The Issue:
Recent devastating natural disasters and other tragedies highlight the importance of hospitals and communities working in a coordinated and collaborative way to ensure appropriate preparedness and response. In 2003, the president issued the Homeland Security Presidential Directive-5 (HSPD-5), which created the National Incident Management System (NIMS). NIMS provides a consistent national template for all levels of government and private sector organizations “to work together effectively and efficiently to prepare for, prevent, respond to and recover from domestic incidents, regardless of cause, size or complexity, including acts of catastrophic terrorism.”

While all hospitals are strongly encouraged to become NIMS compliant, only hospitals that receive federal preparedness and response funds are required to fully implement NIMS. To that end, participating hospitals must achieve certain requirements by September 30, 2007 and must be fully compliant by September 30, 2008.

To help hospitals understand which activities must be undertaken in order to become NIMS compliant, the NIMS Integration Center (NIC), in consultation with the Department of Health and Human Services last fall, issued the NIMS Implementation Activities for Hospitals and Healthcare Systems and related fact sheets. On May 2, the NIC released NIMS Hospital Frequently Asked Questions (FAQs) to address questions about hospital compliance requirements.

Our Take:
The AHA encourages hospitals and health care systems to continue incorporating NIMS compliance elements into their emergency management planning activities, regardless of whether they receive federal preparedness and response funding. NIMS will strengthen hospital disaster preparedness activities and improve communications and coordination with other community response agencies.

What You Can Do:
✓ Share this advisory with your disaster readiness team, chief medical officer, emergency department director, nurse executive, engineering staff, risk management team and safety officer.
✓ Review the FAQs and other hospital-related NIMS information at http://www.fema.gov/emergency/nims/compliance/assist_non_govt.shtm.

Further Questions:
Please contact Roslyne Schulman, senior associate director for policy, at (202) 626-2273 or rschulman@aha.org.
BACKGROUND

Recent devastating natural disasters and other tragedies highlight the importance of hospital planning and personnel training in incident management. Hospitals and communities must work together in a coordinated and collaborative way to ensure appropriate preparedness and response.

In 2003, the president issued the Homeland Security Presidential Directive-5 (HSPD-5), which created the National Incident Management System (NIMS). NIMS is intended to provide a “comprehensive national approach” for all levels of government and private sector organizations to coordinate incident management. The system is applicable to a variety of incidents and hazardous situations, and is intended to improve coordination and cooperation between public and private sector emergency responders. All federal, state and local government agencies were required to adopt the NIMS by September 6, 2006, and participating hospitals must be fully compliant by September 30, 2008.

In September, the NIMS Integration Center (NIC), in collaboration with the Department of Health and Human Services (HHS), issued the NIMS Implementation Activities for Hospitals and Healthcare Systems and detailed fact sheets that outline how hospitals and health care systems can become NIMS compliant. The 17 implementation activities for hospitals parallel required activities that state and local governments have adopted over the last three years. Implementing these activities is intended to improve institutional readiness and integration of hospitals into a community-based response system.

The NIMS guidance and associated fact sheets for each hospital implementation activity can be found at http://www.fema.gov/emergency/nims/compliance/assist_non_govt.shtm. It is expected these guidelines will be updated periodically and that new editions will be available on the NIMS Web site. Questions and comments can be directed to the NIMS Integration Center at NIMS-Integration-Center@dhs.gov or (202) 646-3850.
All hospitals and health care systems are strongly encouraged to become NIMS compliant, as this will help to ensure that hospital preparedness activities are enhanced and integrated effectively into the overall community-wide planning effort.

Hospitals that receive federal preparedness and response funding in the form of grants, contracts or cooperative agreements are required to work towards full NIMS implementation. This includes hospitals receiving funding through the HHS Hospital Preparedness Program (formerly the Health Resources and Services Administration’s National Bioterrorism Hospital Preparedness Program), or Centers for Disease Control and Prevention Public Health Preparedness or Department of Homeland Security grants.

Implementation of the 17 NIMS compliance activities for hospitals is being phased in over a two-year period. Hospitals that received fiscal year (FY) 2006 federal preparedness and response grants, contracts or cooperative agreements have until September 30, 2007 to achieve the following NIMS activities:

- Element 7 (Revise and update plans);
- Element 9 (Independent Study-700 (IS): NIMS: An Introduction);
- Element 10 (IS-800.A: National Response Plan (NRP): An Introduction) and
- Element 11 (Incident Command System (ICS) 100 and ICS 200 Training; or equivalent).

Hospitals receiving federal preparedness and response funds for FY 2007 have until September 30, 2008 to fully implement all 17 NIMS activities.

On May 2, the NIC released NIMS Hospital Frequently Asked Questions (FAQs) to address inquiries about hospital compliance requirements. These FAQs and related documents can be found at [http://www.fema.gov/emergency/nims/compliance/assist_non_govt.shtm](http://www.fema.gov/emergency/nims/compliance/assist_non_govt.shtm).

The FAQs include answers to the following sets of questions:

**ADOPTION AND IMPLEMENTATION**

1. Regarding NIMS implementation, what constitutes a hospital and/or health care system?
2. Are there requirements that hospitals must meet in order to be NIMS compliant?
3. What specific requirements do hospitals and health care systems need to achieve by September 30 to be NIMS compliant?
4. What specific requirements do hospitals and health care systems need to achieve by September 30, 2008 to be NIMS compliant?
5. State, territory, tribal and local jurisdictions have additional NIMS activities for FY07. Does a hospital also have to complete those activities?
TRAINING
1. Which NIMS courses should hospital and health care system employees complete?
2. Courses for ICS100 and 200 for health care workers have been released on the EMI Web site. Do hospital workers have to complete that course if they already have taken an ICS 100 and 200 course?
3. Can a hospital utilize a vendor created training course? If so, how do we verify that it is NIMS compliant?
4. Will the NIC certify an ICS course as NIMS compliant for hospital and health care system responders?
5. To where should a hospital submit NIMS training records?
6. Where do I find classroom materials to teach 100, 200, 700 and or 800?
7. What qualifications does an instructor need to teach ICS 100 and 200 in the classroom setting?

HOSPITAL INCIDENT COMMAND SYSTEM (HICS)
1. What is the relationship between HICS and NIMS?
2. Do hospital personnel who have been previously trained in the Hospital Emergency Incident Command System (HEICS) need to be re-trained in HICS in order for a receiving hospital to be NIMS compliant?
3. Does completion of the HICS course materials, as they are listed on-line, make a hospital NIMS compliant?
4. Does a HICS course take the place of ICS 100 & 200 and IS700 courses?

JOINT COMMISSION AND CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)
1. To receive Joint Commission accreditation, must my hospital implement NIMS?
2. Must my hospital implement NIMS in order to meet CMS Medicare and Medicaid requirements?

NEXT STEPS
✓ Share this advisory with your disaster readiness team, chief medical officer, emergency department director, nurse executive, engineering staff, risk management team and safety officer.
✓ Review the FAQs and other hospital-related NIMS information at http://www.fema.gov/emergency/nims/compliance/assist_non_govt.shtm.