Volunteer Handbook

6th Edition
April 2013
## Revisions

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April 2013
What is the Medical Reserve Corps?

The Medical Reserve Corps is a national program with a local, community-based emphasis. Its objective is to strengthen communities by establishing a system for practicing and retired physicians, nurses, and other health professionals, as well as other citizens interested in health issues, to offer their expertise in addressing ongoing public health needs and to help their community during large-scale emergency situations.

The Medical Reserve Corps is a partner of the President's USA Freedom Corps and the Department of Homeland Security's Citizen Corps. It is sponsored by the Department of Health and Human Services, Office of the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC).

A Brief History

Many medical and health volunteers offered their skills in response to the September 11, 2001, attacks. These attacks underscored the need for a more organized approach to using medical and health volunteers during an emergency.

Medical and health volunteers can provide highly technical skills and services. As volunteers, they often must coordinate their efforts with complex medical emergency and public health response systems. To protect emergency responders' safety, it is critical to prepare volunteers prior to an emergency response effort.

To support this effort, the Secretary of Health and Human Services officially launched the MRC in July 2002. Congress allocated funds to establish the MRC Program in the Office of the U.S. Surgeon General to initiate an MRC demonstration project and to provide national technical assistance. Today coordinators in ten regions that encompass all U.S. states and territories support local MRC units.

Since the MRC initiative began in 2002, units have formed in nearly every state, and thousands of individuals have signed up or have expressed interest in volunteering. Local communities also have worked diligently and creatively to establish the foundation of community support and planning necessary for their units to function effectively.

The Cuyahoga County Medical Reserve Corps

The Cuyahoga County Medical Reserve Corps (CCMRC) was established on February 21, 2006 to support the local public health departments in their emergency preparedness initiatives. The CCMRC draws its volunteers from the 59 cities, villages, and townships that it serves.

The CCMRC is administered by the Cuyahoga County Board of Health and is affiliated with the Department of Health and Human Services, Office of the Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, Ohio Department of Health, Ohio Medical Reserve Corps, and Cuyahoga County Citizen Corps.

Ohio, and therefore the CCMRC, is part of U.S. Public Health Service Region V, which also includes the states of Illinois, Indiana, Michigan, Minnesota, and Wisconsin.
CCMRC Role in the Cuyahoga County Citizen Corps

The Citizen Corps is a FEMA-supported program that seeks to engage all citizens in making their communities safer, stronger, and prepared for responding to and recovering from emergencies and disasters. The Cuyahoga County Citizen Corps has brought together organizations from all sectors of the community – businesses, Community Emergency Response Teams, functional needs, health/medical, and non-profits – and has formed working groups to accomplish the goals and objectives of the Citizen Corps Strategic Plan. The leaders of the working groups form the Citizen Corps Council, which facilitates and integrates the accomplishments of the working groups. The CCMRC is a member of the Health/Medical Working Group, and the CCMRC Coordinator is on the Citizen Corps Council.

CCMRC Vision

The CCMRC will encourage volunteers to use their professional expertise to improve the public health of their communities on an ongoing basis. During times of crisis and non-crisis, volunteers will supplement the existing public health infrastructure to improve overall preparedness and to promote healthy behaviors, prevention of disease, and provision of care in the community.

CCMRC Mission

The CCMRC will enhance emergency preparedness and response capabilities in Cuyahoga County by recruiting, training, and coordinating medical, non-medical, and public health volunteers to assist in preparedness and response to a public health emergency, including mass dispensing/vaccination.

CCMRC Core Values

**Action**

We seek opportunities to develop meaningful initiatives that support community medical and public health volunteerism and service.

**Resourcefulness**

We maximize our potential to learn and leverage relationships and assets.

**Teamwork**

We embrace collaboration and work collectively to achieve our mission.
Emergency Management Principles

The CCMRC will subscribe to the emergency management principles espoused by FEMA and the International Association of Emergency Managers (IAEM).

1. **Comprehensive**: Consider and take into account all hazards, all phases, all stakeholders and all impacts relevant to disasters.

2. **Progressive**: Anticipate future disasters and take preventive and preparatory measures to build disaster-resistant and disaster-resilient communities.

3. **Risk-driven**: Use sound risk management principles (hazard identification, risk analysis, and impact analysis) in assigning priorities and resources.

4. **Integrated**: Ensure unity of effort among all levels of government and all elements of a community.

5. **Collaborative**: Create and sustain broad and sincere relationships among individuals and organizations to encourage trust, advocate a team atmosphere, build consensus, and facilitate communication.

6. **Coordinated**: Synchronize the activities of all relevant stakeholders to achieve a common purpose.

7. **Flexible**: Use creative and innovative approaches in solving disaster challenges.

8. **Professional**: Value a science and knowledge-based approach based on education, training, experience, ethical practice, public stewardship, and continuous improvement.

How to Join the CCMRC

1. Complete the *Membership Registration* and *Interview Questions* in Appendix A or posted online at [http://www.ccbh.net/emergency-preparedness](http://www.ccbh.net/emergency-preparedness).

2. Submit the forms by one of the following methods:
   a. By e-mail to mrc@ccbh.net.
   b. By mail to Medical Reserve Corps, Cuyahoga County Board of Health, 5500 Venture Drive, Parma, Ohio 44130.

3. You will be provided with orientation materials.
Membership Requirements

1. Be a resident of Cuyahoga County or employed/attending a college in Cuyahoga County.
2. Be at least 18 years old (see "Youth Participation").
3. Submit to a background check (see "Background Checks").
4. Submit to a license/certification verification, if a health/medical professional.
5. Designate an ESAR-VHP level, if a health/medical professional (see "ESAR-VHP Classification of Medical Volunteers").
6. Register with Ohio Responds (see "Ohio Responds") and provide documentation of most current training course completed (Appendix F).
7. Participate in emergency and non-emergency events.
8. Respond to CCMRC email messages as needed.
9. Update Ohio Responds volunteer profile annually.

Membership Recommendations

1. Participate in at least one exercise per year using the Incident Command System.
2. Report changes in status of licensure and/or certification, if applicable.

Youth Participation

The current age requirement is 18; however, the Office of the U.S. Surgeon General encourages youth participation, and the CCMRC is reviewing initiatives that may be appropriate for individuals under the age of 18.

Background Checks

The CCMRC is investigating the best process for conducting background checks. Many factors must be taken into consideration, including method, disqualifying criteria, requirements of partner organizations, and cost. Members will be notified when decisions are made and the background checks begin.
Ohio Responds

Ohio Responds is a website (http://ohioresponds.gov/) that serves as a coordinating entity for Ohio volunteers. The Ohio Emergency Management Agency coordinates Ohio Citizen Corps’ Community Emergency Response Teams (CERT), Fire Corps, Neighborhood Watch, and Volunteers in Police Service (VIPS) programs. The Ohio Department of Health coordinates the Ohio Medical Reserve Corps, of which CCMRC is a member.

