Volunteer Handbook
Welcome MRC Volunteers!

Dear Medical Reserve Corps Volunteer,

On behalf of the Central District Health Medical Reserve Corps, Welcome, and thank you for your willingness to serve your community! The Medical Reserve Corps (MRC) coordinates the skills of volunteers who are willing to assist the public health district during emergency situations and public health initiatives. Our goal is to recruit, train, prepare, and organize volunteers to help safeguard our community. Please share information about the MRC with your friends, families, and business associates.

This Handbook has been created to give you pertinent information that will maximize your MRC volunteer experience. When we activate our Volunteer Management Plan, our volunteers will know how to protect themselves, their families, and their community.

We understand that most people have busy schedules; therefore, the MRC has been designed to be flexible and allow for those other commitments you may have. The level of commitment that you want to provide is entirely up to you.

One of the services we offer to our volunteers is the opportunity to take additional training as their schedule permits. Training opportunities can be accessed online. In case of an emergency, Just-In-Time (JITT) training will be provided at the emergency site and will be event-oriented so that you will be prepared and ready to assist during that emergency.

You have joined an exciting and vital organization; you will get as much out of this experience as you desire. The MRC offers you a variety of opportunities to serve your community throughout the year but there is no pressure on you if you have other commitments.

Please feel free to contact me anytime if you have questions, suggestions, or comments. Once again, welcome to the Central District Health Medical Reserve Corps!

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Section A: Program Overview

National Medical Reserve Corps Overview

A medical reserve corps (MRC) unit is a community-based group of trained medical and non-medical volunteers intended to supplement existing community medical and emergency response systems. It is part of a national organization called the Citizen Corps and administered by the Public Health Service.

President Bush created the USA Freedom Corps in response to the outpouring of support in the days following the terrorist events September 11, 2001. The president asked all Americans to volunteer 4,000 hours of their time –about two years- to serving others.

The MRC is one way that citizens can volunteer to strengthen both their communities and their nation. Locally based MRC units can assist during large-scale emergencies, such as an influenza epidemic, chemical spills, natural disasters, or acts of terrorism. MRC volunteers also work to improve the overall health and well-being of their neighborhoods and communities.

Local officials are developing their own MRC units because local officials know best what their individual communities need.

Working together, we are strengthening our communities and, in turn, strengthening our nation.

Organizational Structure of USA Freedom Corps
Central District Health Medical Reserve Corps Overview

The State of Idaho has seven MRC Units housed within the seven Public Health Districts (PHD). PHD’s MRC Units are supported by the Idaho Department of Health and Welfare (IDHW) Public Health Preparedness and Response Program through subgrants which enable units to recruit, retain, and deploy volunteers during a public health emergency. MRC Unit Coordinators meet on a quarterly basis to network, problem solve, and discuss recent activities, best practices, and innovative approaches to improving the volunteer experience.

This local MRC is under the jurisdiction of the Central District Health (CDH) as a component of the Public Health Preparedness (PHP) Program.

CDH’s jurisdiction covers public health services in four counties:

- Ada County
- Valley County
- Elmore County
- Boise County

The CDH MRC Unit consists of volunteers from all walks of life and are not limited to medical personnel. Volunteers are onboarded as non-medical or medical volunteers and can sign up for Deployment Teams. Deployment Teams are groups of volunteers who are trained in specific skillsets to respond in a specific capacity. Examples of past activities include but are not limited to:

- Mass Fatality Management
- Mass prophylaxis
- Mass medical care
- Communicable disease control
- Vector control
- Health needs of special populations
- Targeted public awareness campaigns
- Medical Sheltering
- Emergency Operations Call Center
- Vaccination Clinics
- Health Education
- Training & Exercises
- Date Entry
- Other health district activities

Core Competencies

The CDH MRC strives to meet several core competencies to ensure volunteers can perform their volunteer responsibilities during response efforts. These competencies represent a baseline level of knowledge and skills that all MRC volunteers should have, regardless of their role within the MRC unit. Each competency should be understood at a basic level, with the recognition that more information and skill can be gained with additional training and experience. The core competencies are:

- Personal & Family Preparedness
- Safe Behaviors
• Volunteer Roles  
• Communicate Effectively  
• Surge Capacity Responses  
• Clinical Management  
• Situational Awareness  

• Public Health for All Populations  
• Ethical Principles  
• Legal Principles  
• Recovery Considerations

The Learning Paths and Training Plans are available to assist volunteers in meeting training requirements of the above core competencies.
Section B: Central District Health MRC Strategic Plan

Mission
To engage volunteers through active training and skills development programs to strengthen public health readiness, response, and recovery in the event of an emergency.

