



Guidance for Medical Reserve Corps Units Regarding National Incident Management System Compliance

1. **Introduction.** The National Incident Management System (NIMS) provides a consistent nationwide mechanism for Federal, State, tribal and local governments, and private sector and nongovernmental organizations to effectively work together to prepare for, respond to and recover from emergency incidents.ⁱ Hallmarks of NIMS include a unified approach to incident management; standard command and management structures; and an emphasis on preparedness, mutual aid and resource management.ⁱⁱ While most agree that NIMS implementation is necessary and beneficial, there is widespread confusion among Medical Reserve Corps (MRC) units on how to be “NIMS compliant.”

2. **Discussion.** The Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC) considered the following factors in the creation of this guidance document:
 - a. There are established Federal NIMS compliance guidelines for volunteers and emergency responders. The Federal Emergency Management Agency (FEMA) has developed guidance and training for organizations and individuals at all levels of government and in the private and non-profit sectors to facilitate NIMS implementation. According to the NIMS Compliance FAQ, “All emergency responders, *regardless of their volunteer or career personnel status* (emphasis added), are required to complete the NIMS Implementation and Training Requirements as outlined in the FY2006 Implementation and Training Guidance released in Fall 2005. At a minimum, all personnel with a direct role in emergency preparedness, incident management or response must complete this training.”ⁱⁱⁱ The FY07 NIMS Training Guidelines list the level of Incident Command System (ICS) and NIMS training needed by an individual according to their level of responsibility (available at www.fema.gov/pdf/emergency/nims/TrainingGdlMatrix.pdf).

 - b. Federal NIMS compliance guidelines stipulate that recipients of Federal preparedness grants (normally states, territories, local governments, or tribal governments) must be NIMS compliant.^{iv} Since most MRC units are sponsored or supported by local, tribal or state governmental organizations, and therefore may be considered components of these organizations, it follows that MRC units must also be NIMS compliant. Thus, MRC units which are not NIMS compliant may jeopardize the ability of their sponsoring organizations and jurisdictions to receive Federal preparedness grant funding.

 - c. NIMS compliance guidelines have been established for hospitals and healthcare systems and require that all hospitals and healthcare systems receiving Federal preparedness and response

grants, contracts or cooperative agreements (e.g., Hospital Preparedness Program, Homeland Security Grant Programs) must work to implement NIMS.^v Because MRC units may support or assist hospitals and other healthcare facilities, it is critical that MRC members understand ICS and NIMS so that they are able to effectively work within the incident command structures established by hospitals or healthcare facilities.

- d. An understanding of ICS and NIMS is one of the MRC Core Competencies (Domain #3: Public Health Activities & Incident Management: Describe the chain of command (e.g., Emergency Management System, ICS, NIMS), the integration of the MRC, and its application to a given incident).
- e. An understanding and appreciation of NIMS facilitates the integration of an MRC unit into a community's existing public health, medical and emergency services infrastructure. MRC units and members are seen as integral components of the emergency response system. Knowledge of NIMS and ICS facilitates the utilization of MRC units and members in an emergency.
- f. Knowledge of ICS is vital for MRC members to work effectively with a variety of public health, medical, emergency services and other organizations in an emergency. When MRC members "speak the same language," understand the command and organizational structures, and are familiar with the operational concepts and processes used by other emergency responders involved in an incident, they are viewed as assets and resources. This not only enhances the credibility of the local MRC unit, but also of the MRC program as a whole.
- g. Because of the variability of MRC unit missions and member positions within an MRC unit (and/or within an ICS hierarchical organization during an incident), a baseline level of understanding of ICS is important.
- h. For MRC members who may deploy as part of a state or Federal response to a public health emergency, an understanding of NIMS and ICS will allow them to work effectively with state and Federal partners, as well as other MRC members from across the nation.
- i. An understanding of NIMS and ICS enhances the preparedness, response capability, and resiliency not only of the MRC unit, but also of the community which the MRC unit serves.

3. **MRC Guidance.** OCVMRC recommends that all MRC units should adopt NIMS and an ICS response structure, and have a NIMS/ICS training plan that utilizes a tiered approach to meeting NIMS compliance requirements. All MRC leaders and members must be trained in *ICS-100: An Introduction to ICS*, or equivalent and *IS-700: NIMS, An Introduction* or equivalent, and have received certificates of completion for these courses. It is expected that all MRC members will meet this baseline level of understanding (i.e., "awareness" level), regardless of their position or employment status (i.e., paid or volunteer) within an MRC unit. Additionally, select volunteers from within an MRC unit may require intermediate or advanced NIMS-related training (i.e., ICS-200, ICS-300, ICS-400, IS-800.B) based on the member's expected position and responsibility during an emergency. This additional training will be determined by each

MRC unit, based on its needs, requirements, organization, composition and utilization within the larger framework of its community's existing public health, medical and emergency services infrastructure. As noted in 2(a) above, the NIMS Training Guidelines describe the level of training needed by an individual according to their level of responsibility.