The Ohio Responds Registry is a database of Ohio volunteers. When volunteers register, they become eligible for liability protection (see "Liability Protection"), receive alerts from Ohio Responds, and collect information that is needed to support promotion, planning, and funding opportunities.

Continued registration on Ohio Responds requires that volunteers take one approved continuing education course every three years and that volunteers log the training on their profile, including a certificate of completion/attendance. (See Training for more information.)

License/Certification Verification

Licenses and certifications of health and medical professionals will be verified at the time of registration. Volunteers should report any change in their license/certification status to the CCMRC Coordinator.

Participation

While the CCMRC recognizes that volunteers may choose where, when, and how they will respond, it also has an obligation to provide a ready force of volunteers who can integrate seamlessly into emergency or non-emergency situations. It also has an obligation to use its resources to best advantage. One of the elements required to meet both of these goals is regular participation by its members in meetings, trainings, and operations.

Fees and Compensation

There is no membership fee and no monetary compensation for services rendered or expenses incurred by volunteers in the performance of CCMRC duties unless approved by the CCMRC Coordinator.

Assumption of Risk

The risk of illness and injury exists as a result of participation in CCMRC events. By seeking membership in the CCMRC, volunteers understand and assume all of the costs resulting from any injury or illness deriving from participation in CCMRC activities.

Volunteers should not report for duty if they are physically or psychologically unwell, and they should not accept assignments that they are physically or psychologically incapable of discharging.
Liability Protection

Ohio statute and administrative rules address the issue of liability protection for volunteers during an emergency declared by the state or political subdivision or in disaster-related exercises, testing or other training activities (ORC 5502.281). You should read both the statute (ORC 5502.281) and the rules (OAC 120:40-1-01) in their entirety. Text of both documents appears in Appendix B.

The CCMRC cannot answer legal questions or give legal advice. Volunteers should consult an attorney with questions about ORC 5502.281, OAC 121:40-1-01 or other legal issues pertaining to CCMRC participation.

Liability Protection for Health Professionals

Liability protection for health/medical professionals is under consideration by the Ohio legislature. CCMRC will provide information when it becomes available.

Liability, Medical, and Malpractice Insurance

CCMRC volunteers are responsible for their own liability, medical, and malpractice insurance.

Workers' Compensation

CCMRC volunteer eligibility to receive Workers' Compensation is under review. CCMRC will provide information when it becomes available.

Resignation from CCMRC

If individuals cannot or choose not to continue their membership in the CCMRC, they should send written notice, including the effective date of the resignation, to the CCMRC Commander. Any re-usable material resources that were issued to the resigning individuals must be returned to the designated person. CCMRC identification badges must also be returned. Individuals who resign may re-join through the standard procedure.

Removal from CCMRC

Individuals who do not act in the best interest of the CCMRC or the people it serves may be removed from membership. Some causes for removal include, but are not limited to:

1. Conviction of a felony or misdemeanor that is included in the disqualifying criteria of the CCMRC background check.
3. Falsification of records.
4. Willful and repeated failure to follow CCMRC guidelines.

Removal of individuals will be recommended by the individuals' direct supervisors and decided by the CCMRC Commander. The decision may be appealed to the CCMRC Coordinator through the standard grievance procedure. If removals are found to be warranted, offending individuals are ineligible for reinstatement.
CCMRC Structure

The CCMRC Coordinator is an employee of the Cuyahoga County Board of Health and is recognized by the Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC) as the point of contact for the CCMRC. The Coordinator provides guidance and oversight of the CCMRC.

Technical Advisors are subject matter experts (SMEs) with education and experience in disciplines pertinent to CCMRC operation. The Coordinator may solicit the assistance of technical advisors as needed.

The daily operation of the CCMRC will be conducted according to the principles and practices of the Incident Command System (ICS). Individuals will be appointed to the following leadership positions by the Coordinator: Commander, Deputy Commander, Liaison Officer, Public Information Officer, Safety Officer, Finance/Administration Section Chief, Logistics Section Chief, Operations Section Chief, Planning Section Chief, and Group/Unit Leaders. Members who are not appointed to a leadership position will be assigned to a group or unit according to interest and abilities. Position Descriptions appear in Appendix C.

Readiness Levels

CCMRC has an obligation to field the most effective volunteer force, so training and participation of members will be tracked for immediate identification of those individuals who are most ready to respond.

**Level 1: Trained/Active**

a. Clear background check  
b. Registered with the State of Ohio through Ohio Responds  
c. Completes initial and ongoing training  
d. Regular participation in meetings and operations  
e. Participation in at least one exercise using ICS per year

Level 1 volunteers will be activated first.

**Level 2: Trained/Inactive**

a. Clear background check  
b. Registered with the State of Ohio through Ohio Responds  
c. Completes initial and ongoing training  
d. Irregular participation in meetings and operations  
e. No participation in at least one exercise using ICS per year

Level 2 volunteers will be called when the number of available Level 1 volunteers does not meet demand. Just-in-Time training may be required.

**Level 3: Spontaneous Volunteers**

a. Not background checked  
b. Not registered with the State of Ohio through Ohio Responds  
c. Training not attempted or completed
Level 3 volunteers will be called when the number of available Level 1 and 2 volunteers does not meet demand. Depending on the urgency of the situation, background checks, Ohio Responds registration, and training may be required before participation can be permitted.

**ESAR-VHP Classification of Medical Volunteers**

In the wake of disasters and public health and medical emergencies, many of our nation’s health professionals are eager and willing to volunteer their services. And in these times of crisis, hospitals, clinics, and temporary shelters are dependent upon the services of health professional volunteers. However, on such short notice, taking advantage of volunteers’ time and capabilities presents a major challenge to hospital, public health, and emergency response officials.

The Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) is a federal program created to support states and territories in establishing standardized volunteer registration programs for disasters and public health and medical emergencies.

The program, administered on the state level, verifies health professionals’ identification and credentials so that they can respond more quickly when disaster strikes. By registering through ESAR-VHP, volunteers’ identities, licenses, credentials, accreditations, and hospital privileges are all verified in advance, saving valuable time in emergency situations.

CCMRC medical volunteers will be classified according to ESAR-VHP levels as follows:

**ESAR-VHP Credential Level 1**

Level 1 was created to ensure that an adequate supply of hospital qualified health professionals is available to work in hospitals in times of an emergency. Hospital qualified health professionals are distinguished from other health professionals by the rigorous and constant review of credentials and performance that they are subject to. Standards for assignment to Credential Level 1 were developed in consultation with the hospital industry and reflect the level of review hospitals would require before accepting a volunteer into their facility. Assignment to Level 1 requires confirmation that the volunteer is actively employed in a hospital or has hospital privileges. Implicit in this requirement is the ability to practice in a full and unrestricted manner within the State and meets other occupational specific qualifications.

