



# VOLUNTEER FIELD GUIDE

*The mission of the Medical Reserve Corps of Boulder County is to establish a team of trained, local volunteer medical, public health, and safety, and non-medical professionals who are willing to contribute their skills and expertise during times of community need.*



Boulder County Public Health  
3450 Broadway  
Boulder, CO 80304  
303-413-7500  
FAX: 303-413-7505  
[www.BoulderCountyMRC.org](http://www.BoulderCountyMRC.org)

# **Welcome to the Medical Reserve Corps of Boulder County! *An Introduction to the MRCBC Field Guide***



On behalf of Boulder County Public Health (BCPH) and the Medical Reserve Corps of Boulder County (MRCBC) Advisory Council, welcome! Thank you for joining our MRCBC volunteer team.

The MRCBC will serve Boulder County in times of a declared disaster or large-scale public health emergency. Our goal is to use the talents and strengths of our community members to strengthen and better prepare us for an emergency.

## **The MRCBC Mission Statement:**

**The Mission of the Medical Reserve Corps of Boulder County is to establish a team of trained, local volunteer medical, public health, and safety, and non-medical professionals who are willing to contribute their skills and expertise during times of community need.**

This MRCBC Field Guide was created to give you important information that you will need as an active volunteer for the MRCBC. Please take some time and read through it. If you have any questions that the Field Guide does not address, please call the MRCBC at 303.413.7532. We will be happy to assist you in any way we can so that this volunteer experience is one that is rewarding and meaningful for you.

Once again, welcome to the Medical Reserve Corps of Boulder County. Let's get ready!

# Table of Contents

- I. Policies and procedures
- II. Confidentiality and Health Insurance Portability and Accountability Act (HIPAA)
- III. Medical Reserve Corps (MRC) core competencies
- IV. Are you ready?
  - a. Family preparedness
  - b. Personal preparedness
  - c. Learn more: Websites to visit
- V. Activation of Medical Reserve Corps of Boulder County (MRCBC) volunteers
  - a. Receiving a notification
  - b. Possible emergency field assignments
  - c. Point of dispensing
  - d. Hospitals or overflow treatment centers
  - e. Possible work locations
  - f. Things to bring when you serve
  - g. Psychological first aid/self-care
- VI. Colorado Volunteer Mobilizer (CVM)
- VII. Volunteer liability and workers' compensation coverage
- VIII. Volunteer training requirements
- IX. Boulder County Incident Command System (ICS)
- X. Volunteer communications and important contact information
- XI. Appendices
  - 1. Immunization requirements
  - 2. Photo release form
  - 3. Emergency management acronyms



## **SECTION I**

# **POLICIES AND PROCEDURES FOR MRCBC VOLUNTEERS**

## **Policies and Procedures for MRCBC Volunteers**

Welcome to the Medical Reserve Corps of Boulder County (MRCBC). We hope this experience offers you a chance to put valuable skills to work for the residents of Boulder County. Volunteers like you can make a significant difference in improving the quality of life for the people and environment of Boulder County.

### **Application and Background Checks**

Each MRCBC volunteer must have a complete and verified profile through the Colorado Volunteer Mobilizer (CVM). After you register with the Colorado Volunteer Mobilizer (CVM), the state of Colorado will conduct a criminal background check, verify licensure of medical professionals (if applicable), and will notify you of acceptance as an MRC volunteer. *For more information about the CVM, please turn to Section VI.*

### **Mandatory Orientation and Trainings**

All MRCBC volunteers are required to participate in new member orientation and specific trainings (*see Section VIII*) in order to be a certified, credentialed volunteer with the MRCBC. Once your orientation is completed, the volunteer will receive an MRCBC identification badge and an emergency preparedness (ready) kit.

### **Confidentiality**

Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as an MRCBC volunteer, whether this information involves a single staff member, volunteer, client, patient, or other person, or it involves overall BCPH business. Failure to maintain confidentiality may result in your termination with the MRCBC and BCPH. ***A Confidentiality Statement is located in Section II; it should be completed and returned to the MRCBC Coordinator.***

Volunteers are expected to abide by the confidentiality policies of BCPH and the Health Insurance Portability and Accountability Act (HIPAA), and will you also be required to sign and return the HIPAA Awareness Training Quiz and acknowledgement that you have completed the HIPAA Awareness Training (also located in Section II).

## **Immunizations**

As a volunteer, it is your responsibility to ensure that your immunizations are up-to-date. BCPH requires that you complete the immunization history form on your volunteer application and provide documentation of your immunizations. *BCPH will also require information about members of your household, should immunizations be required for all family members.* BCPH will assist you with obtaining required immunizations. See *Appendix 1 for a list of recommended vaccinations.*

## **Identification Badges and Vests**

All volunteers, upon completion of the new member orientation and mandatory trainings, will be issued a photo ID badge by BCPH. You must visibly wear the ID badge at all MRCBC activities, any emergency preparedness exercises, or actual events. Incident command identification vests will be issued during MRCBC exercises, activities, or events and must be returned to MRCBC staff at the conclusion of the exercise, activity, or event.

If you decide to terminate your service with the MRCBC, your ID badge must be returned to BCPH.

## **Trainings, Meetings, and Conferences**

Required trainings will be provided to all MRCBC volunteers at no cost to you; some trainings are available online. *Please see the “Training Requirements” in Section VIII for more specifics.*

Volunteers are welcome to attend applicable meetings and conferences; however, you will be responsible for any conference fees or travel expenses related to attending these additional events. Occasionally, funding may be available for some travel expenses.

Volunteers may also choose to complete additional training through the Colorado Volunteer Mobilizer (CVM) for deployment outside of Boulder County.

## **Length of Service**

MRCBC volunteers will be reviewed on a **biennial** (i.e., every two years) basis, and you and BCPH staff will jointly determine continuation of your service.

## **Code of Conduct**

In an effort to maintain the high standard of conduct expected and deserved by the Boulder County public and to enable the MRCBC to continue to offer services required by those in need, the MRC operates under the following Code of Conduct, applicable to all volunteers.

No volunteer shall:

1. Authorize the use of, or use for the benefit or advantage of any person, the name, emblem, endorsement, services, or property of the Medical Reserve Corps of Boulder County.
2. Accept or seek on behalf of himself or any other person, any financial advantage or gain of other than nominal value that may be offered as a result of the volunteer's affiliation with the Medical Reserve Corps of Boulder County.

3. Publicly use any Medical Reserve Corps affiliation in connection with the promotion of partisan politics, religious matters, or positions on any issue not in conformity with the official positions of the national Medical Reserve Corps.
4. Disclose any confidential Medical Reserve Corps of Boulder County information that is available solely as a result of the volunteer's affiliation with the MRCBC to any person not authorized to receive such information, or use to the disadvantage of the Medical Reserve Corps of Boulder County any such confidential information, without the express authorization of the MRCBC.
5. Knowingly take any action or make any statement intended to influence the conduct of the Medical Reserve Corps of Boulder County in such a way as to confer any financial benefit on any person, corporation, or entity in which the individual has a significant interest or affiliation.
6. Operate or act in any manner that is contrary to the best interest of the Medical Reserve Corps of Boulder County.

In the event that your obligation to operate in the best interest of the MRCBC conflicts with the interests of any organization in which you have a financial interest or an affiliation, you must disclose that conflict to the MRCBC Coordinator upon becoming aware of it, abstain from any deliberations on the matter, and refrain from participating in any decisions.

### **Dismissal**

Any MRCBC volunteer not adhering to MRCBC and BCPH policies and procedures or failing to satisfactorily perform your volunteer assignment will be subject to dismissal. You will be given the opportunity to discuss the reasons for possible dismissal with the MRCBC coordinator and BCPH staff before termination. If dismissed, your MRCBC identification badge **must** be returned upon termination.

### **Resignation**

MRCBC volunteers may resign at any time, and prior notice is greatly appreciated. Your MRCBC identification badge **must** be returned upon resignation.

### **Response to the Media**

In general, media requests for information, interviews, or statements on behalf of the MRCBC must be directed to appropriate BCPH staff, specifically the MRCBC coordinator. During an incident, inquiries should be referred to your direct supervisor or the person designated to handle media requests for the incident, which may or may not be the MRCBC coordinator.

### **Photo Release**

Photos of Medical Reserve Corps of Boulder County members may be included on the MRCBC webpage or in MRCBC newsletters and/or released to the media, but only if a photo release form (see appendix 2) has been signed by the person depicted in the photo.



## **SECTION II**

# **CONFIDENTIALITY AND HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)**



## Medical Reserve Corps of Boulder County

Boulder County Public Health  
3450 Broadway, Boulder, CO 80304  
Phone 303.413.7500 FAX 303.413.7505



### CONFIDENTIALITY STATEMENT

Privacy of patient health information is an issue of paramount importance to the Medical Reserve Corps of Boulder County (MRCBC). Boulder County Public Health (BCPH) policy on confidentiality states that all employees, interns, and volunteers of BCPH must maintain the confidentiality of the agency's patients and their medical or health information to ensure an individual's right to privacy is not violated.

