



COVID-19 Lessons Learned

Title	Incident Command System: Use of a Medical Branch vs. a Medical Unit in COVID-19 Response
Organization	Orange County Fire Authority
Date	04-08-2020
Issue Description	<p>OCFA assigned an Incident Management Team (IMT) to manage the impacts of COVID-19 on its workforce. Initially, the IMT used the Medical Unit, under the Logistics Section, to address the medical aspects of the IMT's mission.</p> <p>This is an issue many IMTs have struggled with over the years in all-hazards events when IMTs have assignments outside their traditional disciplines. What happens when the mission is medical? Or the mission is logistics? When do medical and logistics responsibilities fall under the Operations Section?</p>
Severity	High
Impact	As the response moved beyond Containment to Mitigation, it was impossible for the Medical Unit to manage the complexity of the response. The operational requirements for medical issues—PPE usage, protection of responders during calls, coordination with hospitals, information flow to crews, staffing and contingency planning—quickly exceeded the span of control of the Medical Unit.
Actions Taken	<p>Realizing the original configuration was not working, the IMT reorganized the Operations Section to include a Medical Branch, Equipment and Supply Branch, and Staffing Branch. Later, a Predictive Services Branch was added to support operational contingency planning.</p> <p>The Medical Branch focused on attending to the "operational" medical needs of all OCFA employees (all the tactical and support people at the stations, HQ, and ICP).</p>



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Actions Taken—continued	While an atypical incident, this reorganization brought the IMT back into alignment with the principles of ICS: branches were organized under the Operations Section, and procurement of supplies and equipment remained a function of the Logistics Section. The Medical Unit's duties, taking care of those assigned to the IMT, were performed by the Medical Branch under Operations.
Lessons Learned	<p>Utilizing the principles of ICS, a non-traditional incident can be organized to be as effective and efficient as a traditional wildfire incident. OCFA employees on shift and at HQ were not "assigned" to the incident as tactical resources. Instead, they were the customer, not unlike citizens at a shelter in an evacuation incident. Therefore, the major muscle group of meeting their medical needs (such as screening all employees) falls under Operations, and the scope and size of that effort determines whether a group or a branch is appropriate.</p> <p>Delivering PPE and COVID-19 unique supplies to stations is an Operations function (in this case of the Equipment & Supply Branch), not Logistics. Although the Logistics Section is still doing all the ordering, intake, and distribution of that equipment to the Equipment & Supply Branch.</p>
What's Next?	<p>Once this issue was overcome, the IMT was very flexible and quick to add or subtract organizational components as the situation dictated. When the IMT was tasked with coming up with a draft of a strategic plan for managing the long-term effects of the pandemic on OCFA, it added a Strategic Planning Section so as not to derail the Operations Section from their focus on the immediate threat. Again, atypical, but aligned completely with the principles of ICS.</p> <p>The IMT will continue to be adaptable and flexible as its mission evolves over the course of the pandemic.</p>



Mission-Centered Solutions is working to analyze and disseminate lessons learned of both immediate and long-term value to the response community across the globe.