**ESAR-VHP Credential Level 2**

Level 2 ensures the availability of highly qualified individuals who may deliver services in a wide variety of settings such as clinics, nursing homes, and shelters. Typically, these health professionals possess all the credentials and qualifications of a level one health professional except that they are not employed in a hospital or have hospital privileges. Assignment to Level 2 requires confirmation that the volunteer is clinically active in any setting other than a hospital (e.g., clinic, private practice, nursing home, etc.). Implicit in this requirement is the ability to practice in a full and unrestricted manner within the State and meets other occupational specific qualifications.
ESAR-VHP Credential Level 3

Level 3 classifies individuals who meet the basic qualifications necessary to practice in the State in which they are registered. Assignment to Level 3 usually requires verification of a volunteer’s license or sometimes certification. In situations where the State does not govern a profession, other requirements have been identified that are deemed to be usual and customary for employment in the profession, which must also be verified.

ESAR-VHP Credential Level 4

Level 4 classifies individuals who have healthcare experience or education in an area that would be useful in providing basic healthcare not controlled by scope of practice laws and to assist clinicians. Assignment to Level 4 requires that the volunteer possess verified documentation of healthcare education or experience. This level may include, but is not limited to, healthcare students or retired healthcare professionals who no longer hold a license.

Activation Codes

Members will be identified by a two-digit code. The first number represents their readiness level (see "Readiness Levels"). The second digit represents their ESAR-VHP credentialing level (see "ESAR-VHP Classification of Health/Medical Volunteers"). The number zero (0) is not an ESAR-VHP designation but will be used by CCMRC to identify individuals without a health/medical credential. For example, a trained/active volunteer without a health/medical credential will be a 10. A trained/inactive volunteer with a medical credential who works at a hospital will be a 21. Activation codes will change with members' circumstances.

This system will enable planners to quickly sort the database for individuals with the skills, training, and experience required for specific circumstances and will also assist in statistical analysis of membership.

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<td>0</td>
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<td>Trained/Inactive</td>
<td>1</td>
<td>Works in a hospital</td>
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<td>3</td>
<td>Spontaneous Volunteer</td>
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<td>Works in a clinical setting</td>
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<td>3</td>
<td>Credentialed/Not in a clinical setting</td>
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<td>4</td>
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Training

The Office of the U.S. Surgeon General has developed Core Competencies that represent the baseline level of knowledge and skills that all MRC volunteers should have, regardless of their roles within their MRC unit. There are three domains within the competencies: (1) Health, Safety, & Personal Preparedness; (2) Roles & Responsibilities of Individual Volunteers; and (3) Public Health Activities and Incident Management. Within each domain are specific knowledge and attitude objectives to support the competencies, as well as suggested training courses and tools. Training for CCMRC will be based on these and other competencies and will meet or exceed the national standards. The Core Competencies are detailed in Appendix D. More information is available at [http://www.medicalreservecorps.gov/File/MRC TRAIN/Core Competency Resources/Core_Competencies_Matrix_April_2007.pdf](http://www.medicalreservecorps.gov/File/MRC TRAIN/Core Competency Resources/Core_Competencies_Matrix_April_2007.pdf).
Exercises

Exercises are designed to test emergency operations plans and capabilities. They give volunteers experience in using their knowledge, skills, and judgment in an environment that closely approximates the conditions they will work under during a response. The lessons learned during exercises are vital to an efficient and effective operation, so volunteers should participate in a variety of exercises.

CCMRC exercises will be based on the Homeland Security Exercise and Evaluation Program (HSEEP), which includes seminars, workshops, tabletops, games, drills, functional exercises, and full-scale exercises.

Identification (ID) Badges

Individuals who meet and maintain Level 1 and 2 readiness status will be issued a CCMRC identification badge. Criteria for using the badge are as follows:

1. Badges are to be used only for identification when members participate in CCMRC-authorized events. Any other use constitutes misuse.

2. The badges are valid only within Cuyahoga County unless an authorized party or agency declares a broader jurisdiction.

3. Members are responsible for their badges and at all times must guard them against theft, loss, alteration, or misuse.

4. Members must relinquish the badge to their immediate supervisor, the CCMRC Commander, or the CCMRC Coordinator upon demand, resignation, or removal.

Activation

The CCMRC Coordinator, in consultation with appropriate authorities, if necessary, will determine when volunteers should be activated. Under no circumstances should volunteers self-deploy, and volunteers may not represent themselves as members of the CCMRC except during authorized CCMRC activities.

E-mail is the current method for communicating with volunteers. Telephone calls will be made to volunteers without e-mail. Additional procedures are under consideration and will be announced when finalized.

When activated, volunteers will be told where and when to report and will also be informed of any special circumstances that need to be considered.

Material Resources

Members are responsible for re-usable supplies and equipment that are issued to them and must return them in good order at the time and to the place designated. Allowances will be made for normal wear.
**Injury or Illness**

To receive appropriate treatment and mitigate the potential for negative consequences, volunteers should report any injury or illness to their supervisor immediately. If the condition is life-threatening, 9-1-1 will be called and the volunteer will be transported to the nearest appropriate hospital. If the condition is not life-threatening, it will be treated on scene or the volunteer will be transported to the nearest appropriate facility. Choice of treatment will be based on the desires of the volunteer and the best judgment of the highest-ranking health/medical professional or first aider available.

In all cases – major or minor – treatment or no treatment – an *Injury/Illness Report Form* will be completed and forwarded to the CCMRC Coordinator or designee for follow up no later than the day on which the incident occurs. The *Report Form* can be delivered to the CCMRC Coordinator or designee by hand delivery, fax, or e-mail. If it is not possible to deliver a copy of the report on the day of the incident, the Leader of the Medical Unit or designee will telephone the report to the CCMRC Coordinator or designee on the day of the incident.

Completed report forms will be kept in a locked cabinet or in electronic files with passwords. Volunteers who are transported to a hospital for a life-threatening or major condition must present a release from a physician before they may return to service. Releases may be required for other conditions at the discretion of the CCMRC Coordinator or Commander.

**Photographs and Videos**

Photographs and video may be taken during training classes, exercises, and other events involving the CCMRC for documentation, exhibits, promotion, recruiting, and/or training. Photographs and videos may be used in printed and/or electronic media, such as newsletters, newspapers, websites, and other publications that may be kept in files and released to the public. CCMRC personnel will not be compensated for the appearance of their images in these photographs and videos. If CCMRC personnel do not wish to appear in these photographs and videos, it is their obligation to remove themselves from the vicinity where these photographs and videos are being produced.

**Grievance Procedure**

CCMRC members should follow these guidelines when they have a complaint about a person or situation during their participation in CCMRC activities.

1. Resolve the issue at the level of occurrence. Discuss the situation with the individuals involved to reach a mutually beneficial solution.

2. If the issues remain unresolved at the level of occurrence, individuals should report the issue to the next highest person in the chain of command (unit leader, section chief, or commander) for mediation. Notification must be in writing within 48 hours of the occurrence and should include a statement of the issue; date, time, and place of occurrence; involved parties; names and statements of witnesses; and resolution steps taken.
3. If the issues remain unresolved at the Commander level, the Commander will forward documentation described in #2 above to the CCMRC Coordinator.