In the course of your volunteer duties, you may become aware of confidential information, including but not limited to the addresses, phone numbers, Social Security numbers, medical histories, health diagnosis, and medical conditions of community members. You are obligated as a volunteer of the MRCBC to follow the BCPH policy on confidentiality.

Some guidelines to follow include:

1. Follow all training and instructions regarding the collection and management of patient information.
2. Keep all patient information within your control until transferred to the appropriate personnel.
3. Keep all patient information out of the view of others.
4. Treat all patient information as privileged and confidential.
5. You may discuss a patient's health status with other members of the health care team who are involved with the patient's treatment.
6. Patient confidentiality must be protected even beyond the duration of the specific disaster/emergency incident.
7. Never discuss the circumstances of patients with unauthorized personnel or with other patients.
8. Never discuss the patient's health status in areas where it may be possible for others to overhear the discussion. Follow BCPH security guidelines for transferring patient information electronically (fax, e-mail, internet, etc.).
9. Never share a BCPH computer password with anyone else.

\*\*\*\*\*

I agree to the above instructions and pledge my commitment to the confidentiality of patient information. I understand that failure to maintain patient confidentiality may result in legal or disciplinary action against me, including dismissal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**(Please print out and return this completed form to the MRCBC Unit Coordinator.)**

## HIPAA Awareness Training for Volunteers

Boulder County Public Health has a strong tradition of protecting the privacy of patient or client information. Confidentiality has always been part of the health care culture; however, now there a law has been passed that sets a **national standard** for the protection of medical records and other personal health information. It is called the **Health Insurance Portability and Accountability Act**, or **HIPAA**.

### Training Objectives

#### To have every volunteer:

- Understand what **HIPAA** is.
- Know the meaning of Protected Health Information (**PHI**).
- Understand the significance of Treatment, Payment, and Operations (**TPO**) and why it is important to remember.
- Understand what is new with **patient or client rights**.
- Know the **consequences** for non-compliance with the law.
- Recognize the importance of making a **renewed commitment** to patient or client confidentiality!!

#### What is HIPAA?

- HIPAA is a law that was passed by Congress in 1996.
- HIPAA set national standards for the protection of patient or client information, with a compliance deadline of April 2003.
- HIPAA applies to health care providers, including hospitals, public health departments, medical professionals, insurance companies, labs, home care companies, and surgery centers.
- HIPAA covers ALL forms of protected health information . . . oral, written, and electronic.

### Why are we, as volunteers, involved with HIPAA training?

It is everyone's responsibility to ensure the confidentiality of patient or client information seriously. Anytime volunteers come in contact with patient or client information (or any personal health information), written, spoken, or electronically transmitted, they become involved with some facet of the HIPAA regulations. It is for this reason that the law requires awareness training for **all** health care personnel, including volunteers.

### What is Protected Health Information (PHI)?

According to HIPAA, all of the following information can be used to identify a patient or client:

- Addresses
- Dates
- Telephone or fax numbers
- Social Security numbers
- Medical records numbers

- Patient or client account numbers
- Insurance plan numbers
- Vehicle information
- License numbers
- Medical equipment numbers
- Photographs
- Fingerprints
- Email addresses
- Internet addresses

This information is referred to as individually identifiable health information (IIHI). Removing a patient or client name from a chart is no longer sufficient to de-identify the patient or client. HIPAA refers to this information as protected health information or PHI.

Any health information that identifies someone or can be used to identify someone **MUST BE PROTECTED.**

## Sharing patient or client information

HIPAA, under the Consent Rule, allows for the provider of care to use health information for **Treatment, Payment, and Operations (TPO)**. Before HIPAA it was common to use patient or client information for other purposes and to share more than the **minimum necessary** information. Now patients or clients need to give prior authorization for the use of their health information for non-TPO purposes.

Under the **Minimum Necessary Rule**, volunteers should only have access to the information they need in order to fulfill their assigned duties.

## What is TPO?

HIPAA allows us to share patient or client information for:

- Treatment** Providing care to patients or clients
- Payment** Getting paid for providing care for patients or clients
- Operations** Normal business activities such as quality improvement, training, auditing, customer service, and resolution of grievances.

If use of the information does not fall under one of these categories, **you must have the patient's or client's signed authorization before sharing that information with anyone!**

If personal health information (PHI) is involved, STOP and ask yourself, "Does my sharing this information involve TPO for that patient or client?" If the answer is NO, don't pass it along unless you have been authorized to do so!! This includes information you may see or hear as a volunteer about fellow volunteers, friends, and acquaintances receiving treatment. Sharing information for non-TPO purposes requires authorization from the patient or client involved.

## Scenarios

**#1--During the course of your regular volunteer duties, you enter a patient room to find a fellow volunteer who has been hospitalized.**

**OK to:** Converse with the volunteer as you normally would with other patients or clients as part of your routine duties.

**NOT OK to:** Talk about the hospitalized volunteer, including sharing the information with the volunteer office, unless he/she has authorized the release of that information.

**OK to:** Mention if he/she chooses to have the volunteer office notified, it would be best if he/she called the office directly.

**#2--You work where you have access to the patient census. While performing your regular duties, you come across the name of a fellow volunteer or acquaintance.**

**OK to:** Continue with your regular duties, disregarding the information you happened upon.

**NOT OK to:** Assume that because he/she is a volunteer or a personal friend, it is OK to notify the volunteer office or others you know!

**NOT OK to:** Scan the census looking for people you know!

**OK to:** Only use patient census for minimum information necessary to do your job, i.e. responding to a request for a patient room number.

**#3--You are having lunch with a group of volunteer friends and someone makes the statement, "Did you know that Mary is being treated in the surge treatment center?"**

**OK to:** Politely stop the conversation and remind your fellow volunteers that sharing personal health information for non-TPO purposes is not something they can do. A reminder to all that they need to be HIPAA-wise would be a very appropriate comment.

**NOT OK to:** Talk about any person's health information, without authorization, EVEN WHEN AMONG FRIENDS.

### **What are the consequences of not complying with the law?**

It has always been against BCPH policy to improperly share, use, or dispose of patient or client information in the wrong way. Under HIPAA, there are now fines and penalties for this.

We treat privacy seriously, which is why every volunteer and team member is required to sign a confidentiality form. A breach of privacy may result in termination. Wrongful and willful disclosure of health information carries fines and can involve jail time.

## Why should we do this?

- ✓ It is the legal thing to do.
- ✓ It is in keeping with the values of our organization.
- ✓ Think how you would feel if it was information about you or a loved one.

People in health care think they already do a good job protecting patient or client information, but HIPAA requires even MORE protection. We have to protect all health information all the time.

## What is new with patient or client rights?

Under HIPAA, patients or clients have a right to know how their health information may be used or disclosed and that they have certain privacy rights. These rights, some new and some revised, are communicated to our patients or clients through a document called **Notice of Privacy Practices (NPP)**.

**NEW rights** allow patients or clients to:

- Obtain a list of whom we have shared their health information with for the past six years.
- Request to amend their medical record.
- Request other communications, such as asking to be notified of lab results only at work and not at home.

**REVISED rights** allow patients or clients to:

- Review and copy their medical record
- Request restrictions on the use or sharing of their information, such as **“opting out” of the hospital directory**.

Before HIPAA, it was not uncommon for patient’s or client’s private information to be given to other companies for the purpose of **marketing** products or services. Now HIPAA states you must get the patient’s or client’s signed authorization before doing this.

## Providing for the security of patient or client information

### Computers

We have to make sure all health information, no matter where it is, is secure. This includes information stored on computers. Everyone who uses a computer has a duty to keep health information secure.

HIPAA requires that we protect all patient or client information on computers by:

- Properly signing on with individual IDs and passwords.
- Signing off of computers if walking away from the desk.
- Keeping IDs and passwords CONFIDENTIAL.
- Protecting computer screens from unwanted viewing.

### **Disposal**

We have to handle and dispose of patient or client information carefully, such as using a **shredder** instead of throwing patient or client information away. The procedure for the proper disposal of health information will be part of service-specific training!

RULE OF THUMB: NEVER dispose of patient or client information in any open area trash bin. When in doubt, ASK.

### **E-mail and fax**

HIPAA says we must protect all patient or client information transmitted electronically. Volunteers involved with these tasks will receive special training.

### **Reporting violations**

It is EVERYONE's responsibility to report violations or wrongdoings. Whether someone received patient or client information improperly, or shared patient or client information in the wrong way, everyone has a responsibility to report violations. When in doubt . . . ASK!!

Your department supervisor/liaison or your volunteer coordinator/director is a good place to start for answers to your questions . . . or for reporting issues.

### **What's next?**

This awareness training is intended to give you a general overview of HIPAA and will satisfy your core-training requirement. If you routinely have access to patient or client information as a result of your regularly assigned duties, you will likely receive further training on how new HIPAA-related policies and procedures might affect your work.

