

Iowa Statewide Interoperable Communications System (ISICS) Standards, Protocols, Procedures

ISICS Standard:	Standard #:	5.1.0
Hospital <mark>s-Access</mark>	Date Adopted:	05/10/2018
	Date Reviewed:	
	Version:	<u>2.0</u>

1. Purpose or Objective

The purpose of this This standard is to establish a policy that provides guidelines for hospital's to gain security voice communications over the access on the ISICS platform where such communications would benefit the operations and emergency preparedness of the facility. This policy Standard does not apply applies to Hospital/Emergency Medical Services (EMS) communications, or Inter-hospital compacts, and hospital security operations communications addressed elsewhere.

2. Policy Background

The State of Iowa defines Hospital in Chapter 135B.1 "Hospital" means a place which is devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment or care over a period exceeding twenty-four hours of two or more nonrelated individuals suffering from illness, injury, or deformity, or a place which is devoted primarily to the rendering over a period exceeding twenty-four hours of obstetrical or other medical or nursing care for two or more nonrelated individuals, or any institution, place, building or agency in which any accommodation is primarily maintained, furnished or offered for the care over a period exceeding twenty-four hours of two or more nonrelated aged or infirm persons requiring or receiving chronic or convalescent care; and shall include sanatoriums or other related institutions within the meaning of this chapter.

Hospitals in Iowa on ISICS meet the Federal Communications Commission's (FCC) eligibility requirement under Subpart R of Part 90 of the FCC's Rules (Regulations Governing the Licensing and Use of Frequencies and Use of Frequencies in the 763-775 and 793-805 MHz Bands) of having the sole or principal purpose of protecting the safety of life, health, or property of individuals in everyday operations.

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The Federal Department of Homeland Security (DHS) has identified hospitals as critical facilities in the event of a chemical and/or biological emergency. Two-way radio communications between persons inside the hospital and public safety personnel outside the building is a critical need when an emergency occurs. The Iowa Statewide Interoperable Communications System Board (ISICSB) is empowered to enter into system use agreements with eligible hospitals when such use is consistent with the protection of life and safety.

3. Operational Context

<u>Hospitals have diverse operational and interoperable communication needs for public</u> <u>safety and public security. Hospital staff work directly with other hospitals, emergency</u> <u>medical services (EMS), FIRE, and Hospital security personnel often work directly with</u> <u>Ppublic sS</u>afety personnel who respond to fire and safety <u>-/and</u> security incidents at these facilities <u>daily</u>. Hospitals have the potential for some or all areas of the facility to be under <u>lock-down or</u> quarantine at times to manage communicable disease outbreaks, or other infectious disease processes, <u>or other public safety events</u>. It is important that a solid means of communication exists for coordination of hospital personnel inside and public safety personnel <u>and the public</u> outside the facility in such circumstances.

4. Recommended Protocol/Standard

Licensed hospitals which operate an emergency department that is open to the general public 24 hours a day, seven days a week, may utilize the ISICS platform for communication with public safety personnel where such use is consistent with and supportive of the facility's Emergency Response Plan (ERP). Communications using the system shall be focused on protection of life and property, security, emergency situations, and emergency preparedness. Internal day-to-day communications for the purpose of operational, administrative support, or other non-emergency communication will not be allowed.

5. Recommended Procedure

Hospitals shall submit, to the User Group Committee for ISICSB approval, a plan in accordance with ISICS Standard 2.8.0 Requesting Access and Participation to include a signed Memorandum of Agreement and a Letter of Intent. The hospital willwhich details the number and types of radios and number of talkgroups requested, how and by whom the talkgroups will be used, and how the use of the ISICS platform will interface with the hospital's Emergency Response Plan. Hospitals shall also include a copy of their Emergency Response Plan. Once approved, hospitals shall enter into a User Agreement with the ISICSB. Hospitals shall be responsible to coordinate use within their facility, as allowed by the User Agreement. Hospitals will agree to comply with the ISICSB State Standards and Standard Operating Procedures (SOPs) prior to use of the system. The User Agreement shall specify the maximum number of radios that may be owned by the hospital and activated on the system under this standard. The User Agreement shall also specify enforcement provisions, including consequences of misuse.

The talkgroups programmed in hospital radios under this policy shall be limited to those specified by the <u>User_Memorandum of</u> Agreement: interoperability talkgroups authorized

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by the ISICS platform standards and/or public safety talkgroups that have been authorized by the respective agencies owning those talkgroups.

The ISICS user understands they must be aware of and comply with all rules, regulations, policies, procedures, protocols, guidelines, standards, or requirements as established by the ISICSB, related to the use of ISICS and the signed Memorandum of Agreement.

6. Management

An NGO participant seeking to access the ISICS platform shall follow the contracting entity guidelines illustrated in the flow chart found under State Standard, Regional Development and Responsible EntityThe User Group Committee in coordination with the System Administrator will be responsible for ensuring compliance and proper use of these resources.

Any requested changes to the Hospital's plan will be made in accordance with ISICS Standard 2.8.0 Requesting Access and Participation.

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