4. The CCMRC Coordinator will resolve the issue through review of the documentation, discussion with involved parties, and/or discussion with technical advisors. The decision of the Coordinator will be final.

Confidentiality and HIPAA

Members may encounter sensitive medical or non-medical information about the people they serve. This information is protected by law and/or out of respect for the individual. CCMRC members must refrain from repeating personal and medical information that is given to them or that they see or overhear unless they are delivering the information to a person who is authorized to receive it. Volunteers must also refrain from seeking or viewing information that does not pertain to their work assignments. Documents containing personal information must be kept in a secured location and should not be left unattended until secured.

The CCMRC is seeking clarification on whether the CCMRC is a covered entity under the Health Insurance Portability and Accountability Act (HIPAA). In any case, HIPAA regulations will be used as CCMRC guidance.

Equal Opportunity

The CCMRC does not discriminate on the basis of race, religion, gender, national origin, ethnicity, age, physical or mental disability, political affiliation, sexual orientation, ancestry, marital status, medical condition, or other non-merit factors. Volunteers have equal access to available positions and are limited only by their licensure/certification, if applicable to the position, and their ability to perform the position responsibilities efficiently and effectively.

Sexual Harassment

Sexual harassment by any CCMRC participant during any CCMRC event is prohibited. Sexual harassment includes, but is not limited to, unwelcome sexual advances, request for sexual favors, slurs, jokes, and other verbal, visual or physical conduct of a sexual or demeaning nature. In addition to being responsible for their own conduct, individuals in leadership positions must ensure that individuals under their supervision contribute to an environment that is free of sexual harassment. Any individual who believes sexual harassment has occurred must report it immediately to the CCMRC Coordinator.

Attire and Grooming

Volunteers are representatives of the CCMRC and need to present a positive image to the public. Public image plays an important role in developing and maintaining trust and support. CCMRC volunteers are expected to maintain a standard of attire and grooming that is consistent with the professional nature of our work and the demands of the work environment. Clothing and accessories should be chosen with safety as a priority. Volunteers who are inappropriately dressed may be asked to change or cover offending items.
Examples of **inappropriate** attire include, but are not limited to:

- Open-toe, open-back shoes
- Jewelry or other accessories that have sharp edges or may dangle dangerously
- Fragrances that may cause allergic reactions in others
- Graphics that espouse political causes or that may be offensive to those we serve
- Bare midriffs, halter tops, spaghetti straps, tube tops, low-cut tops, beachwear
- Shorts, tattered or frayed jeans, low-slung pants

**Language**

Communication skills are important in any people-centered endeavor. CCMRC members should use standard English that is culturally sensitive and politically correct while avoiding language that could be interpreted as offensive.

**Smoking**

Smoking or chewing tobacco products is contrary to the health and medical values of the CCMRC and is not permitted on Cuyahoga County Board of Health property or while on duty or in view of the public at CCBH or CCMRC-sanctioned events.

**Weapons**

Individuals are not permitted to carry weapons, including but not limited to, guns, knives, and clubs, when acting as CERT members. Instruments, such as pocket knives, that are designed to be used as tools, are permitted. This policy may be modified by the Incident Commander or Unified Command of a specific operation if and when deemed necessary for reasons of safety and security.
Appendix A

Registration Forms

Membership Registration

Interview Questions
## Membership Registration

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail</td>
<td></td>
</tr>
<tr>
<td>Cell Phone</td>
<td>Home Phone</td>
</tr>
<tr>
<td>Address (St, City, Zip)</td>
<td></td>
</tr>
<tr>
<td>County of Residence</td>
<td>Gender M / F</td>
</tr>
<tr>
<td>Accommodations Needed</td>
<td></td>
</tr>
</tbody>
</table>

| Emergency Contact | |  
| Relationship | |  
| Phone | |  
| E-mail | |  
| Address | |  

### Skills – Please check all that apply.

- **Caregiving**
  - Animal Care
  - Child Care/Babysitting
  - Home Health Aide
  - Elder Care

- **Human Resources**
  - Coordinator/Organizer
  - Staffing
  - Supervisor

- **Legal**
  - Attorney
  - Notary Public
  - Paralegal

- **Medical**
  - Dentist
  - First Responder/EMT (Circle)
  - Medical Assistant
  - Nurse (Type)________
  - Paramedic
  - Pharmacist
  - Physician (Type)________
  - Physician Assistant
  - Veterinarian
  - Veterinary Assistant/Technician

- **Construction**
  - Carpenter
  - Chainsaw Operator
  - Contractor/Builder
  - Electrician
  - Forklift Operator
  - HVAC
  - Plumber

- **Food Service**
  - Chef/Cook
  - Caterer
  - Restaurant Owner
  - Server
  - Vendor

- **Services**
  - Commercial Driver License
  - Furniture Moving
  - Inventorying/Warehousing
  - Loading/Shipping
  - Sorting/Packing

- **Other**
  - Bookkeeper/CPA
  - Computer Specialist
  - Educator
  - Emergency Manager
  - Graphic Artist/Sign-maker
  - Psychologist
  - Public Health/Sanitarian
  - Social Worker
  - Technical Writer

- **Languages**
  - American Sign Language
  - English
  - Spanish

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April 2013
Health/Medical Credentials

<table>
<thead>
<tr>
<th>License/Certification</th>
<th>Issuing Agency</th>
<th>State</th>
<th>Expiration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ESAR-VHP Credential Level (Health/Medical Professionals Only)

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Clinically active in a hospital as an employee or by having hospital privileges</td>
</tr>
<tr>
<td>2</td>
<td>Clinically active in another setting, such as a clinic, nursing home, or shelter</td>
</tr>
<tr>
<td>3</td>
<td>Currently licensed or certified in the State where registered</td>
</tr>
<tr>
<td>4</td>
<td>Verifiable health care education/experience without current credential (e.g., students, retired)</td>
</tr>
</tbody>
</table>

Membership Considerations

As a volunteer with the Cuyahoga County Medical Reserve Corps (CCMRC), I understand that:
1. I can withdraw from membership at any time, and my membership can be revoked at any time.
2. The risk of illness and injury exists as a result of my participation in CCMRC events. I understand and assume these risks and agree not to hold the CCMRC, Cuyahoga County Board of Health, or their agents, employees, or volunteers liable for any such illness or injury.
3. The cost of treatment for illness or injury as a direct result of or deriving from my participation in CCMRC events is my responsibility.
4. I am responsible for my behavior and any damage or loss that results from my behavior is my responsibility.
5. All material resources issued to me are the property of CCMRC/Cuyahoga County Board of Health, unless otherwise indicated, and I must return them at the designated time and place in reasonable condition.
6. The CCMRC/Cuyahoga County Board of Health are not responsible for damage to or loss of any personal property that I bring to and/or use at CCMRC events.
7. Photographs and/or videos may be produced during CCMRC events and will be the property of CCMRC/Cuyahoga County Board of Health. My permission is not required to use my image, and I will not be compensated for use of my image.
8. I will be instructed on how to register with Ohio Responds, which will provide me with liability protection from the State of Ohio under Ohio Revised Code 121.404..