Changes will be ongoing! This is just the first phase of the Act. You will be kept apprised on updates through newsletters, your service area, volunteer staff, and annual education.

Help us to keep the HIPAA awareness level HIGH. Be HIPAA-wise and model the correct behavior.

## ***Remember to...***

- **ALWAYS** Stop and ask yourself if you should be sharing this patient or client information.
- Not to discuss it if it doesn't pertain to TPO.
- Think of patient or client information about fellow volunteers, neighbors, and acquaintances as protected information, which is not for sharing.
- Dispose of patient or client information by placing in appropriate shredding bins...never in an open wastebasket.
- Turn computer screens off if you leave the station for any reason.
- Report all abuses--enforcing the regulations is everyone's responsibility!

**I am HIPAA-wise!**

## HIPAA Awareness Quiz

1. PHI stands for: P\_\_\_\_\_ H\_\_\_\_\_ I\_\_\_\_\_.
2. The following information can be used to identify patients or clients: (P. 3)
  - A) Address
  - B) License Plate Number
  - C) Account Number
  - D) All of the above
3. Without prior authorization, patient or client information can ONLY be shared if it pertains to: T\_\_\_\_\_ P\_\_\_\_\_ O\_\_\_\_\_
4. Wrongful disclosure of health information carries fines and can involve jail time.  
 True  False
5. Under HIPAA, patients or clients can choose to NOT be listed in the patient or client directory.  
 True  False
6. Placing patient or client information in a wastebasket is OK as long as it is behind a desk.  
 True  False
7. Reporting HIPAA violations is everyone's responsibility.  
 True  False

I have completed the HIPAA Privacy Class. I accept the "I am HIPAA-wise" oath by agreeing to follow Boulder County Public Health's privacy and confidentiality policies.

---

**Volunteer Name**

---

**Date**

**(Please print out and return this completed form to the MRCBC Unit Coordinator.)**



## **SECTION III**

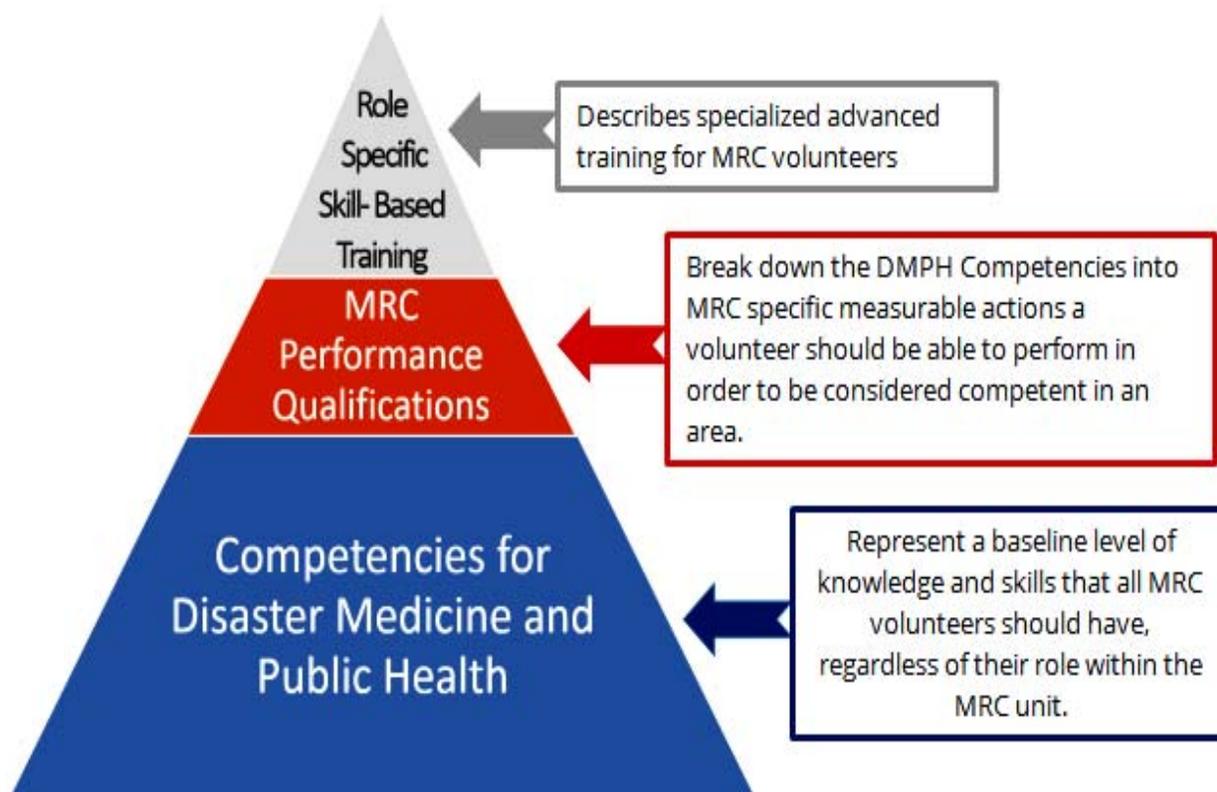
# **MEDICAL RESERVE CORPS CORE COMPETENCIES**

## What is a Core Competency?

Competencies create the basis for standards that specify the level of knowledge, skills, and abilities required for success as an MRC volunteer.

## What are the Core Competencies?

The National Center for Disaster Medicine and Public Health serves as an academic home for the development and dissemination of core skills, knowledge, and abilities, and for research on education and training strategies in the field of Disaster Medicine and Public Health. The NCDMPH developed the DMPH Competencies in 2012 in collaboration with a multidisciplinary expert working group. The DMPH Competency set is designed specifically for disaster and public health preparedness. This is the original framework designed by the National Center for Disaster Medicine and Public Health illustrating how they designed the use of the Competencies and the audiences it saw benefiting from their work.



This Hierarchical Framework is modeled after the framework developed by the National Center, and illustrates how the Competencies for Disaster Medicine interconnects with the MRC and its training. The base of this framework represents the Competencies for Disaster Medicine and Public Health. The DMPH Competencies serve as the foundational competency set for MRC volunteers and represent a baseline level of knowledge and skills that all MRC volunteers should have, regardless of their role within the MRC unit.

MRC Performance Qualifications break down the Competencies for Disaster Medicine and Public health into MRC specific measurable actions (KSAs) a volunteer should be able to

perform in order to be considered competent in an area. In essence, these performance qualifications were a way of helping MRC volunteers make sense of how the competencies apply to them.

Role Specific, Skill Based Training describes specialized advanced training for MRC volunteers. These can include unit specific competencies or skill requirements, as a unit sees fit.

## **What are the MRC Performance Qualifications?**

1. Develop a personal and family preparedness Plan.
2. Demonstrate safe behaviors during MRC Activities.
3. Follow procedures to successfully activate, report, and demobilize.
4. Follow policies and procedures related to professional and ethical representation of the MRC.
5. Describe the chain of command (e.g. NIMS, ICS) during MRC activities.
6. Describe the member's communication responsibilities and procedures.
7. Describe how MRC serves the community.
8. Demonstrate cultural humility during MRC activities.
9. Describe how MRC supports community resilience.
10. Identify the impact of an event on the behavioral health of the MRC member and their family, team, and community.
11. Identify the role of public health in the community.



## **SECTION IV**

**ARE YOU READY?**

## Are you ready?

At your MRCBC volunteer online orientation you learned about Boulder County Public Health's (BCPH) plan to respond to a health or disaster emergency. When you are called to serve in your role as an MRCBC volunteer, will you be ready?

**Prepare your family** for your absence during an emergency by being prepared for disasters in general. Create and maintain your own family disaster plan and disaster supply kit.

**Prepare yourself** to serve on short notice by creating your own personal "ready kit." Packed in advance so that if you are called to respond to a health emergency, you can grab your kit and GO!

The MRCBC will provide each volunteer with a ready kit from the American Red Cross after completion of the volunteer orientation and specified trainings. See *Section VIII for more information regarding trainings.*

This Field Guide summarizes what MRCBC volunteers must in order to as prepared as possible for your role as an MRCBC volunteer.

## Prepare Your Family

The following steps will help you and your family to create a family disaster plan:

**1. Designate an out-of-state contact person.** Try to select someone who is far enough away that they will not to be affected by the same emergency. Give that person the names and contact information for the people you want to keep informed of your situation. Instruct family members to call this person and tell them where they are.

**2. Duplicate important documents** and keep copies off-site, either in a safety deposit box or with someone you trust. Documents to duplicate may include:

- \* Birth certificates
- \* Driver's licenses
- \* Will
- \* Deeds
- \* Credit card numbers
- \* Prescription information
- \* Passports
- \* Social Security cards
- \* Marriage licenses
- \* Financial statements
- \* Medical insurance policy information
- \* Other insurance policy information

**3. Make your home safe.** View each room with a "disaster eye." Identify and fix any possible hazards, such as toppling bookcases or lack of accessible exits.

