

The Evolution of Swedish HICS during COVID

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Objectives:

- Discuss HICS Over the Years
- Discuss COVID Impacts on HICS
- Discuss if Hospitals can even change HICS?





HICS over the Years

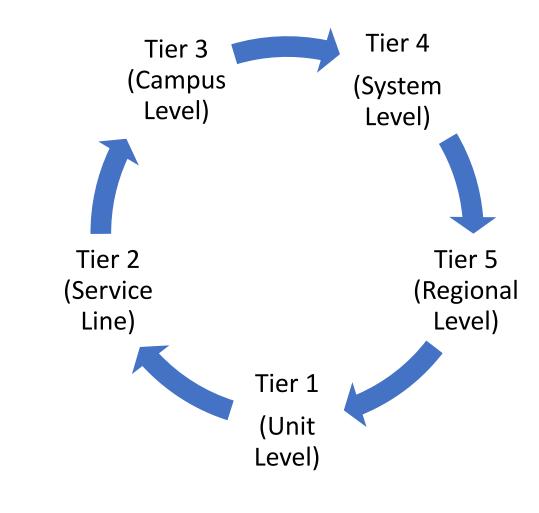
- Original HEICS developed in 1991 by Orange County EMS under sponsorship from Emergency Medical Services Authority (EMSA)
 - Based on FIRESCOPE ICS structure
- Is the emergency management foundation for hospitals in the US
- 2014 HEICS became HICS
 - Included new terminology, updated Incident Action Planning (IAP) forms, and provided better interoperability for multi-agency coordination
 - Aligned hospitals with the National Incident Management System (NIMS) including Incident Command System (ICS)

8 years with NO change is a lifetime in healthcare...

Covid Impacts on HICS

- Campus, System, Regional and then REGIONAL
- The activation that seemed to never end...
- In-person vs Virtual
- Building the ship as the tide rose
 - Flexibility, Nimbleness
 - Emergency response became day to day operations
- Healthcare Coalition, WSHA, DOH
- Liaison Officer/Govt Affairs have never been more important
- Resiliency
 - Tempo- traditional operation periods vs la
 - Escalation paths
 - Authority
- Clear structure reduced anxiety
- Acknowledging our tiered huddles as part of the HICS structure