Membership Requirements

As a volunteer with the Cuyahoga County Medical Reserve Corps (CCMRC), I agree to:
1. Be a resident of Cuyahoga County or employed/attending a college in Cuyahoga County.
2. Be at least 18 years old (see "Youth Participation").
3. Submit to a background check (see "Background Checks").
4. Submit to a license/certification verification, if a health/medical professional.
5. Designate an ESAR-VHP level, if a health/medical professional (see "ESAR-VHP Classification of Medical Volunteers").
6. Register with Ohio Responds (see "Ohio Responds") and provide documentation of most current training course completed (Appendix F).
7. Participate in emergency and non-emergency events.
8. Respond to CCMRC email messages as needed.
9. Update Ohio Responds volunteer profile annually.

I declare that I have read and understand the Membership Considerations, Membership Requirements, and Volunteer Handbook, and I would like to be a member of the Cuyahoga County Medical Reserve Corps (CCMRC). The information I have provided is true and complete to the best of my knowledge and belief.

Signature ___________________________ Date ________________

April 2013 16
Interview Questions

*Please use the back of the sheet, if necessary.*

Name _______________________________ Date __________________

1. Why did you choose MRC for your volunteer service?

2. What previous volunteer experience have you had?

3. What did you like about your previous volunteer experience?

4. What did you dislike about your previous volunteer experience?

5. What kind of work do you like to do?

6. What types of work would you like to avoid?

7. Would you rather work alone, with a partner, or in a group? Why?

8. What accommodations do you need?
Appendix B

Ohio Revised Code 5502.281
Ohio Administrative Code 120:40-1-01
(Liability Protection)

5502.281 Volunteer database; registration; privacy provisions; liability.

(A) The executive director of the emergency management agency, jointly with the director of health, shall do both of the following:

(1) Advise, assist, consult with, and cooperate with agencies and political subdivisions of this state to establish and maintain a statewide system for recruiting, registering, training, and deploying the types of volunteers reasonably necessary to respond to an emergency declared by the state or a political subdivision;

(2) Establish fees, procedures, standards, and requirements necessary for recruiting, registering, training, and deploying the volunteers as required under this section.

(B)(1) A registered volunteer’s status as a volunteer, and any information presented in summary, statistical, or aggregate form that does not identify an individual, is a public record pursuant to section 149.43 of the Revised Code.

(2) Information related to a registered volunteer’s specific and unique responsibilities, assignments, or deployment plans, including but not limited to training, preparedness, readiness, or organizational assignment, is a security record for purposes of section 149.433 of the Revised Code.

(3) Information related to a registered volunteer’s personal information, including but not limited to contact information, medical information, or information related to family members or dependents, is not a public record pursuant to section 149.43 of the Revised Code.

(C) A volunteer registered under this section is not liable in damages to any person or government entity in tort or other civil action, including an action upon a medical, dental, chiropractic, optometric, or other health-related claim or veterinary claim, for injury, death, or loss to person or property that may arise from an act or omission of that volunteer. This division applies to a registered volunteer while providing services within the scope of the volunteer’s responsibilities during an emergency declared by the state or political subdivision or in disaster-related exercises, testing, or other training activities, if the volunteer’s act or omission does not constitute willful or wanton misconduct.

(D) As used in this section:

(1) “Registered volunteer” means any individual registered as a volunteer pursuant to procedures established under this section and who serves without pay or other consideration, other than the reasonable reimbursement or allowance for expenses actually incurred or the provision of incidental benefits related to the volunteer’s service, such as meals, lodging, and child care.

(2) “Political subdivision” means a county, township, or municipal corporation in this state.

Added by 129th General Assembly File No. 95, SB 243, § 1, eff. 7/3/2012
Ohio Administrative Code 121:40-1-01 Registration of volunteers.

(A) The purpose of these rules is to prescribe procedures, standards, and requirements necessary for the Ohio community service council ("OCSC") to establish and maintain a system for recruiting, registering, training and deploying all types of volunteers.

(1) A “registered volunteer” will be eligible to assist local political subdivisions, state or federal officials during an emergency declared by the state or political subdivision of in disaster related exercises, testing, or other training activities.

(2) In accordance with the state emergency operations plan, the Ohio emergency management agency will notify OCSC of requests for registered volunteers and OCSC will identify those registered volunteers having the specific skills in the specific region requested.

(B) A volunteer must apply for “registered volunteer” status with the OCSC in one of the following three prescribed manners:

(1) Online registration
   (a) A volunteer may apply for registered volunteer status by completing an online application found on the OCSC web site.
   (b) The online application requires the completion of an OCSC approved training course and the submission and subsequent verification of the volunteer’s credentials by the OCSC.
   (c) The volunteer shall also complete a self-attestation form.

(2) Written application
   (a) A volunteer may apply for registered status by completing a written application provided by the OCSC.
   (b) The written application requires the completion of an OCSC approved training course and the submission and subsequent verification of the volunteer’s credentials by the OCSC.
   (c) The volunteer shall also complete a self-attestation form.

(3) Onsite in-person application
   (a) A volunteer may apply for registered volunteer status by completing an application at a location identified by the OCSC.
   (b) The application requires the completion of an OCSC approved, onsite training course and the submission and subsequent verification of the volunteer’s credentials by the OCSC.
   (c) The volunteer shall also complete a self-attestation form from and by the OCSC.

(C) Criteria for volunteers.
(1) A volunteer shall be no less than eighteen years of age on the day of the volunteer’s application.

(2) A volunteer must satisfactorily complete an OCSC approved training course prior to being registered.

(a) Training will be valid for three years.

(b) Upon completion of the third year as a registered volunteer, a registered volunteer shall satisfactorily complete an updated or refresher OCSC approved training course.

(c) This training shall be completed between the third and fourth year after a volunteer attains registered status.

(3) A comprehensive listing of all approved training courses will be maintained on the OCSC web site and only by those courses approved by the OCSC shall qualify as approved trainings.

(4) By completing all required criteria, and upon verification by OCSC of an applicant’s credentials and identity, an applicant becomes a “registered volunteer” in the OCSC database.

(5) At the discretion of the OCSC, a registered volunteer may be required to submit to a comprehensive background check administered by the Ohio bureau of criminal investigation and identification or designated investigative agency.

(D) Conditions for placement in inactive status from database.

(1) If registered volunteer status is based on the retention of a professional license/certificate, such registered volunteer shall be inactivated from the database when the professional license/certificate expires or is suspended or revoked.

(2) A registered volunteer shall be inactivated from the database if registered status was obtained through false or deceitful information in the application process or during required training.

(3) A registered volunteer shall be inactivated from the database if the registered volunteer demonstrates conduct inconsistent with that of a registered volunteer. Such conduct shall be construed by the OCSC and may include any conduct deemed detrimental to the goals and mission of OCSC’s registered volunteers program.