**4. Make a household/family plan.** Talk with your family about the potential disasters that can happen and why it's necessary to prepare for them. Discuss how you will reconnect with one another if you are not at home when an incident occurs. Decide where you will go and with whom you will stay if you need to evacuate, and then alert those people who will provide shelter. If children need to be picked up, designate family and friends who can help in case you are not nearby. Here are some other things to consider:

- Keep a flashlight and pair of shoes under everyone's bed in case there is an emergency during the night.
- Determine the best escape routes from your home. Try to identify two escape routes, and practice using them.
- Plan where to meet if your home becomes unsafe. Choose two places, one just outside your home and one outside your neighborhood, in case you are told to evacuate.
- Create "family communication plan" cards for each of your family members.
- Make sure all household members know how and when to turn the utilities off.
- Have a fire extinguisher on hand, and learn how to use it.
- Take into account the special needs of children, seniors, people with special needs, family members who speak another language, and pets.

**5. Pack a kit for yourself and your family.**

Put together a disaster supply kit for your home and a personal "go" kit for each family member in case you have to evacuate. Plan to have supplies for yourself and family for at least three days following a disaster. Make sure everyone knows where to find your home disaster supply kit and his or her personal "go" kit.

**Disaster supply kit**

To help your family cope after a disaster, store your home disaster supply kit in an easily accessible location. This kit should be in watertight containers that can be easily moved and should hold at least three- to five-days supply of the following items (rotate perishable items regularly):

- Drinking water (minimum of one gallon per person per day).
- First aid supplies, medications, and essential hygiene items (e.g. soap, toothpaste, and toilet paper).
- Emergency lighting—light sticks and/or a working flashlight with extra batteries and light bulbs (hand-powered flashlights also are available).
- A hand-cranked or battery-operated radio (and spare batteries).
- Canned and packaged foods and cooking and eating utensils, including a manual can opener.
- Items to protect you from the elements (e.g. warm clothing, sturdy shoes, extra socks, blankets, and perhaps a tent).
- Heavy-duty plastic bags for waste and to serve other uses (e.g. tarps and rain ponchos).

- Work gloves and protective goggles.
- Pet food and pet restraints (e.g. leashes, collars).
- **Copies** of vital documents (e.g. insurance policies, birth certificates, and personal identification).

### **The Personal “Go” Kit**

Prepare yourself to evacuate or serve as an MRC volunteer on short notice by putting together your own personal “go” kit containing items you may need during an emergency. Use this list to pack a personal “go” kit for yourself and each member of your household:

- |                                |                                                                   |
|--------------------------------|-------------------------------------------------------------------|
| • Work gloves*                 | • Warm clothes                                                    |
| • Non-latex gloves*            | • Hat                                                             |
| • NIOSH N95 Breathing Mask*    | • Rain gear/poncho*                                               |
| • Wet wipes*                   | • Water*                                                          |
| • Sanitizer gel                | • Energy bars*                                                    |
| • Tissues                      | • Emergency blanket*                                              |
| • Plastic bags                 | • First aid kit*                                                  |
| • Matches                      | • Ibuprofen, acetaminophen, or aspirin (aspirin included in kit)* |
| • Personal medications         | • Sunscreen                                                       |
| • Copies of prescriptions      | • Emergency contact card                                          |
| • Spare eyeglasses             | • Pens and paper                                                  |
| • Scissors*                    | • Marking pen/highlighter                                         |
| • Whistle*                     | • Cell phone with charger                                         |
| • Pocket knife                 | • Driver’s license (copy)                                         |
| • Flashlight w/batteries*      | • Emergency cash                                                  |
| • Extra keys for house and car | • Personal hygiene items*                                         |
| • Walking shoes                | • MRCBC Field Guide*                                              |
| • Local maps                   |                                                                   |

\* Indicates an item included in the American Red Cross Ready Kit

**As an MRCBC volunteer you will receive the American Red Cross Ready Kit, which is a stocked “go” kit, upon completion of the volunteer orientation and required trainings.**

## Learn More

For more information regarding family and personal emergency preparedness visit these websites:

**Boulder County Emergency Preparedness Information:**

<http://www.bouldercountyhealth.org/ep/index.htm>

**American Red Cross Preparedness Information:**

[www.prepare.org](http://www.prepare.org)

[www.redcross.org](http://www.redcross.org) (select "Get Prepared")

**American Red Cross Preparedness Information for People with Disabilities:**

[www.redcross.org/services/disaster/beprepared/disability.pdf](http://www.redcross.org/services/disaster/beprepared/disability.pdf)

**Homeland Security/Citizens Corps Preparedness Information:**

[www.ready.gov](http://www.ready.gov)

**State of Colorado Preparedness Information:**

<http://www.readycolorado.com/>

**Federal Emergency Management Administration Preparedness Information:**

[www.fema.gov/plan](http://www.fema.gov/plan)

**Department of Health and Senior Services Preparedness Information**

[http://www.dhss.mo.gov/Ready\\_in\\_3/](http://www.dhss.mo.gov/Ready_in_3/)

**Pandemic Flu Planning Checklist:**

[www.pandemicflu.gov/planguide/checklist.html](http://www.pandemicflu.gov/planguide/checklist.html)

**Xcel Energy Safety Tips:**

<http://www.xcelenergy.com> (Click on "Safety" under the "Quicktools," left-hand side of web page)

**Colorado Veterinarian Medical Reserve Corps**

[www.ColoradoSART.org](http://www.ColoradoSART.org)

**Center for Disease Control**

[www.cdc.gov](http://www.cdc.gov) (click on the "Emergency Preparedness and Response" button)



## **SECTION V**

# **ACTIVATION OF MEDICAL RESERVE CORPS OF BOULDER COUNTY VOLUNTEERS**

## Volunteer Activation/When You Serve

**Receiving the notification call.** When you are called to serve as an MRCBC volunteer, you will:

- Receive a notification call.
- Be deployed to a field assignment.
- Receive training in advance or on the spot (“just-in-time” training).
- Receive any supplies, equipment, or medication needed to be able to work safely.

Below is a summary of what you will need to know when you are notified in the event of an emergency:

**Activation of the MRCBC** can come from the following two sources, depending upon the severity of the incident, through the Colorado Volunteer Mobilizer (CVM): (*See Section VI for more information about CVM.*)

- **Small-scale incident** - in a small-scale incident that has specific medical needs for response, the director of Boulder County's Office of Emergency Management (OEM) may activate the MRCBC directly.
- **Large-scale incident** - in a large-scale event, activation of the MRCBC may come from either the county's OEM or BCPH.

### Possible Emergency Field Assignments

As volunteer responders, MRCBC members will be asked to fill a variety of roles in the event of an emergency. Across the country, plans have been developed to respond to whatever event happens. This is referred to as “**all-hazards**” planning.

The importance of your role as medical and support volunteers is tremendous. Depending first on the needs of the incident, and then on your skills and licensure, you may be asked to serve in any number of ways. Some of the most likely health and medical response models are described below.

- **Point of dispensing sites (POD) for mass prophylaxis**  
You may be called upon to help dispense prophylactic medication or treatment to the people of Boulder County at locally designated sites, such as the Boulder County Fairgrounds. Scenarios that might require such sites include a bioterrorism event, such as dispersal of anthrax, or other events that expose large numbers of people to an agent that we have the capacity to treat with medication. Smaller sites may be set up in advance to prophylax (immunize) first responders.
- **Hospitals or overflow treatment centers (surge)**  
Provide care specific to an outbreak or an emergency. Duties may include triage, treatment, taking medical histories, setting up treatment facilities, and helping with patient decontamination.

**Possible work locations in my geographic area:**

- Boulder County Fairgrounds, Longmont
- North Boulder Recreation Center, Boulder
- Wardenburg Student Health Center—University of Colorado, Boulder
- Coors Event Center, Denver

**Top 10 things to bring with you when you serve:**

- MRCBC credential/badge; copy of medical professional license, if applicable, or driver's license
- Your MRCBC Red Cross Ready Kit supplemented with personal items
- Extra water
- Extra food/snacks
- Clothing and footwear appropriate to the assignment and the weather (your work space may not be air-conditioned)
- Eyeglasses and/or sunglasses
- Pen/pencil and paper
- Hand wipes or gel
- Hat for sun or rain
- Sunscreen

Secure storage may not be available at your work location; bring only the essential items that you may need.

## Psychological First Aid/Self-Care

Providing care and support in the immediate aftermath of disaster can be an enriching professional and personal experience, enhancing one's satisfaction through helping others. It also can be physically and emotionally exhausting. It is important to recognize common and extreme stress reactions and **how to best take care of yourself** during your work. Expect a readjustment upon returning home; you may need to make personal reintegration a priority for a while.

