

	<p>Pima County OEM</p> <p>OEMCOMM</p>
<p>Standard operating procedure for Hospital Call-out Script and Net List</p>	

Effective Date: 2014-02-26

This document is to be used in preparing the 3rd Saturday
Hospital
Exercise script by PCOEMCOMM Hospital teams

This document is reviewed when needed. This document was last reviewed 2014-02-05

Record of Changes

This Record of Changes is used to record revisions to this document, including a brief description of the changes made, the date the changes went into effect by approval of the team leaders and documents team

Change No.	Date	Description	Contact
0	2014-01-16	<i>Initial</i>	<i>Daniel Donnelly</i>
1	2014-01-29	Overall concept	Daniel Donnelly
2	2014-02-01	interim	Daniel Donnelly
3	2014-02-08	Finalized version	Daniel Donnelly

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INTRODUCTION

This script is intended to be a guideline to be followed by Hospital Team Leaders and Team members while preparing a hospital exercise and Call-out script

Hospital exercises are to be held each 3rd Saturday of every month following the 1300 RACES exercise (at approximately 1320)

BACKGROUND AND EXPLANATION

Historical

Hospital exercises have been consistently held at every Tucson Hospital since August 1952 when RACES was authorized by the FCC. During the years since, Hospital communications exercises were conducted by the RACES organization under the auspices of various Pima County Departments. All Hospital communications exercises are presently held under the auspices of the Pima County Office of Emergency Management.

Explanation of name change

Previously, all Hospital exercises were called RACES Hospital exercises however; such communications exercises are now to be called “PCOEM COMM” Hospital exercises and the name RACES is not to be mentioned in regard to the exercise. This was necessary since the Federal Communications Commission in 47 C.F.R. 97.407(e)(4) mandated that a RACES exercise “may not exceed the total time of one (1) hour per week”, and furthermore RACES as an emergency service only becomes active wartime or a disaster making the name RACES inappropriate for normal exercise usage.

On January 16, 2014, at the PCOEM evening group meeting it was voted to employ a legal fiction to meet FCC requirements .

It is a legal fiction since RACES is a FEMA mandated emergency service. RACES is also an FCC licensed service under 47 C.F.R. part 97.3(a)(37) which encompasses all Licensed radio amateur operators who are certified with a Civil Defense organization such as the Office of Emergency Management.

Since all radio amateurs serving as Hospital radio operators meet these criteria all are automatically RACES members and during a war time emergency would be entitled to all of the benefits granted under 47 U.S.C. 606. Hence, a legal Fiction: only the name was changed to protect the Hospital radio operators.

PURPOSE

The Pre-Exercise Announcement.

The pre-exercise announcement serves two purposes:

1. To alert and remind all Hospital radio operators that there is a hospital exercise planned for that day.
2. To remind all operators that to meet FCC, OEM and Hospital regulations all Hospital operators must be deployed by the Pima County Office of Emergency Management. We simply cannot come in to the hospital and begin setting up the Hospital owned radio equipment any time we please. Hospital Radio operators do not self deploy.

Hospital regulations require either:

- (a) A pre-planned and set time and period of operation or,
- (b) Notification to the hospital by OEM and explanation of the necessity for the operators to access the hospital's Amateur radios, cables or antennas.

Since radios, cables and antennas are all hospital property, Hospital radio operators are not allowed to do any actual repair work. Radio repairs or replacement are the Hospital's responsibility. Installation or replacement of cables or antennas will be done by hospital hired contractors or by hospital maintenance personnel. RACES operators are to provide testing, programming and advisory capability only.

Once authorized by hospital management OEM will in turn give the operators permission to go to the hospital and do whatever testing or programming that may be necessary.

“This is an exercise ... I repeat this is only an exercise.”

The reason for this statement should be self explanatory. A casual listener, or an uninformed new ham hearing the deployment announcement may mistakenly believe that an actual emergency is in progress and be concerned or even possibly panic.

Always conclude the deployment transmission with this statement and your call sign.

PCOEMCOMM Hospital Check-in Script

Begin with *“this is an exercise ... this is only an exercise”*

The reason for this statement is to remove any ambiguity. Start all Hospital or emergency exercises with this statement.

Purpose of the exercise

The purpose of the hospital exercise is to determine:

1. That all equipment is still available and hasn't been stolen or lost.
2. Cables and antennas are still available and operable.
3. Usability of UHF and VHF radio equipment, the associated packet modem and computer.

4. Status of station records.
5. Availability and response time of Team Leaders, Alternate Operators and Reserve Operators.
6. Status of training and ability of all operators to handle traffic
7. Ability of each Hospital to communicate with PCOEM *via* simplex, or Home Unit or mobile relay, Repeater and Packet.
8. Ability of each Hospital to communicate with other Hospitals *via* simplex or Home Unit, mobile relay, repeater and packet.

Emergency Traffic

Obviously this net is organized to handle emergency traffic as well as Hospital traffic. Under 47 CFR 97.403 when a communications net is interrupted by a request for emergency assistance whoever is net control must immediately stop the net and attend to the emergency traffic. Once the emergency traffic is attended to the net can continue.

A Directed Net

This is a directed net. A directed net is one in which all traffic must first be directed to the net control station. The calling station having received permission from net control may then contact any other station.

Announcements (QSTs) Questions or Trouble Reports

Any announcement relating to hospital radio operations, questions regarding status or trouble reports should be brought up at this time by hospital teams. Keep it concise but make sure all pertinent points are covered.