(4) A registered volunteer shall be inactivated from the database if the registered volunteer received consistently unsatisfactory performance evaluations and is deemed unsuitable for future deployment by OCSC.

(5) A registered volunteer shall be inactivated if the registered volunteer fails to complete an updated or refresher OCSC approved training.
Effective: 04/21/2008 Promulgated Under: 119.03 R.C. 119.032 review dates: 04/10/2013
Statutory Authority: 121.404 Rule Amplifies: 121.40
Appendix C
Organizational Chart

CCMRC Coordinator

Technical Advisors       CCMRC Commander

Deputy Commander

Public Information Officer       Liaison Officer

Safety Officer       Asst Liaison Officers

Finance/Admin Section Chief       Logistics Section Chief       Operations Section Chief       Planning Section Chief

Unit Leaders       Unit Leaders       Group Supervisors       Unit Leaders

Unit Members       Unit Members       Group Members       Unit Members
Appendix D

Position Descriptions

Note: The following descriptions are not intended to be an exhaustive list of duties. Duties may be added or deleted as deemed appropriate by the CCMRC Coordinator.

CCMRC Coordinator

- Be the official point of contact for the CCMRC.
- Update the CCMRC profile on the national website.
- Approve the Strategic Plan.
- Approve the Standard Operating Guidelines.
- Approve the Volunteer Handbook.
- Approve the operating budget.
- Approve expenditures and use of material resources.
- Seek funding.
- Appoint the Commander and approve individuals for other leadership positions.
- Establish training standards.
- Advise and direct courses of action.
- Supervise individuals in leadership positions.
- Monitor operations for safety; prevent and stop unsafe actions.
- Override inappropriate actions of members.
- Select and consult technical advisors as necessary.
- Document activities according to Standard Operating Guidelines.

CCMRC Commander

- Report to the Coordinator.
- Collaborate with the Coordinator in formulating Strategic Plans.
- Collaborate with the Coordinator in formulating Standard Operating Guidelines.
- Recommend individuals for leadership positions.
- Assume the duties of all vacant positions.
- Conduct meetings of the general membership.
- Conduct meetings of the Command and General Staff.
- Oversee daily operations.
- Monitor operations for safety; prevent, stop, and report unsafe actions.
- Attend or direct a representative to attend meetings with collaborating agencies.
- Recommend training.
- Recommend changes to guidance documents.
- Document activities according to Standard Operating Guidelines.

CCMRC Deputy Commander

- Report to the Commander.
- Attend meetings of the general membership.
- Attend meetings of the Command and General Staff.
- Monitor operations for safety; prevent, stop, and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Assist the Commander.
Assume the Commander's duties when the Commander is absent or incapacitated.

Document activities according to Standard Operating Guidelines.

**Liaison Officer**

- Report to the Commander.
- Attend meetings of the general membership.
- Attend meetings of the Command Staff and General Staff as requested.
- Monitor operations for safety; prevent and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Represent CCMRC at meetings and other events when requested.
- Seek opportunities to collaborate with other organizations.
- Organize, supervise, and support Assistant Liaisons.
- Document activities according to Standard Operating Guidelines.

**Assistant Liaison Officers**

- Report to the Liaison Officer.
- Attend meetings of the general membership.
- Attend meetings called by the Liaison Officer.
- Monitor operations for safety and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Represent CCMRC at meetings and other events when requested by the Liaison Officer.
- Be the CCMRC point of contact for your assigned organization.
- Promote the CCMRC within your assigned organization.
- Seek and notify the Liaison Officer of collaborative opportunities.
- Document activities according to Standard Operating Guidelines.

**Public Information Officer**

- Report to the Commander.
- Attend meetings of the general membership.
- Attend meetings of the Command Staff and General Staff as requested.
- Monitor operations for safety; prevent and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Create a media kit.
- Identify media outlets.
- Construct and disseminate CCMRC messages.
- Ensure consistency of CCMRC messages with messages of collaborating organizations.
- Contribute to a CCMRC website.
- Document activities according to Standard Operating Guidelines.

**Safety Officer**

- Report to the Commander.
- Attend meetings of the general membership.
- Attend meetings of the Command Staff and General Staff as requested.
- Recommend training.
- Recommend changes to guidance documents.
• Conduct job hazard analyses.
• Create health and safety plans.
• Advise on safety and security-related issues.
• Monitor operations for safety; prevent, stop, and report unsafe actions.
• Recommend training.
• Recommend changes to guidance documents.
• Document activities according to Standard Operating Guidelines.

Finance/Administration Section Chief

• Report to the Commander.
• Attend meetings of the general membership.
• Attend meetings of the General Staff.
• Conduct meetings of the Section.
• Monitor operations for safety; prevent and report unsafe actions.
• Recommend training.
• Recommend changes to guidance documents.
• Recommend individuals for leadership positions within the Section.
• Keep accurate and complete records on time and cost of operations.
• Monitor expenditures.
• Identify need for vendor agreements.
• Ensure that illness and/or injury to personnel is properly documented.
• Document activities according to Standard Operating Guidelines.

Logistics Section Chief

• Report to the Commander.
• Attend meetings of the general membership.
• Attend meetings of the General Staff.
• Conduct meetings of the Section.
• Monitor operations for safety; prevent and report unsafe actions.
• Recommend training.
• Recommend changes to guidance documents.
• Recommend individuals for leadership positions within the Section.
• Advise on supplies, equipment, and facility needs.
• Procure supplies, equipment, and facilities and make available as needed.
• Maintain an inventory of supplies, equipment, and facilities.
• Document activities according to Standard Operating Guidelines.

Operations Section Chief

• Report to the Commander.
• Attend meetings of the general membership.
• Attend meetings of the General Staff.
• Conduct meetings of the Section.
• Monitor operations for safety; prevent and report unsafe actions.
• Recommend training.
• Recommend changes to guidance documents.
• Recommend individuals for leadership positions within the Section.
• Plan and direct tactical operations.
• Request human and material resources.
• Document activities according to Standard Operating Guidelines.
Planning Section Chief

- Report to the Commander.
- Attend meetings of the general membership.
- Attend meetings of the General Staff.
- Conduct meetings of the Section.
- Monitor operations for safety; prevent and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Recommend individuals for leadership positions within the Section.
- Monitor operations and predict needs.
- Establish data collection and reporting systems.
- Maintain CCMRC documentation.
- Document activities according to Standard Operating Guidelines.

Group/Unit Leader

- Report to the Section Chief.
- Attend meetings of the general membership.
- Attend meetings of the Section.
- Monitor operations for safety; prevent and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Communicate with group/unit members.
- Guide, supervise, and support members in carrying out duties to meet objectives.
- Document activities according to Standard Operating Guidelines.

