



HICS 221- DEMOBILIZATION CHECK-OUT

1. Incident Name	2. Operational Period (#) DATE: FROM: _____ TO: _____ TIME: FROM: _____ TO: _____	
3. Section Demobilization Checks Use as positions and resources are demobilized. The position and the resources may only be released when the checked boxes below are signed off, all equipment is serviced and returned, and all paperwork turned in to the Documentation Unit Leader. Respective Section Chiefs must initial their sections showing approval for demobilization.		
COMMAND STAFF		
INCIDENT COMMANDER	REMARKS	INITIALS
<input type="checkbox"/> All units, branches, and sections have been demobilized. <input type="checkbox"/> All paperwork has been gathered for review and development of After Action Report. <input type="checkbox"/> Final message to staff, media, and stakeholders has been developed and disseminated. <input type="checkbox"/> All clinical operations have returned to normal or pre-incident status. <input type="checkbox"/> Hospital Command Center and Emergency Operations Plan are deactivated.		
PUBLIC INFORMATION OFFICER	REMARKS	INITIALS
<input type="checkbox"/> Final media briefing is developed, approved, and disseminated. <input type="checkbox"/> Final staff and patient briefings are developed, approved, and disseminated. <input type="checkbox"/> Social media is updated with current status.		
LIAISON OFFICER	REMARKS	INITIALS
<input type="checkbox"/> All stakeholders and external partners are notified of Hospital Command Center deactivation/return to normal operations.		
SAFETY OFFICER	REMARKS	INITIALS
<input type="checkbox"/> Final safety review of facility is completed and documented. <input type="checkbox"/> All potential hazards have been addressed and resolved. <input type="checkbox"/> All sites/hazards have been safely mitigated/repared and are ready to be used. <input type="checkbox"/> Appropriate regulatory agencies are notified. <input type="checkbox"/> All safety specific paperwork is completed and submitted.		
MEDICAL / TECHNICAL SPECIALIST (TITLE) _____	REMARKS	INITIALS
<input type="checkbox"/> Position-specific roles and responsibilities have been deactivated. <input type="checkbox"/> Response-specific paperwork is completed and submitted to Documentation Unit Leader.		
MEDICAL / TECHNICAL SPECIALIST (TITLE) _____	REMARKS	INITIALS
<input type="checkbox"/> Position-specific roles and responsibilities have been deactivated. <input type="checkbox"/> Response-specific paperwork is completed and submitted to Documentation Unit Leader.		
MEDICAL / TECHNICAL SPECIALIST (TITLE) _____	REMARKS	INITIALS
<input type="checkbox"/> Position-specific roles and responsibilities have been deactivated. <input type="checkbox"/> Response-specific paperwork is completed and submitted to Documentation Unit Leader.		



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OPERATIONS SECTION		
STAGING AREA	REMARKS	INITIALS
<input type="checkbox"/> All supplies and equipment staged for response are returned to storage or pre-response state. <input type="checkbox"/> All personnel are debriefed and returned to daily work site.		
MEDICAL CARE BRANCH	REMARKS	INITIALS
<input type="checkbox"/> All procedures and appointments are rescheduled. <input type="checkbox"/> All evacuated patients have been repatriated and family members notified. <input type="checkbox"/> All clinical information/procedures/interventions have been documented in the electronic medical record. <input type="checkbox"/> Alternate care sites have been deactivated and physical sites returned to pre-response operations. <input type="checkbox"/> Medical supplies and equipment utilized in the response have been returned to pre-response state. <input type="checkbox"/> Staffing patterns have returned to pre-response state. <input type="checkbox"/> All units within the branch are debriefed and deactivated.		
INFRASTRUCTURE BRANCH	REMARKS	INITIALS
<input type="checkbox"/> All damage assessments are completed and final report submitted to Operations and Planning Section Chiefs. <input type="checkbox"/> Repairs to infrastructure and equipment are complete or a new state of readiness is established by Operations Section Chief. <input type="checkbox"/> Utility services are in pre-response state. <input type="checkbox"/> Resupply of critical resources is underway. <input type="checkbox"/> All units within the branch are debriefed and deactivated.		
SECURITY BRANCH	REMARKS	INITIALS
<input type="checkbox"/> Facility and/or campus lockdown is suspended. <input type="checkbox"/> Hospital personnel used to augment security staff are debriefed and demobilized. <input type="checkbox"/> Additional security measures used in the response are now discontinued. <input type="checkbox"/> All units within branch are debriefed and deactivated.		
HAZMAT BRANCH	REMARKS	INITIALS
<input type="checkbox"/> Decontamination operations are concluded and all supplies, equipment, and personnel are returned to a pre-response state. <input type="checkbox"/> Water collected in decontamination operations is collected and disposed of safely. <input type="checkbox"/> Authorities are notified of the decon operations, including water collection. <input type="checkbox"/> Personnel involved in decon are referred to Employee Health for surveillance. <input type="checkbox"/> All units within branch are debriefed and deactivated.		
BUSINESS CONTINUITY BRANCH	REMARKS	INITIALS
<input type="checkbox"/> All supplies and equipment used in relocated services have been returned. <input type="checkbox"/> Interruptions in data entry have been resolved and documentation recovered. <input type="checkbox"/> All units within branch are debriefed and deactivated.		