Vision
An active and dedicated network of Medical Reserve Corp volunteers who have the skills and abilities to assist the community with medical and non-medical needs in areas of disease prevention, improvement of health, public health preparedness, and emergency response at home and in our communities.

Core Values
Community: Honor the community-based nature of the MRC and recognize its spirit of volunteerism.
Action: Seek opportunities to develop meaningful initiatives that support community medical and public health volunteerism and service.
Resourcefulness: Maximize the potential to learn, and leverage relationships and assets to the fullest extent.
Teamwork: Embrace collaboration and work collectively to achieve the mission. Diversity: Accept and respect the cultural diversity of all.

Goals & Objectives
- Foster a culture of acceptance, recognition of the value of volunteers, and utilization of volunteer staffing within the south-central Idaho area.
- Develop and maintain a framework to match volunteers’ skills with the community’s needs.
- Provide opportunities for volunteers to assist with non-emergency public health functions/initiatives, such as health education, vaccination clinics, and public awareness campaigns
- Recruit, enroll, and maintain a corps of medical and non-medical volunteers sufficient to staff mass vaccination/mass prophylaxis sites in south central Idaho.
- Deliver comprehensive training opportunities to volunteers through simulation exercises, classroom training and access to online education resources.
- Create a framework of support that will sustain the MRC into the future.
Section C: Administration

The MRC Coordinator is responsible for MRC administrative management, including but not limited to:

- Development & delivery of a quarterly newsletter.
- Preparing and submitting reports to grant agencies & funding partners.
- Volunteer recruitment & retention.
- Volunteer assignments.
- Verification of volunteer credentials/licensure.
- Maintaining MRC records.
- Volunteer orientation and issuance of volunteer credentials.
- Organization of meetings and preparation of related documentation.
- Development and delivery of training curricula to the MRC volunteers.
- Routine communications with volunteers.

The MRC Unit Coordinator will continually seek training opportunities for volunteers and:

- Hold quarterly trainings designed to provide volunteers with a broad overview of various aspects of the MRC program, or to address potential issues specific to MRC activation.
- Conduct exercises, which simulate MRC activation.
- Provide training for real life situations that offer an opportunity for hands-on experience.
- Share resources that can provide opportunities within the public domain of community involvement.

Data Management

MRC volunteer information is maintained on [https://www.volunteeridaho.com/](https://www.volunteeridaho.com/). Information includes essential data such as address, phone, e-mail, licensure information, completed trainings, as well as data that contributes to efficient management of the MRC program (credentialing information, volunteer interests, volunteer's level of involvement, etc.). The MRC Volunteer and the MRC Coordinator are responsible for ensuring that volunteer information in the databases remains current.

Communication

The MRC Coordinator uses the Volunteer Idaho system to communicate via email with volunteers about upcoming volunteer opportunities, as well as any other unit announcements. However, upon deployment, the Event/Incident Point-of-Contact may use alternate methods such as phone calls or texts. Volunteers should keep their most up-to-date contact information in the system to receive notifications.

Volunteer Liability

MRC members, while unpaid, are allowed the same liability protections as paid employees.

Fiscal Support

Fiscal Support for this unit stems from federal level grants such as National Association of County and City Health Organizations (NACCHO), Administration for Strategic Preparedness and Response (ASPR), and the Centers for Disease Control (CDC).
**Dismissal**

CDH accepts the service of all MRC volunteers with the understanding that such service is at the sole discretion of the MRC Coordinator and must be in the best interest of the MRC, CDH, and the community. MRC volunteers agree that the MRC Coordinator may, at any time and without cause, terminate the volunteer’s relationship with the MRC. Inversely, the MRC volunteer may, at any time sever his/her relationship with the MRC. Notice of such a decision should be communicated to the MRC Coordinator as soon as possible. The volunteer, upon termination, shall return identification badges; deployment bags and other MRC issued equipment to the MRC Coordinator.
**Section D: Volunteer Expectations**

Member requirements for volunteers include:

- Be at least 12 years of age (volunteers less than 18 years old must have a guardian release)
- Maintain a current mailing address and phone number in [https://www.volunteeridaho.com/](https://www.volunteeridaho.com/)
- Maintain an active email account
- Attend an MRC Orientation
- Submit a Client Confidentiality and Release of Records Form
- Attend meetings, training sessions, exercises, and real events as requested and when available

The MRC Coordinator will keep volunteers informed of upcoming activities, volunteer opportunities, and pertinent program information.