All hospital operators should follow ICS recommendations regarding using acronyms and technospeak when making announcements or radio comments or when replying to questions relating to Hospital communications, equipment, antennas or operating problems.

(record information in your ICS-214 unit logbook.)

The Hospital Net List

The Hospital net list provides an organized listing of all active Tucson Hospitals. Its purpose is to provide an organized means of contacting Hospital management personnel or radio team members, of tracking equipment problems. It also provides a means of evaluating the performance of equipment and personnel at all participating Hospitals.

During the check in portion of the exercise Hospitals should be called in the order given in the net list using their proper name (St. Mary's Hospital, St. Joseph's Hospital, etc.). During the practical portion of the exercise operators should use tactical call signs to speed up traffic.

Each Hospital team leader, at check in, should give his name and call sign followed by the names and call signs of other operators present.

Team leaders should record time of entry into their station, time station was operational, be certain to record any problems (radio or otherwise) you may have encountered In your ICS-214 unit logbook.

Be sure to record all pertinent information, Names and call signs problems getting to equipment as well as problems with equipment. Record the time you reached the hospital, how long it took you to get to the equipment. When did the call-in portion of the net start, when was the net completed. Each Hospital Radio site has an ICS-214 unit log book, use it liberally, and record anything that may be important or useful.

Exercises

At the conclusion of the call-in portion of the net, which ever Hospital is acting as Net Control, should proceed with any exercises planned. Try to keep exercises to an hour or less. Don't worry if the exercise isn't very formal. The idea is to learn to use different modes of operation and to become proficient in all of them, to find a way to get the message through.

Remember that when you are finally called upon you may, Probably will be, be the last hope of getting patient information through to where it is needed. You may be asked to contact PCOEM or even FEMA directly for vitally needed food, medical supplies, material or personnel.

We hams are noted for our ability to get the message out under the worst conditions. Unlike commercial systems amateur radio is incredibly flexible and resilient. Amateur Radio has access to so many bands of frequencies and modes of operation that one will get the message through. You just have to find it. We can and do think out of the box. In countless instances we have been called upon to do the impossible. We have done the impossible and found a way to get the message through. Plan now for that eventually and you will succeed.

It doesn't matter that you may never be asked to pull a communications rabbit out of your hat. What matter is that YOU will know. You will have grown in ability and that's what important.

Suggested:

Hospital to Hospital using simplex. (try both VHF and UHF). Contact nearest home unit(s) or mobile units. Preplan this and arrange for them to stand by to relay. Each hospital team should do this once a year. Record the results and save in your ICS-214 unit logbook.

Hospital to PECOC radio room *via* simplex. (Try both VHF and UHF) Preplan with HUs and mobile units to relay. Each Hospital should do this once a year. Record the results and save in ICS-214 unit logbook.

Hospital to CERT amateur operators located at various locations around town. (try both UHF and VHF) Preplan you exercise with CERT operators. Record results and save in ICS-214 unit logbook.

Hospital to hospital (or PECOC) with packet. The aim is proficiency. Practice at home with other packet operators and have a GURU available during the exercise. Request a practice session at PECOC with a GURU available to assist less proficient operators.

Proficiency with packet comes from practice, practice, practice.

SCOPE

Everyone knows, or thinks that he knows, what a Standard Operating Procedure (SOP) is. But just to be clear the purpose of this SOP is to provide a consistent format defining responsibilities for upkeep, distribution, collation and usage of the Script and Hospital Net List. It is also intended to clarify the reasoning, purpose and limitations behind this script.

This Script and Hospital Net List will be maintained and distributed by the Hospital Team Director and the Deputy Team Director(s) The net list will be distributed on a quarterly basis to all hospital personal . It is the team leader's responsibility to see that their team has an up to date version .

At the end of each monthly exercise the Team leader will email results of the exercise, any changes in operating conditions or locations, changes in team membership, condition of equipment, Frequencies used etc as well as operating or message handling problems to the Deputy Team Director. His job will be to collect and collate exercise information as well as see to equipment and contact problems.

This Script and Hospital Net List is to be use on a monthly rotating basis with each hospital acting as net control in the order given on the list.

The net list will be distributed quarterly by e-mail to all Hospital team members. Team leaders will be responsible to see that all members of their team have an up to date copy of the script.

This script and net list is intended to be used by licensed radio operators authorized by the Office of Emergency Management and registered with the Hospital they have chosen.

DEFINITIONS

Insert terms and definitions as necessary in either of the styles below, in alphabetical order, with sources as appropriate.

“<INSERT TERM>” refers to <INSERT INFORMATION>.

“Word” is defined by the online dictionary as “a unit of language.”

REFERENCES

Sample Text for a single reference:

This document references <INSERT ITEM/DOCUMENT>, available online at: <INSERT URL>.

Sample Text for multiple references (do not use bullets; list in alphabetical order by title):

Please also refer to the following documents:

<INSERT ITEM/DOCUMENT>, available online at: <INSERT URL>.

<INSERT ITEM/DOCUMENT>, available online at: <INSERT URL>.

<INSERT ITEM/DOCUMENT>, available online at: <INSERT URL>.

ADMINISTRATION

PCOEMECOMM, with guidance from the documents section and the Hospital Team Workgroup, is responsible for administering this procedure.

DOCUMENT TERMINOLOGY

Use this text:

The terms “shall,” “must,” “will,” and “required” are used throughout this document to indicate required parameters and to differentiate from recommended parameters. Recommendations are identified by the words “should,” “desirably” and “preferably.”

UPDATES & REVISIONS

This document will be reviewed quarterly by the Hospital Team Director and hospital team leaders and updated as needed.