Group/Unit Member

- Report to the Group/Unit Leader.
- Attend meetings of the general membership.
- Attend meetings of the group/unit.
- Maintain contact with the group/unit leader.
- Carry out assigned duties.
- Monitor operations for safety; prevent and report unsafe actions.
- Recommend training.
- Recommend changes to guidance documents.
- Document activities according to Standard Operating Guidelines.
Appendix E

Core Competencies

Domain #1: Health, Safety, & Personal Preparedness

Competency #1: Describe the procedures and steps necessary for the MRC member to protect health, safety, and overall well being of themselves, their families, the team, and the community.

Objective #1: Identify the key components of a personal and family preparedness plan.

Objective #2: Identify and recognize the potential barriers to executing the plans and identify contingencies.

Objective #3: Identify key components of a variety of preparedness kits (e.g., home kit, go-kit, work kit).

Objective #4: Identify key components to keeping one’s self, family, team, and community safe from environmental and incident hazards and risks.

Objective #5: Prepare a personal and family preparedness plan.

Objective #6: Review preparedness plans with family, neighbors, and friends.

Objective #7: Set up occasions to implement the drill and measure its efficacy or need for revision.

Objective #8: Utilize recognized methods of protection (e.g., hand washing, hygiene, cough etiquette, masks, and other personal protective measures).

Objective #9: Embrace and promote the value of personal, family, and work life preparedness.

Competency #2: Describe the impact of an event on the mental health of the MRC member and their family, team, and others.

Objective #1: Identify the range of anticipated stress reactions experienced by disaster survivors, MRC members, responders, and others in the aftermath of disaster.

Objective #2: Identify when, how, and where to refer disaster survivors, MRC team members, and others for additional mental health support and care.

Objective #3: Identify the basic elements of Psychological First Aid and the key ways to provide emotional care and comfort to disaster
survivors, MRC Members, and others in the early aftermath of disaster.

Objective #4: Provide psychological first aid to disaster survivors, MRC team members, and others.

Objective #5: Acknowledge that disasters and other public health emergencies are stressful events.

Objective #6: Acknowledge that MRC members are in a unique role to provide emotional care and comfort to disaster survivors, MRC team members and others.

Objective #7: Embrace the concept that providing emotional care and comfort in the early aftermath of disaster may mitigate short and long-term psychological consequences in disaster survivors, MRC team members, and others.

Domain #2: Roles and Responsibilities of Individual Volunteers

Competency #1: Describe the MRC member’s communication role(s) and processes with response partners, media, general public, and others.

Objective #1: Understand the role of the Public Information Officer (PIO) or other authorized agent.

Objective #2: Understand an individual MRC member’s role and responsibilities in communicating with response partners, media, general public, and others.

Objective #3: Understand legislative requirements related to the sharing of protected information (e.g., HIPAA, personal information, etc.)

Objective #4: Perform your roles and responsibilities in the position you are assigned.

Objective #5: Communicate effectively with response partners, media, general public, and others.

Objective #6: Respect privacy and confidentiality.

Objective #7: Promote consistent and approved messaging.

Objective #8: Embrace high ethical standards.

Competency #2: Demonstrate the MRC member’s ability to follow procedures for assignment, activation, reporting, and deactivation.

Objective #1: Describe the local MRC’s guidelines or procedures for assignment, activation, reporting, and deactivation.

Objective #2: Participate in a drill, exercise, or public health activity.
Objective #3: Embrace the mission of the MRC.
Objective #4: Honor a sense of duty.
Objective #5: Develop a commitment to personal accountability.

Competency #3: Identify limits to own skills, knowledge, and abilities as they pertain to MRC role(s).

Objective #1: Identify the physical and emotional challenges for various types of duties, assignments, and activities.
Objective #2: Identify personal and professional liability.
Objective #3: Identify gaps in own knowledge base and training needs.
Objective #4: Engage in a self-assessment.
Objective #5: Communicate limitations when appropriate or necessary.
Objective #6: Have realistic expectations.
Objective #7: Accept one's limitations.
Objective #8: Accept responsibility for personal or professional growth and development.

Domain #3: Public Health Activities and Incident Management

Competency #1: Describe the chain of command (e.g., Emergency Management System, Incident Command System, National Incident Management System), the integration of the MRC, and its application to a given incident.

Objective #1: Understand NIMS and NIMS compliance.
Objective #2: Understand the role of the MRC in the Incident Command System (ICS).
Objective #3: Understand how ICS is interdisciplinary and organizationally variable.
Objective #4: Identify the five ICS management functions.
Objective #5: Understand the principle of span of control.
Objective #6: Identify the roles and responsibilities of key ICS positions.
Objective #7: Identify the key facilities and locations described in ICS.
Objective #8: Operate within the structure of the Incident Command System.
Objective #9: Notify the chain of command when safety action is necessary.

Objective #10: Respect the command structure by relinquishing personal authority to operational authority.

Competency #2: Describe the role of the local MRC unit in public health and/or emergency response and its application to a given incident.

Objective #1: Understand your community’s public health system and the role of the MRC in local public health activities.

Objective #2: Understand the public health role of the MRC in emergency response.

Objective #3: Understand who has the authority to activate and authorize the local MRC unit.

Objective #4: Perform your roles and responsibilities in your MRC as they integrate within the public health or emergency response system.

Objective #5: Respect your role within your unit’s operation.
Appendix F

Training Checklist and Course Descriptions

The CCMRC Training Checklist and Course Descriptions represent the current recommended training for CCMRC volunteers. Additional courses will be added as needs are identified.

☐ IS-22 Are You Ready? An In-depth Guide to Citizen Preparedness
Prerequisites: None
Online and Classroom – Federal Emergency Management Agency (FEMA)
http://training.fema.gov/EMIWeb/IS/is22.asp
Classroom Approximately 4 hours
Online length varies by individual.

This course will help the citizens of this nation learn how to protect themselves and their families against all types of hazards. It can be used as a reference source or as a step-by-step manual. The focus of the content is on how to develop, practice, and maintain emergency plans that reflect what must be done before, during, and after a disaster to protect people and their property. Also included is information on how to assemble a disaster supplies kit that contains food, water, and other supplies in sufficient quantity for individuals and their families to survive.

At the end of this course, you will be able to (1) Get informed about hazards and emergencies that may affect you and your family; (2) Develop an emergency plan; (3) Collect and assemble a disaster supplies kit; (4) Learn where to seek shelter from all types of hazards; (5) Identify the community warning systems and evacuation routes; (6) Include in your plan required information from community and school plans (7) Learn what to do for specific hazards; and (8) Practice and maintain your plan.

☐ Fundamentals of Emergency Management
Prerequisites: None
Classroom (Based on IS-230.b)
Course length to be determined

This course introduces you to the fundamentals of emergency management (EM) as an integrated system, and how its resources and capabilities can be networked together for all hazards.