**Code of Conduct**

The CDH MRC has a high standard of conduct that is expected by both the organization and the public we serve. This Code of Conduct is established to maintain high ethical and moral standards of members, respect and esprit de corps. It is required that all members of the Medical Reserve Corps conduct themselves within the guidelines of this code.

Medical Reserve Corps members will:

- Always conduct themselves in a professional manner. When identifiable as an MRC member the member will be attentive to clients, staff, other volunteers, and the general public so as to present a positive image of the Central District Health and the Medical Reserve Corps.
- Refrain from the use of tobacco products and illegal substances in all instances and will remain free of any substance that could influence judgment while working as a volunteer.
- Observe the Federal HIPAA Law to hold confidential any information that may be disclosed to them in confidence during their membership in the Medical Reserve Corps. Volunteers are expected to sign and submit a completed Client Confidentiality and Release of Records Form.
- Consider themselves a holder of the public trust including declining any offer of financial gain for themselves, their relatives, or entity in which they have a significant interest or affiliation.
- Dress properly for any MRC activity. Clothing and footwear should be appropriate for the functions performed.
- Arrive on time to the event registration. In the event the member is unable to arrive for or complete an assignment, they will notify the MRC contact as soon as possible.
- Show respect to all people.
- Wait for official notification prior to deploying.
- Work within the scope of their licensure and not exceed their skill level. Be willing to accept a variety of assignments.
- Report all incidents that result in injury to a person or damage for which the district may be responsible.
- Upon leaving the MRC, return all district issued identification, response bag or any other issued or loaned property.
• Be held accountable for any deviation from the accepted code of conduct, which could result in dismissal from the MRC.

Volunteer Participation
After completing the volunteer member requirements, volunteers decide their level of participation in the MRC. Participation can range from being very limited – emergencies only – to being very involved with extensive training, participating in drills, non-emergency volunteer opportunities, and assisting with the coordination of the MRC. The participation level can change at any time. It is dictated only by the volunteer's interest and time they are willing to give. All volunteers, regardless of participation, are vital to the success of the MRC.

Volunteers seeking participation can choose to participate with an MRC Deployment Team. These teams support CDH in specific capacities during a response. Volunteers who sign up for a team may have additional screening and training requirements, all of which are provided prior to a team activation. Please refer to the Deployment Team Section of this Handbook for more information. Another way for volunteers to increase participation is to use the Volunteer Training Plan to follow any Learning Paths that they are interested in. Any time used to complete trainings may be counted as volunteer hours and should be uploaded into Volunteer Idaho.


Section E: MRC Activation

When volunteer opportunities or emergencies arise, the MRC Coordinator will notify volunteers via e-mail within the “Volunteer Idaho” notification system, or by text and phone call for Deployment Team Activations. Notification will include a description of the volunteer need, the dates and times of the need, what volunteers will be requested to do, and contact information for coordinating with CDH staff.

What to bring upon activation:

- Government issued picture ID (driver’s license, passport) and/or MRC Badge
- Registration card/license/certification issued from appropriate licensing agency

Because of limited security, all volunteers are urged not to bring purses, wallets, money, or other valuables to the site. However, be prepared with medications that may be needed. Appropriate clothing and closed-toe shoes are mandatory. Members presenting with inappropriate clothing, flip-flops, opened toed shoes, and slippers, etc., will not be deployed. Medical personnel may wish to bring their personal items, however, the volunteer assumes the risk of loss or damage to any personal possessions brought to the site. Please refer to the Checklist for Volunteer Activation for a full list of recommended items.

MRC Volunteers without Licensure Verification Cards

There may be circumstances under which MRC volunteers do not have their licensure card in their immediate possession. If the current licensure has been verified by the MRC, the volunteer will be accepted for service. If this has not been completed and current licensure cannot be confirmed, the volunteer may not be allowed to perform medical services at the incident.

Training

MRC volunteers should follow the Volunteer Training Plan to increase deployment readiness, since volunteers may be activated to assist with CDH functions that are outside the scope of normal day-to-day operations.

At the deployment site, MRC volunteers will receive what is commonly referred to as “Just in Time Training” or “JITT”. This training is specially designed to provide the most current information about the event, and to prepare volunteers to fulfill their assignment in a defined job function. If at any time, the volunteer is assigned a job function that they feel they are not trained to perform, cannot perform because of physical limitations or any other reason they should advise their assigned supervisor or the MRC Coordinator at the site and request reassignment.