We encourage MRC units to use the online training courses provided by FEMA's Emergency Management Institute (EMI) Independent Study Program or FEMA courses taught in a classroom setting by appropriate instructors. However, MRC units can utilize other equivalent training courses. FEMA has posted the NIMS National Standard Curriculum Training Development Guidance on their website http://www.fema.gov/pdf/emergency/nims/nims_tsctdg_0307v2.pdf. This document outlines the objectives that must be met for ICS 100, 200, 300, and 400 for any non-Department of Homeland Security (DHS) or vendor-created courses. As long as the course meets the objectives, it is considered NIMS compliant. The MRC unit and its sponsoring organization are responsible for ensuring that any non-DHS or vendor-created training meets the objectives for a course. Non-DHS or vendor-created training courses must also include tests, and an MRC unit and its sponsoring organization may create their own test for ICS courses as long as the test questions meet the objectives as outlined in the NIMS National Standard Curriculum Training Development Guidance. NIMS guidance documents indicate that equivalent courses for IS-700 and IS-800.B are also acceptable.^{vi} Any documentation for NIMS training courses needs to be maintained by the MRC unit or its sponsoring organization.

In summary, the OCVMRC guidance is that all MRC units should have a NIMS/ICS training plan; and that plan should be tiered to include the following courses for MRC leaders and members in order to meet NIMS compliance requirements:

Course	Participants
ICS 100: Introduction to ICS or equivalent	All MRC Leaders/Members
IS-700: NIMS, An Introduction or equivalent	All MRC Leaders/Members
ICS-200: Basic ICS for Single Resources and Initial Action Incidents or equivalent	Select MRC Leaders/Members
ICS-300: Intermediate ICS or equivalent	Select MRC Leaders/Members in key leadership positions
ICS-400: Advanced ICS or equivalent	Select MRC Leaders/Members in key leadership positions
IS-800.B: National Response Framework, An Introduction or equivalent	Select MRC Leaders/Members

4. Suggestions for Implementation. The OCVMRC recognizes the training challenges faced by local MRC units in ensuring NIMS compliance. We understand that 100% compliance will be difficult to achieve given the dynamic and fluctuating nature of volunteer resources. We

expect that all MRC units will progress toward compliance with requirements by establishing training strategies and programs which seek to provide multiple opportunities for their members to complete the training courses outlined in this guidance. The OCVMRC offers the following suggestions for providing NIMS/ICS training (based on input from MRC units across the country):

- a. Inform MRC members that ICS-100 and IS-700, and other related courses, are available online through the EMI Independent Study Program (<http://training.fema.gov/IS/>). Note that the ICS-100 and IS-700 courses are also available through MRC-TRAIN (<https://www.mrc.train.org/DesktopShell.aspx>). By using MRC-TRAIN to manage an MRC unit's training program, MRC leaders can readily ascertain when MRC members have completed online ICS and NIMS training.
- b. Offer ICS-100 and IS-700 training in a classroom setting. Consider opening these classes to other organizations which also require this training, such as volunteer fire departments, hospitals and healthcare organizations, Amateur Radio Emergency Services/Radio Amateur Communications for Emergency Services (ARES/RACES), and other organizations. This will maximize limited training resources and build rapport between an MRC unit and other community organizations while increasing other organizations' awareness of the MRC. In addition, this may also serve as a recruiting mechanism for the MRC unit.
- c. Ask other local emergency services organizations, such as fire, law enforcement, emergency management and EMS agencies, and hospitals and healthcare organizations, to provide instructors for ICS and NIMS training to the MRC unit. The advantages of this approach are similar to those described in section 4(b) above.
- d. Contact state emergency management or public health agencies, as well as other organizations and associations, regarding the availability of training through their networks.
- e. Utilize the MRC Leaders Listserv (<http://www.medicalreservecorps.gov/MRCListservs>) to obtain suggestions on how other MRC units are providing ICS and NIMS training to their members. Develop and share best practices for both the course design and the delivery of training.
- f. Establish procedures for just-in-time training to be used for refresher training or to bring MRC members into compliance.

5. Questions and Additional Information. Questions and requests for additional information on NIMS compliance for MRC units should be directed to your MRC Regional Coordinator. See the following link for contact information:

<http://www.medicalreservecorps.gov/Coordinators/Regional>

Notes:

ⁱ <http://www.fema.gov/emergency/nims/faq/compliance.shtm#0>

ⁱⁱ IBID.

ⁱⁱⁱ <http://www.fema.gov/emergency/nims/faq/compliance.shtm#8>

^{iv} According to the NIMS FAQ on compliance (<http://www.fema.gov/emergency/nims/faq/compliance.shtm#6>), “all future federal preparedness grants will be contingent upon NIMS compliance by the end of FY 2006. To be considered NIMS compliant, the recipient of the funds must have adopted and/or implemented the FY 2005 and FY 2006 compliance activities.”

^v http://www.fema.gov/pdf/emergency/nims/hospital_faq.pdf

^{vi} <http://www.fema.gov/library/viewRecord.do?id=3242>