### Common Stress Reactions

Providers may experience a number of stress responses, which are considered common when working with survivors:

- Increase or decrease in activity level
- Difficulties sleeping
- Substance use
- Numbing
- Irritability, anger, and frustration
- Vicarious traumatization (shock, fearfulness, horror, helplessness)
- Confusion, lack of attention, and difficulty making decisions
- Physical reactions (headaches, stomachaches, easily startled)
- Depressive or anxiety symptoms
- Decreased social activities

### Extreme Stress Reactions

Providers may experience more serious stress responses that warrant seeking support from a professional or monitoring by a supervisor. These include:

- Compassion stress—helplessness, confusion, isolation
- Compassion fatigue—demoralization, alienation, resignation
- Preoccupation or compulsive re-experiencing of trauma experienced either directly or indirectly
- Attempts to over-control in professional or personal situations, or act out a “rescuer complex”
- Withdrawal and isolation
- Preventing feelings by relying on substances, overly preoccupied by work, or drastic changes in sleep (avoidance of sleep or not wanting to get out of bed)
- Serious difficulties in interpersonal relationships, including domestic violence
- Depression accompanied by hopelessness (places individual at a higher risk for suicide)
- Unnecessary risk-taking

## **Care for Providers**

The Medical Reserve Corps of Boulder County can reduce the risk of extreme stress by putting support and policies in place, including:

Limiting shifts so providers work no more than 12 hours and encouraging work breaks.

Rotating providers from the most highly exposed assignments to lesser levels of exposure.

Mandating time off.

Identifying enough providers at all levels (administration, supervision, support).

Encouraging peer partners and peer consultation.

Conducting trainings on stress management practices.

Activities that individuals can engage in to promote self-care include:

Managing personal resources.

Planning for family/home safety, including childcare and pet care plans.

Getting adequate exercise, nutrition, and relaxation.

Using stress management tools regularly, such as:

Accessing supervisors to share concerns, identifying difficult experiences and strategize to solve problems.

Practicing brief relaxation techniques during the workday.

Using the buddy system to share upsetting emotional responses.

Staying aware of limitations and needs.

Recognizing when you are—hungry, angry, lonely or tired (HALT), and taking appropriate self-care measures.

Increasing activities that are positive.

Practicing religious faith, philosophy, spirituality.

Spending time with family and friends.

Learning how to “put stress away.”

Writing, drawing, painting.

Limiting caffeine, cigarette and substance abuse.

Self-monitoring and pacing your efforts.

Maintaining boundaries—delegating, saying no, avoiding working with too many survivors in a given shift.

Performing regular check-ins with colleagues, family, and friends.

Working with partners or in teams.

Taking relaxation/stress management/bodily care/refreshment breaks.

Using regular peer consultation and supervision.

Trying to be flexible, patient, and tolerant.

Avoiding extended periods of solo work without colleagues.

Not working around the clock with few breaks.

Avoiding negative self-talk.

Not binging on food/substances as a support.

## **Post-Event Care**

After an event, the MRCBC will use exit interviews to help providers with their experience and explain how to communicate with families about their work. The MRCBC will provide information about the positive aspects of your work and education about stress management.

After an event, providers should check in with their relief colleagues to discuss their work, schedule time for a vacation or gradual reintegration into your normal life. In addition, providers should: increase leisure activities, pay extra attention to health and nutrition, rekindle interpersonal relationships, practice good sleep routines, find things that you enjoy or make you laugh, make time for self-reflections, and keep a journal. Providers should avoid: excessive use of alcohol or drugs, making major life-changes for at least a month, negatively assessing your contribution to relief work, and placing more importance on helping others than on self-care.

Source: National Center for Post-Traumatic Stress Disorder, U.S. Department of Veterans Affairs ([http://www.ncptsd.va.gov/ncmain/ncdocs/handouts/PFA\\_Appx\\_CProviderCare.pdf](http://www.ncptsd.va.gov/ncmain/ncdocs/handouts/PFA_Appx_CProviderCare.pdf))



## **SECTION VI**

# **COLORADO VOLUNTEER MOBILIZER (CVM)**

## The Colorado Volunteer Mobilizer

The Division of Emergency Preparedness, within the Colorado Department of Public Health and Environment (CDPHE), created a mechanism to organize and supply medical professionals as volunteers to assist local, regional, and state first responders when medical resources are beyond capacity to respond to a natural or man-made disaster. The CVM will be activated, as needed, for any disaster. For example, if hospital capacity is overwhelmed and patient surge capacity is implemented, the system would be activated to assist.

Colorado developed the CVM to prevent managing and assessing the skills of “spontaneous” volunteers who may show up to volunteer their assistance following a natural or man-made disaster. The goal is to pre-identify and credential medical, public health, and safety professionals to respond effectively to disasters in the state of Colorado.

**All MRCBC volunteers must be registered and verified in order to be deployed in an emergency. Register at: <https://covolunteers.state.co.us/> for the CVM.**

Your involvement as a volunteer ensures that people affected by a disaster will receive the public health and medical care they need. Registration in the on-line database is the first step in meeting this urgent need within Colorado and the nation. Once you have registered with CVM, you will receive notification of your acceptance into the system, upcoming training opportunities, and periodic news updates. The information that you provide only will be used for training notifications and will not be misused in any way. This secure system will also be used to contact you in case of an emergency by way of email and telephone notifications. For more details regarding the Colorado Volunteer Mobilizer, visit <https://covolunteers.state.co.us>.

**Background and licensure checks:** The CVM administrators will conduct background and licensure (if applicable) checks on all registered volunteers.

**Please note:** All MRCBC volunteers must be registered with the CVM. Please register at <https://covolunteers.state.co.us>.



## **SECTION VII**

# **VOLUNTEER LIABILITY AND WORKERS' COMPENSATION COVERAGE**

# **Liability and Workers' Compensation for Public Health Personnel and Volunteers**

## **I. Introduction**

This document outlines the Colorado statutes regarding liability and workers' compensation that may pertain when public health personnel and volunteers take actions to meet an imminent or existing public health event or emergency.

The legal concept of liability applies when a public health worker or a volunteer injures someone in the course of performing public health actions. Workers' compensation applies when the public health worker or volunteer is injured while performing public health duties.

Public health officials may take actions responding to a public health event under statutes used in the ordinary course of their duties. In certain extraordinary public health emergencies, the Governor may declare a disaster to meet a public health emergency. Statutes regarding liability and workers' compensation applicable in both situations are cited below.

This document outlines general applicable principles of law. Public health agencies and individual volunteers should consult legal counsel to determine liability and compensation coverage applicable to specific situations or local circumstances.

## **II. Colorado Revised Statutes 24-33.5-1505 Immunity**

### **A. Immunity**

(1) Except for willful and wanton acts or omissions, no state commission or agency or county or municipal agency, including local emergency planning committees, citizen corps councils, fire protection districts, and volunteer fire, ambulance, or emergency service and rescue groups, nor their officers, officials, directors, employees, or volunteers, when engaged in emergency planning, service, or response activities regarding a hazardous material release, threat of release, or act of terrorism, shall be liable for:

(a) The death of or injury to any person or for the loss of or damage to property or the environment resulting from the hazardous material release, threat of release, or act of terrorism; or

(b) The acts of an insurer or insurance company, corporation, association, or partnership, including any employees, contractors, or agents, engaged in activities intended to protect the insurable private property interests of the insurer's policyholders from harm, loss, damage, or destruction.

(1.5) (a) No private organization or any of its officers, officials, directors, employees, or volunteers, when working under the direction of a local emergency planning committee or state or local fire or law enforcement agency and when engaged in emergency planning, training, or response activities regarding a hazardous material release, threat of release, or act of terrorism, shall be liable for the death of or injury to any person or for the loss of or

damage to property or the environment resulting from the hazardous material release, threat of release, or act of terrorism, except for willful and wanton acts or omissions.

(b) An insurer, insurance company, corporation, association, or partnership, including any employees, contractors, or agents, engaged in activities intended to protect the insurable private property interests of the insurer's policyholders from harm, loss, damage, or destruction does not constitute a private organization entitled to immunity from liability under the provisions of this section, and an employee, contractor, or agent of the insurer is not a volunteer as that term is defined or construed in accordance with the provisions of the "Colorado Governmental Immunity Act", article 10 of this title, regardless of whether such activities may be subject to the direction of a local emergency planning committee or a state or local fire or law enforcement agency.

(2) (a) No state commission or agency or county or municipal agency, including local emergency planning committees, incident management teams, citizen corps councils, citizen emergency response teams, medical reserve corps, fire protection districts, and volunteer fire, ambulance, or emergency service and rescue groups, nor their officers, officials, directors, employees, trainees, or volunteers, when engaged in planning, training, or response activities regarding a natural disaster, hazardous material release, public health emergency, or act of terrorism or the threat of any such disaster, release, emergency, or act, shall be liable for the death of or injury to any person or for the loss of or damage to property or the environment except for gross negligence or willful and wanton acts or omissions.

(b) Notwithstanding paragraph (a) of this subsection (2), a plaintiff may sue and recover civil damages from a person or entity specified in said paragraph (a) based upon a negligent act or omission involving the operation of a motor vehicle; except that the amount recovered from such person or entity shall not exceed the limits of applicable insurance coverage maintained by or on behalf of such person or entity with respect to the negligent operation of a motor vehicle in such circumstances. However, nothing in this section shall be construed to limit the right of a plaintiff to recover from a policy of uninsured or underinsured motorist coverage available to the plaintiff as a result of a motor vehicle accident.

