transition. This guidance has been provided to support your respective incident command elements at the Interdependent Business Unit (IBU), network, and regional levels.

Keep in mind that the impact of COVID-19 on our system and community partners continues to be evolving and may escalate again. It is important to ensure planning has occurred to prepare facilities, networks, regions, and the system to quickly adjust should we begin to experience similar, or more challenging, impacts as we experienced in the last couple of months.

### Guidance for IBU/Network Incident Command Elements:

As local incident command elements scale down response resources, the following actions are recommended:

- Ensure an Incident Commander, at a minimum, is identified to maintain situational awareness on COVID-19 impacts to your respective facility(ies) and/or networks.
- Continue regular check-ins with your leadership to maintain visibility on COVID-19 impacts as well as to provide leaders with the opportunity to escalate and questions and/or concerns.
- Identify the response functions coordinated by your incident command element that need to be continued as incident command is de-escalated into a monitoring phase and ensure adequate resources have been identified to provide support for those functions.
- Identify triggers that may indicate a need to re-escalate your incident command element into a more active, fully staffed incident command (see below for examples).

If your facility or network begins to experience any of the following issues and/or triggers, it may be an indication that that your incident command element needs to be escalated from a monitoring mode back to an active response mode:

- Experience of a surge of patients that impacts your facility capacity
  - This surge may originate from partnering long-term care and/or skilled nursing facilities or from an unrelated mass casualty incident impacting the community
- Challenges discharging patients to post-acute care settings that impacts your facility capacity
- Difficulty acquiring critical resources and/or equipment
- Increased staff call-outs and/or increased reports of COVID-19 positive staff



In general, if your day-to-day resources, plan, policies, and/or procedures are not adequate to provide a coordinated response to an issue at hand, it may be a good indication that your incident command element needs to ramp back up.

**Notification to the SICC:**

The SICC requests that local Incident Commanders immediately notify the Emergency Preparedness Duty Officer (253-389-0073) should your local Incident Command element need to re-escalate response.

Any questions can be directed to Christi McCarren who will be leading the SICC Monitoring Team.