



**Public Health Emergency  
Volunteer Reserve (PHEVR)**

# Standard Operating Procedures

## **History**

The events of September 11, 2001, changed the United States forever and led to an examination of how government agencies could respond to public health emergencies in order to protect and aid citizens. Out of this examination, the Emergency Preparedness and Response section of the North Dakota Department of Health was created. The Emergency Preparedness and Response Section is dedicated to creating and promoting a state of readiness and prompt response to protect the health of North Dakotans during catastrophic events, large-scale disasters and emergencies..

To best serve the people of North Dakota, the Emergency Preparedness and Response section knows that help is needed. The Public Health Emergency Volunteer Reserve (known as PHEVR) evolved and was established in 2002. In July of 2006, PHEVR became recognized as a Medical Reserve Corps (MRC) unit and became PHEVR/MRC.

## **What is PHEVR/MRC?**

Public Health Emergency Volunteer Reserve/Medical Reserve Corps (PHEVR/MRC) is a group composed of North Dakotans who have volunteered to help provide medical and non-medical assistance during a public health emergency. Volunteers do not need to be a resident of North Dakota; they are eligible for consideration if they work or go to school in North Dakota, or if they live in a bordering state. If volunteers are not residents of North Dakota, their deployments may be limited to specific areas within the state or state-to-state deployments.

## **What is an MRC unit?**

The MRC was founded after President Bush's 2002 State of the Union Address, in which he asked all Americans to volunteer in support of their country. It is a partner program with Citizen Corps, a national network of volunteers dedicated to ensuring hometown security. Citizen Corps- along with AmeriCorps, Senior Corps and the Peace Corp- are part of the President's USA Freedom Corps, which promotes volunteerism and service nationwide. The Medical Reserve Corps (MRC) units do the following:

- Establish groups of volunteers with interest in strengthening public health systems and providing help in emergencies
- Integrate with existing programs and resources
- Identify, credential, train and prepare in advance
- Include health, medical and public health professionals as well as non-medical personnel

## **Mission**

The mission of PHEVR/MRC is to establish and maintain active and retired medical professionals, laypersons and public health officials to serve the citizens of North Dakota during times of public health emergencies.

## **Recruitment**

Recruitment will be ongoing. Methods will include, but are not limited to:

- Local public health units
- Word- of- mouth from current volunteers
- Various state medical associations and health-related licensing boards
- Referral from volunteer and service organizations
- Promotional activities
- Links from related web sites (North Dakota Department of Health, Health Alert Network)

## **Goals**

- Recruit, register and retain a corps of health, medical and non-medical volunteers throughout the state of North Dakota to provide services during a public health emergency
- Develop and maintain a framework to match volunteers' skills with the response needed, including medical surge capacity
- Provide opportunities for volunteers to assist with non-emergency public health events and exercises, such as vaccination clinics or public awareness campaigns.
- Deliver educational opportunities to volunteers through simulation exercises, webcasts and access to online education resources
- Demonstrate appreciation for the value of volunteerism and utilization of volunteer staffing through a PHEVR/MRC recognition program

## **Definition of a PHEVR/MRC "Volunteer"**

A PHEVR/MRC volunteer is anyone who is 16 years or older, a registered and credentialed member of PHEVR/MRC who, without compensation or expectation of compensation, performs a task at the direction of and on behalf of the North Dakota PHEVR/MRC. Volunteers younger than 18 years old will need to show parental consent and their assigned tasks may be limited. Unless specifically stated, volunteers shall not be considered "employees".

A volunteer must be registered and credentialed with the PHEVR/MRC volunteer coordinator to be eligible for deployment and/or assignment. Registration is not complete until the volunteer submits all required information, the North Dakota Department of Health verifies that information, and a decision is made to accept that person as an active PHEVR/MRC volunteer.

## **Service Area**

When a volunteer registers as a PHEVR/MRC volunteer, he or she is given options to reflect deployment preferences for an emergency health and medical response. The choices are local, regional, statewide, or national response.

- A local preference indicates that deployments would be preferred in the volunteer's local area.
- A regional preference would include a volunteer's immediate area and the surrounding counties.

- A statewide preference indicates a willingness to respond anywhere in the state of North Dakota.
- A national response implies that preference is local, statewide, or anywhere in the United States there is a need for emergency health and medical volunteers.

A call for volunteers will be sent out according to deployment preferences, but if there are not a sufficient number of volunteers to fit the need of the response effort, another call for volunteers may occur outside of deployment preferences.

Please note: Regardless of deployment preferences, all deployments are voluntary.