(c) The general assembly intends that the provisions of this subsection (2) and of the "Colorado Governmental Immunity Act", article 10 of this title, be read together and harmonized. If any provision of this subsection (2) is construed to conflict with a provision of the "Colorado Governmental Immunity Act", the provision that grants the greatest immunity shall prevail.

(3) Neither the director nor any member of the subcommittee or any local emergency planning committee shall be liable for the death of or any injury to persons or loss or damage to property or the environment or any civil damages resulting from any act or omission arising out of the performance of the functions, duties, and responsibilities of the director or subcommittee or local emergency planning committee, except for acts or omissions which constitute willful misconduct.

(4) Nothing in this section abrogates or limits the immunity or exemption from civil liability of any agency, entity, or person under any statute, including the "Colorado Governmental Immunity Act", article 10 of this title, or section 13-21-108.5, C.R.S.

### **III. Boulder County Personnel & Policy Manual**

#### **Number I.22 - Boulder County Volunteer Policy**

##### **O. Insurance**

Boulder County offers the following protection to volunteers:

**Liability claims:** The County's liability coverage may be extended to volunteers for volunteer responsibilities. Volunteers may be covered for claims made against them individually or to protect and defend them if sued for an action while doing business within the scope of their part of a joint claim.

**Auto Liability Claims:** If a volunteer uses his/her personal vehicle while conducting county business and has an accident which causes damage to the other vehicle or physical injury to its passengers, primary coverage will be from his/her personal automobile insurance policy. If claims exceed the policy limits, the county's auto liability coverage may provide additional coverage.

**Accident Injury:** Accident medical expense protection has been purchased for volunteers. If injured while volunteering, this policy will cover expenses that are reasonable and customary per policy provisions. Coverage limits for the volunteer are \$25,000 written as an excess plan to any other type of health insurance including Medicare. If the volunteer has no health insurance, this excess coverage becomes primary. Accidental Death is subject to a \$5,000 limit and specific or dismemberment coverage is subject to a maximum limit of \$10,000. Limits and coverage provisions are subject to change according to insurance carrier terms and conditions.

## WAIVER AND RELEASE AGREEMENT BOULDER COUNTY

***THIS IS A RELEASE OF LIABILITY, PLEASE READ CAREFULLY BEFORE SIGNING***

In order for me or my child to participate as a volunteer in Boulder County's \_\_\_\_\_, through the Boulder County's PROGRAM / PROJECT \_\_\_\_\_,

and after due consideration of ELECTED OFFICIAL OR COUNTY DEPARTMENT NAME \_\_\_\_\_,

my or my child's age, health, physical condition, and ability, and the inherent risks and personal risks involved in this activity, I voluntarily agree to assume all risks of loss that arise out of my or my child's participation and agree to waive any and all claims against Boulder County and the other parties described below.

I hereby release, and agree to indemnify and hold harmless Boulder County, the Board of County Commissioners and any of their respective employees, agents, officers, representatives, successors, assigns, and insurers from liability for any injury, loss, or damage to my person or my child, or property, whether anticipated or unanticipated, resulting from my participation in any activities contemplated by this Agreement.

I realize that working on this program/project may involve risks and hazards, including the risk of injury, to my child or me. I am aware of the risks and hazards inherent in my or my child's participation and do hereby assume sole responsibility for all such risks and waive all claims against Boulder County and their respective agents, representatives, officers, employees, successors, assigns and insurers.

I authorize Boulder County to obtain medical attention for me or my child in case of emergency, and I release Boulder County, the Board of County Commissioners, and any of their agents, representatives, officers, employees, successors, assigns, and insurers from liability for obtaining such medical attention.

I agree that my child or I will abide by the rules and regulations of Boulder County while participating on this program/project. I hereby acknowledge that I have read, understood and voluntarily agreed to the foregoing waiver and release agreement.

Print \_\_\_\_\_ adult \_\_\_\_\_ or \_\_\_\_\_ child's \_\_\_\_\_ name: \_\_\_\_\_

\_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN IF VOLUNTEER IS UNDER 18 YEARS OF AGE

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

*Thank you for offering to volunteer or have your child volunteer with Boulder County. Volunteers play an important role in Boulder County's program and services and we are grateful for your interest!*

*Last Revised 12/1/09*



## **SECTION VIII**

# **VOLUNTEER TRAINING REQUIREMENTS**

## MRCBC Volunteer Training Requirements

The following chart compares the training requirements for *all* MRCBC volunteers who either wish to volunteer only Boulder County or who are willing to deploy outside the county. Both levels of volunteers are required to complete:

1. BCPH mandatory on-line orientation.
2. Emergency response training:
  - Incident Command System (ICS) ICS 100\*
  - National Incident Management Systems (NIMS) IS 700\*

### “Just in Time” Training

The first day of Medical Reserve Corps of Boulder County (MRCBC) emergency operations will include training and vaccination/prophylaxis (if applicable) of volunteers and paid staff, and vaccination/prophylaxis (if applicable) of front-line medical professionals and other volunteers.

First day (“Just in Time”) training will include:

- Patient confidentiality (HIPPA) training.
- Blood-borne pathogen training.
- Worker’s compensation acknowledgement form.
- Specialized training specific to volunteer assignments.

In addition to the above training, deployable (serving statewide or nationwide) volunteers may be required to complete the following additional requirements:

- Basic first aid
- Adult, child, infant CPR

Possible optional trainings for all levels include:

- Self-care/mental health in disasters
- Special needs/vulnerable populations
- Public Health 101—CO-TRAIN
- Strategic National Stockpile 101—CO-TRAIN
- Radio communications
- Pandemic flu and mass prophylaxis clinics trainings—This can be completed by attending as either a participant or observer in an exercise or practice activity. You may also fulfill this requirement by taking a pandemic influenza course on-line through CO-TRAIN\*\*.
- “Working in a POD”—CO-TRAIN

**\*ICS (Incident Command System) and NIMS (National Incident Management System)** are management systems that have been adopted by the vast majority of organizations that will have an emergency response role from the local to national level.

**\*\*CO-TRAIN**

CO-TRAIN is a free, on-line training tool offered by the CDPHE and the Public Health Foundation. All MRCBC volunteers will be able to take the ICS and NIMS courses through CO-TRAIN. There are many other valuable emergency preparedness courses that you can take through CO-TRAIN. Please visit <https://www.co.train.org> to create an account and start looking for on-line courses that interest you.

MRC-TRAIN is a free, on-line training tool offered by the Public Health Foundation. All MRCBC volunteers can take MRC-related courses through MRC-TRAIN. Please visit <https://www.mrc.train.org> to create an account and search for on-line courses of interest.