At the end of the course, you will be able to (1) Explain the all-hazard emergency management process that integrates all levels of government, voluntary, and business assets; (2) Explain the roles of government, individuals, and families in emergency management; (3) Explain what individuals and families can do to protect themselves in emergencies; (4) Describe the elements of an emergency management program; (5) Discuss the roles of individuals and organizations, as well as their relationship with one another, in emergency management; (6) Explain the importance of networking in emergency management; (7) Explain the social, political, and economic implications of a disaster; (8) Describe alternate models for organizing emergency management programs.
- **IS-700 National Incident Management System An Introduction**
  Prerequisites: None
  Online and Classroom – Federal Emergency Management Agency (FEMA)
  http://training.fema.gov/EMIWeb/IS/is700a.asp
  Approximately 3 hours

  This course introduces and overviews the National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private sector, and non-governmental organizations to work together during domestic incidents.

  At the end of this course, participants will be able to (1) Describe the intent of NIMS; (2) Describe the key concepts and principles underlying NIMS; (3) Describe the purpose of the NIMS Components including: Preparedness, Communications and Information Management, Resource Management, and Command and Management; and (4) Describe the purpose of the National Integration Center.

- **IS-100 Introduction to the Incident Command System**
  Prerequisites: IS-700 Recommended
  Online and Classroom – Federal Emergency Management Agency (FEMA)
  http://training.fema.gov/EMIWeb/IS/IS100b.asp
  Approximately 3 hours

  ICS 100, Introduction to the Incident Command System, introduces the Incident Command System (ICS) and provides the foundation for higher level ICS training. This course describes the history, features and principles, and organizational structure of the Incident Command System. It also explains the relationship between ICS and the National Incident Management System (NIMS).

  At the end of this course, participants will be able to (1) Demonstrate basic knowledge of ICS; and (2) Be prepared to coordinate with response partners from all levels of government and the private sector. You will be familiar with ICS applications, organizational principles and elements, positions and responsibilities, facilities and functions, and planning.

- **Psychological First Aid**
  Prerequisites: None
  Online – National Child Traumatic Stress Network (NCTSN)
  http://learn.nctsn.org/course/category.php?id=11
  Approximately 6 hours

  PFA online includes a 6-hour interactive course that puts the participant in the role of a provider in a post-disaster scene. This professionally-narrated course is for individuals new to disaster response, who want to learn the core goals of PFA, as well as for seasoned practitioners who want a review. It features innovative activities, video demonstrations, and mentor tips from the nation’s trauma experts and survivors.

- **American Red Cross Disaster Services Overview**
Volunteer Handbook

Prerequisites: None
Classroom
Approximately 3.5 hours

This course will provide information about ways participants can help their community prevent, prepare for, and respond to emergencies and disasters. Participants also learn about volunteer opportunities at their local Red Cross chapter.

At the end of this course, participants will be able to (1) Explain how disasters affect people and communities; (2) Describe how the community, including the American Red Cross, works together in disaster preparedness and response; (3) Describe the services the Red Cross provides to people affected by disaster and the principles that guide Red Cross workers in disaster relief situations; (4) Identify resources for personal preparedness; and (5) Determine how to help their community prepare and respond to disasters.

American Red Cross Shelter Operations
Prerequisite: Disaster Services Overview
Classroom

This course will prepare volunteers of the Red Cross and other agencies to manage shelter operations effectively and sensitively as a team while meeting the needs of people displaced as a result of a disaster.

At the end of this course, participants will be able to (1) Describe the procedures for opening, operating and closing shelters; (2) Explain ways to demonstrate quality service; (3) Organize available human resources as a shelter operations team; (4) Identify resources available to assist shelter workers; and (5) Organize the physical facility and material resources to meet the needs of the people in the shelter.

American Red Cross Shelter Simulation
Prerequisite: Shelter Operations
Classroom
No Test – Certificate Issued

This course will provide participants with an opportunity to apply the knowledge, skills, and abilities required to operate a successful shelter.

At the end of the course, participants will be able to (1) Demonstrate shelter opening, operating and closing procedures; (2) Identify and use available resources to assist shelter workers; (3) Work as a team to provide quality shelter services to clients; and (4) Address common shelter problems effectively.

Food Safety Training
Prerequisites: None
Classroom – Cuyahoga County Board of Health
Approximately 1.5 hours

This course will provide participants with the information they need to handle food safely from purchase to service. It highlights special needs clients and food preparation under emergency conditions.
At the end of the course, participants will be able to (1) Wash their hands effectively and maintain hygienic conditions in food service areas; (2) Cook, cool, and reheat food at safe temperatures; (3) Handle food safely under emergency conditions; (4) Prepare and deliver food outdoors; and (5) Avoid common food allergens.

- **Heartsaver Bloodborne Pathogens**  
  Prerequisites: None  
  Classroom – American Heart Association

  This course will teach the participants how to protect themselves and others from being exposed to blood or blood-containing materials.

  At the end of this course, participants will know (1) how to reduce the chance of exposure to bloodborne pathogens; and (2) what to do if you are exposed to bloodborne pathogens.

- **Heartsaver AED or Healthcare Provider**  
  Prerequisites: None  
  Classroom – American Heart Association  
  Approximately 3.75 hours

  These courses will provide participants with the knowledge and skills necessary to give first aid to adults, children, and infants who have suffered cardiac arrest or breathing emergencies.

  At the end of the course, participants will be able to (1) determine scene safety; (2) assess victims to determine the first aid actions that are appropriate; (2) use a breathing barrier; (3) perform chest compressions and rescue breaths (CPR); (4) use an automated external defibrillator; and (5) relieve choking.

- **Heartsaver First Aid**  
  Prerequisites: None  
  Classroom – American Heart Association  
  Approximately 3.25 hours

  This course will provide the participants with the knowledge and skills necessary to give care to someone with an illness or injury until trained help arrives and takes over.

  At the end of this course, participants will be able to (1) explain what first aid is; (2) explain the contents of a first aid kit; (3) tell how to stay safe when giving first aid; (4) tell how to keep the victim from further injury; (5) show how to put on and take off protective gloves; (6) tell how to phone for help; (7) assess a victim to determine the first aid actions that are appropriate; (8) list the signs and first aid actions for breathing problems; bad allergic reactions; heart attack; fainting; diabetes and low blood sugar; stroke, seizures, shock, external and internal bleeding; head, neck, and spine injuries; bone, joint, and muscle injuries; burns and electrocution; bites and stings; and heat and cold-related emergencies.

*Remember to update your profile on Ohio Responds to include your latest training. One approved training course every three years is required to remain on the Registry and maintain liability protection.*  
Websites and Contacts

Medical Reserve Corps

National .................................................. http://www.medicalreservecorps.gov/HomePage
Ohio ............................................................ http://ohioresponds.gov/omrc.stm
Cuyahoga County ......................... http://www.ccbh.net/emergency-preparedness

Citizen Corps

National .......................................................... http://citizencorps.gov/
Ohio (Ohio Responds) .............................................. http://ohioresponds.gov/

Emergency Management Agencies

Federal ............................................................... http://www.fema.gov/
Ohio ................................................................. http://ema.ohio.gov/

Training

FEMA Independent Study Program ......................... http://www.training.fema.gov/IS/
MRC Train .......................................................... https://www.mrc.train.org/

Cuyahoga County MRC Coordinator

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