**Equity Officer- Job Action Sheet**

**Mission: Ensure that the needs of historically marginalized groups are addressed, and equity is considered in all decision making**

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| **Immediate Response (0 – 2 hours)** | **Time** | **Initial** |
| **Receive appointment** * Obtain briefing from the Incident Commander on:
	+ Size and complexity of incident
	+ Expectations of the Incident Commander
	+ Incident objectives
	+ Involvement of outside agencies, stakeholders, and organizations
	+ The situation, incident activities, and any special concerns
* Assume the role of Equity Officer
* Review this Job Action Sheet
* Put on position identification (e.g., position vest)
* Notify your usual supervisor of your assignment
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| **Assess the operational situation*** Identify key equity issues for patients, visitors, and staff such as allocation of scarce resources, access to healthcare facility, and barriers to obtaining information, and develop recommendations for monitoring and addressing these issues
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| **Activities*** Complete the equity impact assessment (at the end of this document)
* Begin to identify the potential needs of historically marginalized groups and which sections of the incident command would support these needs
* Ensure communication is culturally appropriate and accessible1
	+ Consider modes of communication (digital vs non-digital), health literacy, language, close captioning, Braille
* Evaluate for equity in processes around allocation of limited resources and prioritization of care
* Advise the Hospital Incident Management Team (HIMT) of any inequities identified and corrective recommendations
* Attend all briefings and Incident Action Plan (IAP) meetings to gather and share equity considerations and situational awareness of the community and historically marginalized groups
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| **Resources*** Obtain language translation services if needed (in-person, virtual, or telephone)
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| **Intermediate Response (2 – 12 hours)** | **Time** | **Initial** |
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| **Activities*** Transfer the Equity Officer role, if appropriate:
	+ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
	+ Address any health, medical, and safety concerns
	+ Address political sensitivities, when appropriate
	+ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
* Continue to identify the needs of historically marginalized groups and which sections of the incident command could support these needs
* Assess for inequities among patients, visitors, and staff
* Identify and define key equity metrics and direct the data collection and management1
	+ Consider data stratified by race, ethnicity, language, gender identity, zip code, or other identifiers
* Communicate with internal diversity, equity, and inclusion staff, and coordinate equity-related efforts
* Initiate communication with community organizations and public health agencies that represent historically marginalized groups1
* Attend all command briefings and Incident Action Plan (IAP) meetings to gather and share incident, community, and hospital information
* Contribute equity issues, activities, and goals to the IAP
* Advise Hospital Incident Management Team (HIMT) staff of any recognized inequities and corrective recommendations
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| **Extended Response (greater than 12 hours)** | **Time** | **Initial** |
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| **Activities*** Transfer the Equity Officer role, if appropriate
	+ Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
	+ Address any health, medical, and safety concerns
	+ Address political sensitivities, when appropriate
	+ Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
* Continually reassess the needs of historically marginalized groups and for inequities among patients, visitors, and staff
* Establish a network of individuals that provide input on local needs, health equity related issues, and develop recommendations to address the needs and mitigate inequities. Identify and create workstreams specific to the incident.
	+ Consider including the following individuals; diversity, equity, and inclusion staff, ethicists, community health staff, communications, data scientist, language services, and representatives from community organizations
* Continue to monitor equity metrics and set equity-related goals
* Partner with operational leads to develop plans to address gaps identified in the equity metrics
* Ensure diverse representation on Incident Command initiatives, committees, and work groups
* Assess for the need to add equity medical-technical specialists under each branch of the Incident Command
* Attend all briefings and IAP meetings to gather and share incident and hospital information
* Advise Hospital Incident Management Team (HIMT) staff of equity considerations and recommendations
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| **Demobilization/System Recovery** | **Time** | **Initial** |
| **Activities** * Transfer the Equity Officer role, if appropriate:
* Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
* Address any health, medical, and safety concerns
* Address political sensitivities, when appropriate
* Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
* As objectives are met and the incident related needs for historically marginalized groups decrease, consider which needs remain unmet and develop a plan to sustain support or transition to another source of support
* Develop a plan to maintain relationships built in the community, such as periodic meetings or partnering on other initiatives
* Assess the need to continue to monitor equity metrics long-term
* Participate in other briefings and meetings as required
* Brief the Incident Commander on current problems, outstanding issues, and follow-up requirements
* Submit comments to the Planning Section Chief for discussion and possible inclusion in an After-Action Report and Corrective Improvement Plan. Topics include:
* Review of pertinent position activities and operational checklists
* Recommendations for procedure changes
* Accomplishments and issues
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*Adapted from California Emergency Medical Services Authority. (2014). Hospital Incident Command System.* [*https://emsa.ca.gov/wp-content/uploads/sites/71/2017/09/HICS\_Guidebook\_2014\_11.pdf*](https://emsa.ca.gov/wp-content/uploads/sites/71/2017/09/HICS_Guidebook_2014_11.pdf)

1.Goralnick, E., Serino, R., & Clark, C. R. (2021). Equity and disasters: reframing incident command systems. *American Journal of Public Health*, *111*(5), 844–848.

**Equity Impact Assessment**

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| **Population**  | **Reported/Anticipated Impact**  | **Messaging/Translation Needs**  |
| Individuals with intellectual disabilities |  |  |
| Individuals with limited mobility |  |  |
| Individuals who are blind |  |  |
| Individuals who are deaf, deaf-blind, hard of hearing |  |  |
| Individuals who are limited or non-English speaking |  |  |
| Older adults and children |  |  |
| Individuals and families with limited resources |  |  |
| Individuals experiencing homelessness or transitional housing |  |  |
| Individuals who are experiencing domestic violence |  |  |
| Refugee and immigrant communities |  |  |
| Undocumented persons |  |  |
| Individuals with mental illness |  |  |
| People of color |  |  |
| Individuals with chronic medical needs |  |  |
| People who are drug or alcohol dependent |  |  |
| Clients of the criminal justice system |  |  |
| Other special populations (e.g., tourists/visitors, |  |  |

*From Los Angeles County Department of Health. (2017). Strategies for inclusive planning in emergency response.* [*http://publichealth.lacounty.gov/eprp/documents/Strategies%20for%20Inclusive%20Planning%20in%20Emergency%20Response\_FINAL.pdf*](http://publichealth.lacounty.gov/eprp/documents/Strategies%20for%20Inclusive%20Planning%20in%20Emergency%20Response_FINAL.pdf)