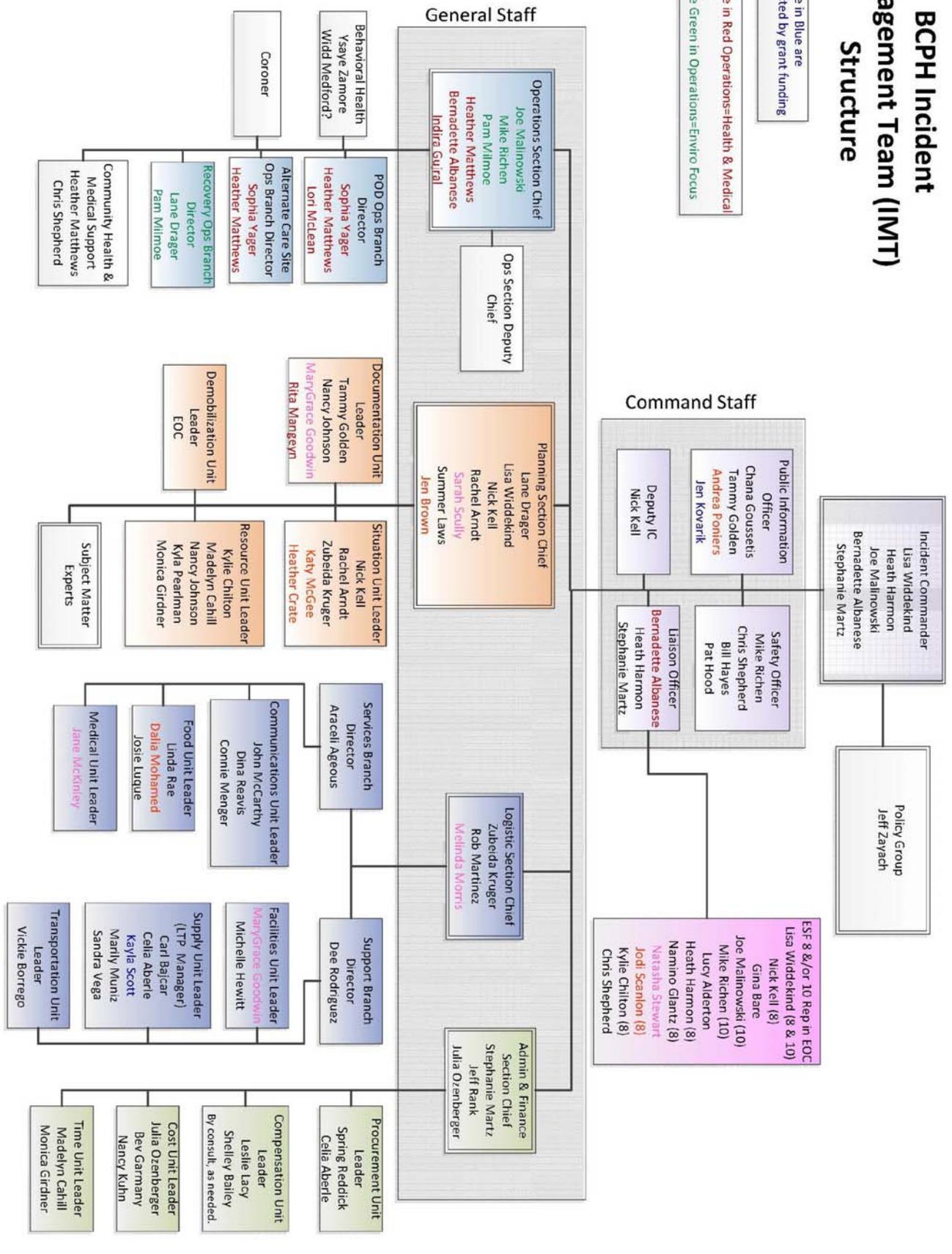
## **SECTION IX**

# **BOULDER COUNTY PUBLIC HEALTH INCIDENT COMMAND SYSTEM**

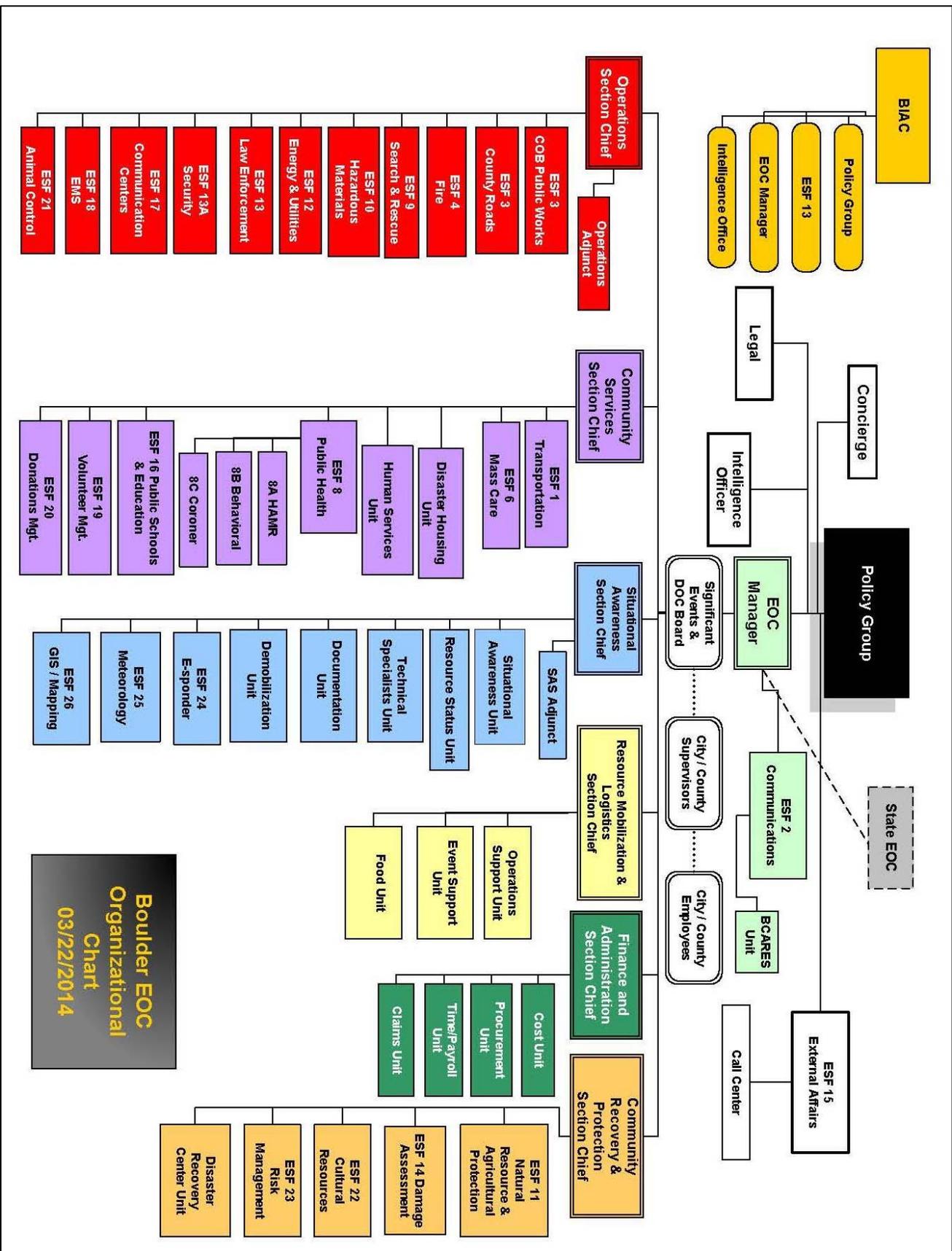
# BCPH Incident Management Team (IMT) Structure

People in Blue are restricted by grant funding

People in Red Operations=Health & Medical Focus  
People Green in Operations=Enviro Focus



# Boulder County Emergency Operations Center (EOC) Org Chart



**Boulder EOC**  
**Organizational**  
**Chart**  
**03/22/2014**



## **SECTION X**

# **VOLUNTEER COMMUNICATIONS AND IMPORTANT CONTACT INFORMATION**

## **Volunteer Communications**

BCPH is committed to keeping MRCBC volunteers informed on the latest information regarding emergency preparedness efforts in the county, state and nation.

We will provide volunteers with periodic general information; e-mails with critical information; and an updated website, [www.BoulderCountyMRC.org](http://www.BoulderCountyMRC.org) that will include a calendar of MRCBC/emergency preparedness activities, exercises, and trainings.

## **Important Contact Information**

### **Medical Reserve Corps of Boulder County Coordinators**

Nick Kell  
Emergency Planner  
Boulder County Public Health  
Cell: 303.419.7805  
Office: 303.413.7532  
Email: [nkell@bouldercounty.org](mailto:nkell@bouldercounty.org)

Kylie Chilton  
Communicable Disease Control Epidemiologist  
Boulder County Public Health  
Office: 303.413.7531  
Cell: 303.413.7517  
Email: [kchilton@bouldercounty.org](mailto:kchilton@bouldercounty.org)

### **Other**

**Boulder County Office of Emergency Management**  
<http://www.co.boulder.co.us/sheriff/oem/oem.htm>

**Colorado Volunteer Mobilizer (CVM)**  
<https://covolunteers.state.co.us>

**Colorado Department of Public Health and Environment (CDPHE) Emergency Preparedness and Response**  
<http://www.cdphe.state.co.us/bt/index.html>

**National Medical Reserve Corps Program Office**  
[www.medicalreservecorps.gov](http://www.medicalreservecorps.gov)



## **SECTION XI**

## **APPENDICES**

## IMMUNIZATION RECOMMENDATIONS FOR MEDICAL RESERVE CORPS VOLUNTEERS

The following immunizations are recommended for all Boulder County Medical Reserve Corps (BCMRC) volunteers. Additional immunizations may be recommended for some volunteers depending on their expertise and duties. Please submit your immunization documentation to the MRCBC Coordinator at: Boulder County Public Health, 3450 Broadway, Boulder, CO 80304.

### Recommended Immunization

<b>Hepatitis B</b>	Three (3) doses or serological evidence of immunity are recommended.
<b>MMR</b>	For persons born in 1957 or later, 2 doses of MMR are recommended. For persons born before 1957, one dose of MMR is recommended (should receive second dose during mumps outbreak). May also submit serologic evidence of immunity.
<b>Varicella (chickenpox)</b>	For persons with no serologic proof of immunity, no prior vaccination, or no history of disease, two (2) doses of Varicella vaccine are recommended.
<b>Tdap</b>	A Td booster dose is recommended every 10 years, following completion of the primary 3-dose series (usually received as child). A one-time dose of Tdap is recommended for all health care providers (HCP) younger than 65 years.
<b>Influenza</b>	Recommended annually.

