



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
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### Memorandum

To: ASPR Hospital Preparedness Program participating hospitals  
From: Timothy McDonald, Hospital Preparedness Program Manager, EPB, DPH  
Date: August 31, 2012  
Re: NIMS Compliance Requirements and Recommendations for Acute Care Hospitals under the 2012 ASPR HPP Guidance

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This memorandum is intended to outline the Emergency Preparedness Bureau at the Massachusetts Department of Public Health's (DPH) interpretation of the training elements that are an integral part of compliance with the National Incident Management System (NIMS).

The Office of the Assistant Secretary for Preparedness and Response (ASPR) has included NIMS compliance **requirements within a number of capabilities** in the FFY 2012 Hospital Preparedness Program (HPP) guidance, including Capability 1, 3 and 6..

Although the ASPR HPP guidance does not include specific requirements for ICS-300 and ICS-400, the EPB has included strong **recommendations** to encourage training select hospital personnel to the highest levels of ICS over the course of the next grant cycle(s). For the upcoming FFY 2012 grant period, EPB's guidance includes the following:

- ICS-100 is **required** for all identified roles on a facility's hospital incident command system (HICS) chart.
- It is **recommended** strongly that hospitals have a minimum of three personnel identified and trained for each role on the standard HICS chart (especially the Command and General Staff positions).
- Any hospital personnel likely to assume the following roles on the HICS chart for a full operational period during an emergency (Incident Commander, Operations Chief, Planning Chief, Logistics Chief, Finance/Admin Chief, Liaison Officer, Public Information Officer, Safety Officer) is **required** to take ICS—100, ICS—200, and IS—700a<sup>1</sup>, and it is strongly **recommended** that the personnel work towards the completion of ICS—300.

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<sup>1</sup> And shall be able to, upon request, provide electronic certificate or equivalent documenting completion of said courses.

- It is **recommended** that a hospital’s emergency preparedness coordinator and his/her backups take ICS—100, ICS—200, ICS—300, IS—700a and IS—800b<sup>2</sup>, and shall work towards the completion of ICS—400.
- For senior level executives within a hospital that will not be specifically assuming a key position within the hospital’s incident command system but that will provide policy guidance on priorities and objectives to members of the Command and General staff positions within the hospital’s incident command system, it is strongly **recommended** that they take an ICS 402 course (ICS for Executives/Senior Officials). This course may be taught within the hospital by the hospital emergency preparedness coordinator.

Sincerely,



Timothy Muir McDonald  
Hospital Preparedness Program Manager, Emergency Preparedness Bureau  
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<sup>2</sup> Ibid.

# Incident Command System Training Flowchart For Hospitals