### **Confidentiality**

PHEVR/MRC volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves another volunteer, staff member, client, disaster/emergency survivor, or any specific event information including overall PHEVR/MRC business. Failure to maintain confidentiality may result in termination of the volunteer’s relationship with the PHEVR/MRC. The volunteer’s status within the MRC may be changed to inactive, which precludes that volunteer from deployment and any other MRC activities.

### **Training**

Volunteer will be required to complete the following training:

- |                     |   |
|---------------------|---|
| <u>Required:</u>    | Overview of PHEVR/MRC (Online video)            |
| <u>Recommended:</u> | ICS courses                                     |
|                     | First Aid                                       |
|                     | Psychological First Aid                         |
|                     | Prepare Yourself (Family Disaster Preparedness) |

The training video can be viewed online and is required for all PHEVR/MRC volunteers prior to a deployment. The training video covers basic information about the PHEVR/MRC program and its mission. It addresses the issues of how deployments and drills will be conducted, what is required of volunteers, and a brief overview of the Incident Command System. The recommended courses are not required prior to deployment, but are highly recommended for volunteers sometime in the year after they registered. There may also be other trainings that interest volunteers. When appropriate, the North Dakota Department of Health will notify volunteers of training that is available, either through the Department of Health itself or through other groups, such as the North Dakota Voluntary Organizations Active in Disaster (ND VOAD), the North Dakota Department of Emergency Services (DES) and city or county emergency management. This would be done though an email, not an alert sent from the Health Alert Network (HAN).

### **“Just in Time” Training**

Just in time training may be available for volunteers who choose to be deployed to the site of an incident. This training would likely include the nature of the incident, the living conditions, the volunteers’ role in the over-all response, and any other pertinent information. Just-in-time training may also be available at the deployment location.

### **License and Certificate Verification**

The North Dakota Department of Health will verify licenses of health professionals with the appropriate state licensing board. Medical licenses and certificates must be current in order for a volunteer to be certified as a medical volunteer. (Volunteers who have previously been licensed but are not currently licensed may be eligible to be non-medical volunteers.) For medical volunteers, Department of Health staff will also verify status with the Inspector General to ensure the volunteer has not engaged in medical fraud. When appropriate, licenses will also be verified through national organizations. Credentials will be verified once every six (6) months. For some types of events, a governor's declaration of emergency or a waiver of scope of practice may be required.

### **Court Records Check**

At the time of registration, volunteers are asked if they have been involved in any civil and/or criminal court cases. The North Dakota Department of health verifies the volunteers' answers through the North Dakota Supreme Court website. The website lists court cases throughout the state and includes several years' history of court cases. A volunteer is not deemed inactive just because there is a court case associated with that volunteer's name. Minor infractions, such as traffic offenses, will not prevent a volunteer from becoming active in the PHEVR/MRC database. If a court case does cause concern as to whether or not that volunteer could carry out the responsibilities of his or her role without harming others, that case will be reviewed by the North Dakota Department of Health and a decision will be made as to the volunteer's status of active or inactive.

### **Workforce Safety Insurance**

Once a volunteer has been chosen for a deployment mission and has accepted that mission, he/she will be covered under the Department of Health's Workforce Safety and Insurance policy. A list of deployed volunteers and their social security numbers will be submitted to Workforce Safety and Insurance by close of business the first business day following deployment to ensure Workforce Safety coverage for the individual volunteer. Because of this tight time frame, volunteers need to make sure that their social security number is already in the database before the Health Alert Network (HAN) messages go out asking for volunteers. Volunteers are not considered deployable if their social security numbers are not already in the database under their registration information. All volunteers' personal information, including social security numbers, is confidential and is protected with numerous layers of electronic security on the North Dakota state Information Technology system.

### **Expectations of Volunteers**

Volunteers are expected to complete the confidentiality agreement, complete the required training component, participate in drills, and update their profile in the registration database every six months.

The PHEVR/MRC volunteer Code of Conduct addresses in greater detail how PHEVR/MRC volunteers are expected to act and what activities they are expected to avoid while actively deployed through this system.

In the event of a violation of the PHEVR/MRC Code of Conduct, the situation will be reviewed by the North Dakota Department of Health and the volunteer's status may be changed from "active" to "inactive". For record-keeping purposes, volunteer profiles are not deleted, but changed to "inactive" status.