### Immunization to Consider

<b>Hepatitis A (consider)</b>	There is a low probability of exposure in the U.S. Consider a single dose of hepatitis A vaccine if you are: living or working in a shelter, providing medical care to survivors, are a first responder, or are handling food. Two doses provide lifetime immunity.
-----------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

### Other Vaccines

<b>Meningococcal Vaccine</b>	One dose is recommended for microbiologists who are routinely exposed to isolates of <i>N. Meningitidis</i> . There is no expectation of increased risk of this disease among emergency responders; therefore, this vaccine is not recommended.
<b>Rabies Vaccine</b>	Persons who are exposed to potentially rabid animals should be evaluated and should receive immunizations as clinically appropriate. Rabies vaccine is not recommended for other health care workers.
<b>Cholera Vaccine</b>	There is a low probability of exposure; is not recommended for U.S. workers.
<b>Typhoid Vaccine</b>	There is a low probability of exposure; is not recommended for U.S. workers.

*For Universal Precautions training, please contact the BCPH Infection Control Nurse at 303-413-7527.*

#### References:

- ACIP MMWR June 29, 2001; reviewed by CDC July 2008
- CDC Disaster Safety – Q&A about immunization recommendations following Hurricane Katrina; October 12, 2005
- CDC health recommendations for relief workers responding to disasters; October-December 2005

Medical Reserve Corps of Boulder County  
Boulder County Public Health  
3450 Broadway  
Boulder, CO 80304

Permission to Use Photograph

Subject: \_\_\_\_\_

Location: \_\_\_\_\_

I grant to the Medical Reserve Corps of Boulder County, its representatives and employees the right to take photographs of me and my property in connection with activities related to serving in the Medical Reserve Corps (training, exercises, events). I authorize the Medical Reserve Corps of Boulder County, its assigns and transferees to copyright, use, and publish the same in print and/or electronically.

I agree that the Medical Reserve Corps of Boulder County may use such photographs of me with or without my name and for any lawful purpose, including for example, such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Parent or guardian (if under age 18)

## Emergency Management Acronyms

### A

<b>AAR</b>	After Action Review
<b>APEX-CPH</b>	Assessment and Planning Excellence Through Community Partners for Health
<b>ARF</b>	Action Request Form

### B

<b>BT</b>	Bioterrorism
<b>BOD</b>	Board of Directors

### C

<b>C3I</b>	Command, Control, Communications, Information
<b>CBO</b>	Community-Based Organizations
<b>CD</b>	Communicable Disease
<b>CDPHE</b>	Colorado Department of Public Health and Environment
<b>CFO</b>	Chief Financial Officer
<b>CHSI</b>	Community Health Status Indicators
<b>CI/KR</b>	Critical Infrastructure/Key Resources
<b>CIS</b>	Catastrophic Incident Supplement
<b>CMC</b>	Crisis Management Coordinator
<b>COG</b>	Continuity of Government
<b>CONOPS</b>	Concept of Operations
<b>COOP</b>	Continuity of Operations
<b>CPHMVS</b>	Colorado Public Health and Medical Volunteer System

### D

<b>DCE</b>	Defense Coordinating Element
<b>DCO</b>	Defense Coordinating Officer
<b>DETR</b>	Disaster Emergency Response Team
<b>DMAT</b>	Disaster Medical Assistance Team
<b>DPMU</b>	Disaster Portable Morgue Unit
<b>DPT</b>	Disaster Preparedness Team

**DRC** Disaster Recovery Center  
**DRG** Disaster Response Group

**E**

**EAS** Emergency Alert System  
**EERT** Environmental Emergency Response Team  
**EFS** Emergency Support Function  
**EMA** Emergency Management agency  
**EMI** Emergency Management Institute  
**EMT** Emergency Medical Technician  
**EOC** Emergency Operations Center  
**ERC** Emergency Response Coordinator  
**ERP** Emergency Response Plan  
**ESAR-VHP** Emergency System for Advance Registration of  
 Volunteer Health Professionals

**ESF** Emergency Support Function  
**ESFLG** Emergency Support Function Leaders Group  
**EST** Emergency Support Team

**F**

**FCO** Federal Coordinating Officer  
**FEMA** Federal Emergency Management Agency  
**FMCS** Federal Medical Contingency Station  
**FMS** Federal Medical Station  
**FOG** Field Operations Guide  
**FRC** Federal Resource Coordinator

**G**

**GAR** Governor’s Authorized Representative  
**GEEERC** Governor’s Expert Emergency Epidemic Response Committee  
**GIS** Geographical Information System

**H**

**HAN** Health Alert Network  
**HAZMAT** Hazardous Materials

<b>HEICS</b>	Hospital Emergency Incident Command System
<b>HIPAA</b>	Health Insurance Portability and Accountability Act
<b>HQ</b>	Headquarters
<b>I</b>	
<b>IAIP</b>	Information Analysis and Infrastructure Protection
<b>IAP</b>	Incident Action Plan
<b>IC</b>	Incident Command
<b>ICP</b>	Incident Command Post
<b>ICS</b>	Incident Command System
<b>ICU</b>	Intensive Care Unit
<b>IMT</b>	Incident Management Team
<b>INS</b>	Incident of National Significance
<b>IOP</b>	Interim Operating Facility
<b>IRA</b>	Immediate Response Authority
<b>ISAO</b>	Information-Sharing and Analysis Organization
<b>J</b>	
<b>JIC</b>	Joint Information Center
<b>JIS</b>	Joint Information System
<b>L</b>	
<b>LEPC</b>	Local Emergency Planning Committee
<b>LERC</b>	Local Emergency Response Coordinator
<b>M</b>	
<b>MACS</b>	Multiple Agency Coordinating System
<b>MAPP</b>	Mobilizing Action through Planning and Partnerships
<b>MC</b>	Mobilization Center
<b>MCE</b>	Mass Casualty Event
<b>MERS</b>	Mobile Emergency Response Support or Mobile Emergency Response System
<b>MOA</b>	Memorandum of Agreement
<b>MOB Center</b>	Mobilization Center
<b>MOU</b>	Memorandum of Understanding
<b>MPC</b>	Mass Prophylaxis Clinic
<b>MRE</b>	Meals-Ready-to-Eat

## **N**

<b>NGO</b>	Non-Governmental Organization
<b>NIMS</b>	National Incident Management System
<b>NIPP</b>	National Infrastructure Protection Plan
<b>NPG</b>	National Preparedness Goal
<b>NPO</b>	National Program Office
<b>NSSE</b>	National Special Security Event
<b>NS/EP</b>	National Security/Emergency Preparedness

## **O**

<b>OEM</b>	Office of Emergency Management
<b>OSC</b>	On-Scene Coordinator

## **P**

<b>PAO</b>	Public Affairs Office/Public Affairs Official
<b>PDA</b>	Preliminary Damage Assessment
<b>PDD</b>	Presidential Decision Directive
<b>PDQ</b>	Pretty Damn Quick
<b>PFO</b>	Principal Federal Officer
<b>PHICS</b>	Public Health Incident Command System
<b>PIO</b>	Public Information Office/Officer
<b>POC</b>	Point of Contact
<b>POD</b>	Point of Distribution/Dispensing
<b>PPE</b>	Personal Protective Equipment
<b>PSA</b>	Public Service Announcement

## **R**

<b>RA</b>	Reimbursable Agreement
<b>R&amp;D</b>	Research and Development
<b>REC</b>	Regional Emergency Coordinator
<b>RECC</b>	Regional Emergency Communications Coordinator
<b>RECP</b>	Regional Emergency Communications Plan
<b>REP</b>	Regional Evacuation Plan
<b>REPLO</b>	Regional Emergency Preparedness Liaison Officer
<b>REQ-A</b>	Request for Assistance
<b>RERC</b>	Regional Emergency Response Coordinator

<b>RET</b>	Regional Emergency Transportation
<b>RFI</b>	Request for Information
<b>RHA</b>	Regional Health Administrator
<b>ROC</b>	Regional Operations Center
<b>S</b>	
<b>SA</b>	Staging Area
<b>SAC</b>	Special Agent-in-Charge
<b>SAR</b>	Search and Rescue
<b>SCO</b>	State Coordinating Officer
<b>SEMO</b>	State Emergency Management Office
<b>SERC</b>	State Emergency Response Coordinator
<b>SFLEO</b>	Senior Federal Law Enforcement Official
<b>SFO</b>	Senior Federal Official
<b>SLO</b>	State Liaison Officer
<b>SLPP</b>	State and Local Preparedness Program
<b>SNS</b>	Strategic National Stockpile
<b>SOG</b>	Standard Operating Guideline
<b>SOP</b>	Standard Operating Procedure
<b>T</b>	
<b>TA</b>	Technical Assistance
<b>TCL</b>	Targeted Capabilities List
<b>TOPOFF</b>	Top Officials
<b>TSC</b>	Terrorist Screening Center
<b>V</b>	
<b>VC</b>	Vaccination Clinic
<b>VOAD</b>	Voluntary Organizations Active in Disaster
<b>W</b>	
<b>WMD</b>	Weapons of Mass Destruction
<b>X</b>	
<b>XML</b>	Extensible Markup Language