Purpose: Ensure all resources and supplies used in response and recovery are returned to pre-incident status
Origination: Hospital Incident Management Team (HIMT) personnel designated by Incident Commander
Copies to: Command Staff, Section Chiefs, and Documentation Unit Leader

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PATIENT FAMILY ASSISTANCE BRANCH	REMARKS	INITIALS
<input type="checkbox"/> All supplies and equipment used in relocated services have been returned. <input type="checkbox"/> All units within branch are debriefed and deactivated.		
PLANNING SECTION		
RESOURCES UNIT	REMARKS	INITIALS
<input type="checkbox"/> All tracking forms are complete and submitted to Documentation Unit Leader. <input type="checkbox"/> All tracking tools are demobilized and returned to storage.		
SITUATION UNIT	REMARKS	INITIALS
<input type="checkbox"/> All tracking forms are complete and submitted to Documentation Unit Leader. <input type="checkbox"/> All tracking tools are demobilized and returned to storage.		
DOCUMENTATION UNIT	REMARKS	INITIALS
<input type="checkbox"/> All paperwork created or used in the response has been submitted. <input type="checkbox"/> All paperwork is catalogued and correlated for review.		
DEMOBILIZATION UNIT	REMARKS	INITIALS
<input type="checkbox"/> All paperwork, including the approved Demobilization Plan, is submitted to Documentation Unit Leader.		
LOGISTICS SECTION		
SERVICE BRANCH	REMARKS	INITIALS
<input type="checkbox"/> All communications equipment is returned to readiness. <ol style="list-style-type: none"> 1. Radios and batteries are placed in charging stations. 2. Voice and text messages are reviewed and deleted. 3. Extra disaster telephones are returned to storage. 4. Satellite phones are returned and placed on chargers. 5. Hospital Command Center communication equipment is returned to storage. <input type="checkbox"/> All deployed information technology (IT) equipment is returned and inspected; all event specific data is removed and archived. <input type="checkbox"/> All food/water stores are returned to daily operations levels. <input type="checkbox"/> Disposable food preparation and delivery supplies are removed from service. <input type="checkbox"/> All units within branch are debriefed and deactivated.		
SUPPORT BRANCH	REMARKS	INITIALS
<input type="checkbox"/> Supplies and equipment used in response are inspected, cleaned, and returned to storage or daily use. <input type="checkbox"/> All equipment requiring calibration or repair is entered into preventive maintenance/service program. <input type="checkbox"/> All units within branch are debriefed and deactivated.		
FINANCE / ADMINISTRATION SECTION		
TIME UNIT	REMARKS	INITIALS
<input type="checkbox"/> All timesheets and other documentation tools are collected and provided to Documentation Unit Leader.		
PROCUREMENT UNIT	REMARKS	INITIALS
<input type="checkbox"/> All order forms, expense sheets, and other documentation tools are collected and provided to Documentation Unit Leader.		



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COMPENSATION / CLAIMS UNIT	REMARKS	INITIALS
<input type="checkbox"/> All timesheets and other documentation tools are collected and provided to Documentation Unit Leader. <input type="checkbox"/> All insurance forms are completed and submitted per policy.		
COST UNIT	REMARKS	INITIALS
<input type="checkbox"/> All time sheets and other documentation tools are collected and provided to Documentation Unit Leader. <input type="checkbox"/> All expense reports are completed. <input type="checkbox"/> All outstanding expenses, bills, purchase orders, check cards, bank cards have been resolved.		
ALL POSITIONS	REMARKS	INITIALS
<input type="checkbox"/> All paperwork generated during the response and recovery is submitted to the Documentation Unit Leader. <input type="checkbox"/> All response and recovery equipment related to your role has been repaired, charged, restocked, and returned to storage. <input type="checkbox"/> Daily supervisor is notified of your deactivation and return to normal duties.		
<p>4. Prepared by PRINT NAME: _____ SIGNATURE: _____</p> <p> POSITION: _____ FACILITY: _____</p> <p> DATE/TIME: _____</p>		



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PURPOSE: The HICS 221 - Demobilization Check-Out ensures that resources utilized during response and recovery has been returned to pre-incident status.

ORIGINATION: The HICS 221 is completed by Hospital Incident Management Team (HIMT) personnel designated by the Incident Commander.

COPIES TO: Delivered to the applicable Command Staff and Section Chief(s) for review and approval then forwarded to the Demobilization Unit or the Planning Section. All completed original forms must be given to the Documentation Unit Leader. Personnel may request to retain a copy of the HICS 221.

NOTES: HIMT personnel are not released until form is complete and signed by their Section Chief. If additional pages are needed, use a blank HICS 221 and repaginate as needed. Additions may be made to the form to meet the organization's needs.

NUMBER	TITLE	INSTRUCTIONS
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period	Enter the start date (m/d/y) and time (24-hour clock) and end date and time for the operational period to which the form applies.
3	Section Demobilization Checks	As demobilization actions are taken, check off each appropriate box (or indicate "N/A"), and ensure Section Chief signs or initials approval before resource is released.
4	Prepared by	Enter the name, Hospital Incident Management Team (HIMT) position, and signature of the person preparing the form. Enter date (m/d/y), time prepared (24-hour clock), and facility.