Swedish Tiered Huddles as part of HICS



Daily Huddles

escalation to T5

addressed quickly

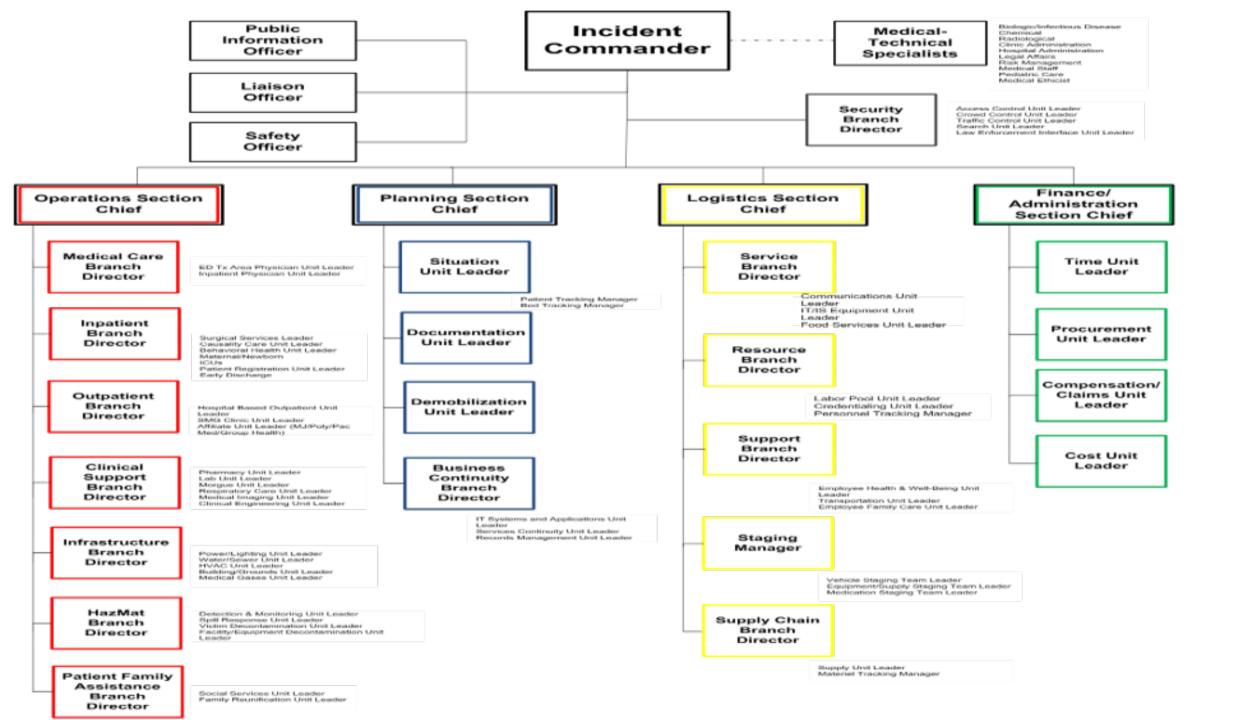
3. Concerns/barriers

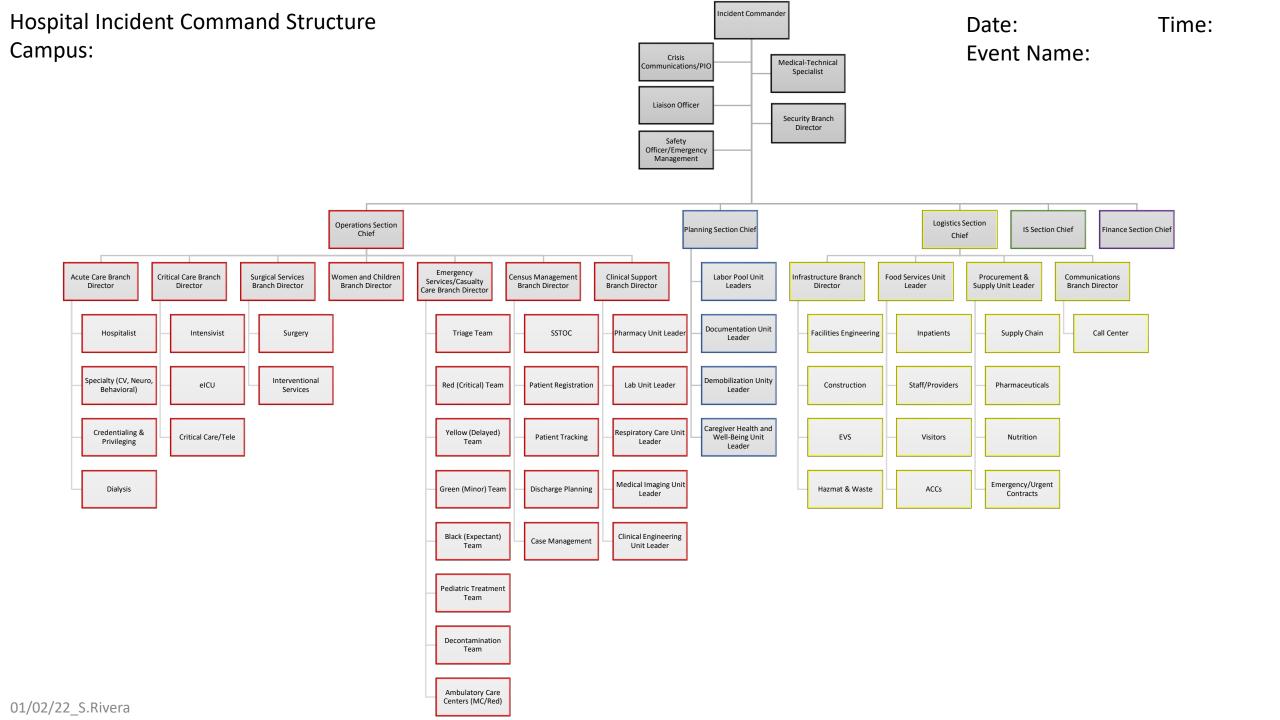
Caregivers are

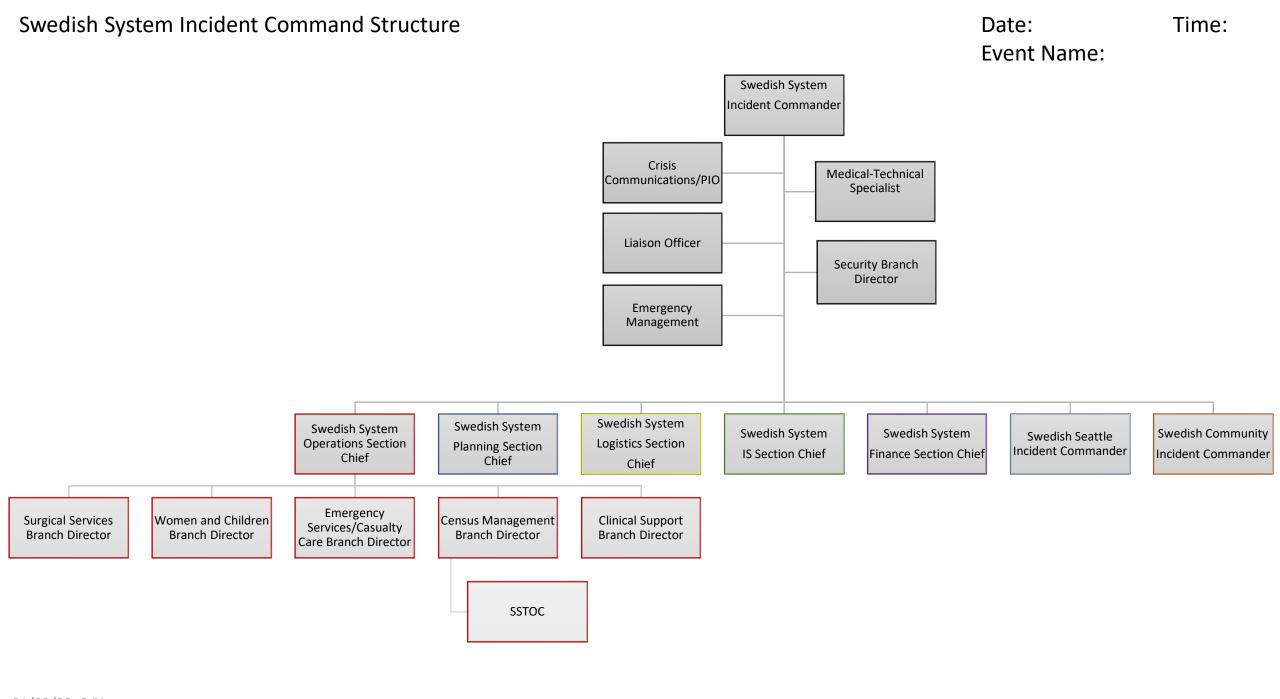
comfortable with

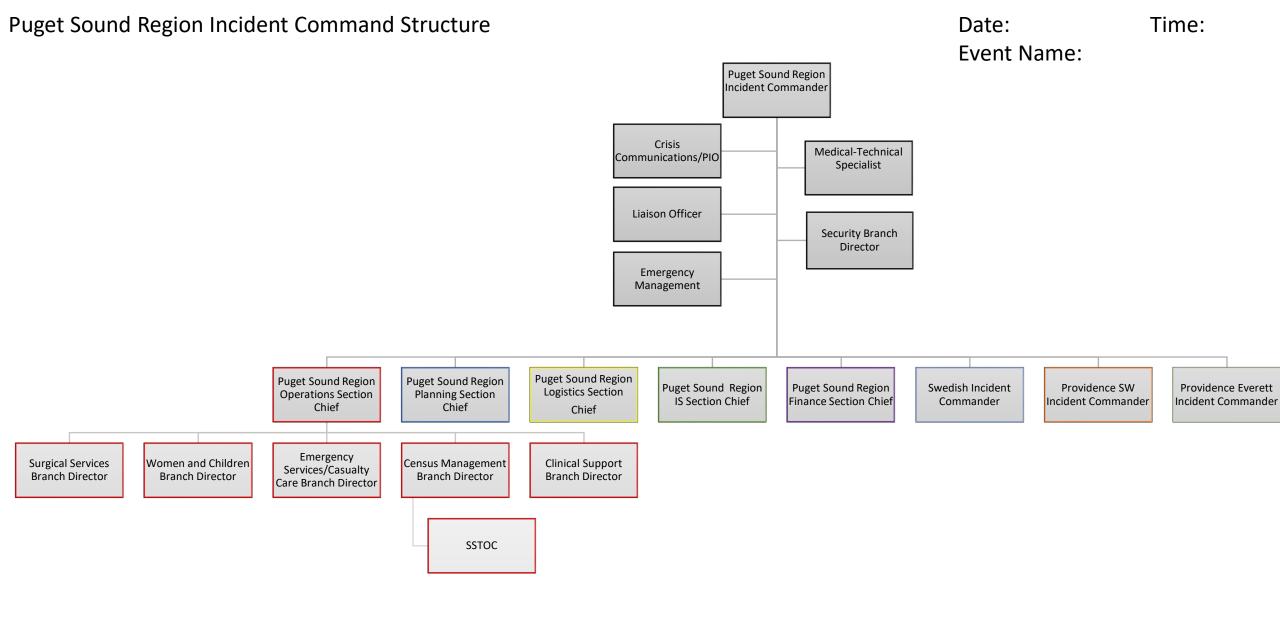
Start at Tier 1 and daily

Established cadence that









Can Hospitals change HICS

- Yes! California EMSA supports the modification and adaptation of HICS in order to meet the needs of the organization.
- Things to consider:
 - Nomenclature, keep as consistent as possible. Make sure Job Actions Sheets outline nuances.
 - Make sure your training is specific to your changes.
 - Remember why HICS is so useful and keep true to the structure.
 - Span of control
 - Communication
 - Decision making authority