### **Types of Service**

Roles and responsibilities depend on the member's physical ability, interest, training and expertise. All services are voluntary. Roles and responsibilities can include, but are not limited to, the following:

- 1) Medical
  - a) Immunization and prophylaxis
  - b) Clinic preparation (filling syringes, measuring meds, other)
  - c) Interviews for patient history
  - d) First responder (initial assessment and vital signs)
  - e) Triage (START)
  - f) Treatment (basic first aid)
  - g) Phone screening and consulting
  - h) Local distribution of medications from Strategic National Stockpile (SNS)
  - i) Communicable disease control measures
  - j) Supporting health needs of vulnerable populations
  - k) Integration with local, regional, and statewide initiatives
  - l) Shelter care
  
- 2) Non-Medical
  - a) Patient intake
  - b) Patient transport
  - c) Translators
  - d) HAM radio operators
  - e) Administrative tasks
  - f) Record keeping
  - g) Comforting and consoling
  - h) Child care
  - i) Answering the phone
  - j) Food service
  - k) Basic patient care
  - l) Clerical duties
  - m) Traffic control
  - n) Janitorial

### **Service Environments**

Volunteers can serve PHEVR/MRC in different types of environments such as:

- 1) Mass dispensing clinics
- 2) Mass casualty sites
  - a) Staging areas
  - b) Triage and treatment
  - c) Minimum care facilities
- 3) Emergency shelters (residents displaced due to fires, floods, storms)

4) Shift relief and backfill at hospitals

**Volunteer Activation and the Health Alert Network (HAN)**

Volunteers have a personal volunteer profile on the North Dakota Department of Health secure web site. This personal profile has information, including contact information, deployment preferences, skills and training.

Volunteers can choose the type of deployment they wish to be a part of:

- Local
- Regional
- Statewide
- National

Activation and deployment procedures:

- 1) A request for medical or non-medical volunteers for a public health response is made by contacting the North Dakota Department of Health Case Manager by calling 701.328.2270.
- 2) A Health Alert Network (HAN) message is sent to volunteers who meet the requested requirements and are listed as active volunteers in the volunteer database. The message requests a response from those willing to deploy for the event. Included in the HAN message is a web address for the PHEVR/MRC registration page where volunteers will log into their account and answer the question regarding availability for deployment.
- 3) Volunteers willing to deploy are assessed for skills appropriate for the mission, emergency preparedness training, and proximity to the deployment destination.
- 4) If volunteer response is not adequate to fill the request, a second HAN message is sent to medical professionals not currently registered on the volunteer database asking for additional medical volunteers.
- 5) Personnel within the North Dakota Department of Health Incident Command System will make the final determination of the volunteers who will make up the response team.
- 6) Status of health professionals' licenses is confirmed by personnel assigned by the North Dakota Department of Health.
- 7) Incident Command staff will notify volunteers who have been accepted for a mission by a second Health Alert Network message. This message will instruct volunteers to check the website for their assignment and a specified time to report to their local public health unit or other staging area for a videoconference briefing from Incident Command System personnel.
- 8) Volunteers being deployed are tracked by the North Dakota Department of Health, using the database and/or a spreadsheet. North Dakota Department of Health assigned personnel will track and document all volunteer deployments through de-mobilization using an Excel spreadsheet or the capabilities of the data base software.
- 9) The volunteers are issued Department of Health identification badges when they are entered into the identification/security database at their local public health unit, a central staging area, or at the final deployment destination.

- 10) The requesting entity assumes responsibility for supervision and management of the volunteer team upon arrival at the deployment destination.

### **Emergency Management Assistance Compact (EMAC)**

Volunteers may be deployed across state borders when requested by another state through an established entity, such as the Emergency Management Assistance Compact (EMAC). EMAC requests are received and processed by the North Dakota Department of Emergency Services. Department of Health personnel assist as requested by the Department of Emergency Services when PHEVR/MRC is being deployed through EMAC. PHEVR/MRC volunteers may also be deployed at the request of another state directly or through the Mid-America Alliance.

### **Identification Badges**

Upon deployment, the volunteers are issued pre-numbered Department of Health identification badges when they arrive at a central staging area or at the final deployment destination. Volunteers are expected to have their driver's license or other picture ID with them for the two-identification badge system.

### **Deployment Checklist**

After a volunteer has accepted a deployment, he or she will be directed to the online deployment checklist. This checklist is not restricted and volunteers can access it at any time, but will be reminded of it before a deployment. The deployment checklist and additional information particular to this specific response will cover such things as what to pack, expected living conditions, contact information, and equipment to bring.

### **Family Care Plan**

Because long deployments away from the volunteer's family can be stressful, volunteers are encouraged to use the family care plan document long before a deployment to address the kinds of issues that may arise during a deployment. Families are encouraged to personalize this document to fit their individual family needs. It is important for a deployed volunteer to be able to concentrate on the deployment mission; knowing that his or her family is cared for will help alleviate stress and allow him or her to concentrate on the assigned mission.

### **Contact Information**

North Dakota Department of Health Emergency Preparedness and Response Section  
701.328.2270

Contact information for the regional emergency preparedness and response coordinators is located on pages 9-10 of this document.

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