MRC volunteers should not attempt to perform a job function that is outside of their personal comfort level or their level of training.
Outside-of-Area Deployment of Volunteers
Some MRC volunteers may opt to be deployable to areas outside of CDH’s jurisdiction. During large disasters/emergencies (hurricanes, floods, earthquakes, wildfires, pandemics or outbreaks, etc.) a determination may be made that volunteers need to be brought in from other areas to assist in response and recovery. Notification of a need for volunteers will generally come from the State MRC Coordinator or National MRC office (for out-of-state emergencies) or from a governmental entity within the State of Idaho (for in-state emergencies).

Spontaneous Volunteers
People presenting at an emergency with a desire to volunteer will be processed through the Volunteer Idaho registration system [https://www.volunteeridaho.com/](https://www.volunteeridaho.com/). Depending on the incident, the ability of MRC staff to verify credentials and backgrounds of spontaneous volunteers may be limited and can impact approval for immediate membership.

Demobilization
Demobilization of volunteers will occur in accordance with the volunteer opportunity announcement during non-emergency activations or with the incident action plan for emergency activations.

Volunteers will complete an exit screening which will include documentation of any injuries or illnesses acquired during the response, mental and behavioral health needs, and when requested a referral to medical and mental/behavioral health services. Volunteers are required to check out of an event prior to leaving.

Emergency Deployment Demobilization Procedures
Emergency deployments utilizing MRC Volunteers require increased demobilization procedures due to the nature of events that volunteers may be subjected to. Emergency deployments are defined as a deployment stemming from a natural disaster, emergent incident, or activation of an Emergency Operations Center (EOC). In these instances, the direct supervisor of these deployed volunteers from the requesting agency/program inherits the immediate demobilization responsibility of MRC volunteers. During the demobilization of MRC volunteers from an emergency deployment, the direct supervisor will conduct an exit interview. This exit interview will establish strengths and areas of improvement stemming from the incident, resources available to the volunteer following deployment, provide the volunteer with the phone number and email address of the MRC Volunteer Coordinator, and establish any long-term care needed for the volunteer. The MRC Coordinator will distribute the exit interview questionnaire for direct supervisors to follow.

The MRC Coordinator will be responsible for the long-term care and management of MRC Volunteers who were deployed during an emergency event. These responsibilities will include:

- Conducting follow-up calls to volunteers. These calls will be conducted one month post demobilization to ensure the well-being of the volunteers and provide volunteers with any needed resources.
- Implementing any necessary corrective actions found in the areas of improvement following a deployment, unless stated otherwise.
- Alert volunteers to any changes in services available to them following a deployment.
Non-Emergency Deployment Demobilization Procedures

For non-emergency deployments, the MRC Coordinator will take full responsibility during demobilization. The MRC Coordinator will send the non-emergency Post Deployment Survey to the demobilizing volunteer(s), which will include feedback on:

- The volunteers experience
- What went well
- Areas of improvement
- Any additional feedback the volunteer feels is necessary.

This survey will be distributed within a week of the volunteer’s event ending.
MRC Deployment Teams

CDH utilizes deployment teams to support a response. This section gives a quick overview of the teams that have been developed. Volunteers who sign up must complete any additional screening and training requirements outlined in the Volunteer Training Plan. Interested volunteers should use the link (here). Alternatively, volunteers should contact the MRC Unit Coordinator.

District Distribution Center (DDC)

The District Distribution Center (DDC) Team will support CDH during a DDC Activation. The DDC is a designated facility that supports the distribution of medical supplies and equipment as provided from the Strategic National Stockpile (SNS) or other sources. Its primary purpose is to receive SNS assets, manage inventory, and stage SNS assets for further re-distribution.

Skills that are easily transferrable onto this team include but not limited to:
- Logistics knowledge (warehouse, inventory management, supply chain management)
- Industry knowledge
- Planning
- Attention to detail
- Accountability

General roles and responsibilities of individuals on the DDC Deployment Team include:
- Providing updated contact information to be listed on the team
- Completing DDC Training (2 hrs) and DDC Safety Training (30 min)
- Participating in DDC exercises (annually)
- Lifting boxes/packages
- Using forklifts
- Tracking inventory using software systems

The ideal candidate will be available to work 6–12-hour shifts during a DDC Activation, be computer literate, have organizational and planning skills, and be a team player. DDC Activations are in-person and would be local to Treasure Valley, Idaho.

Emergency Call Center (ECC)

The Emergency Call Center (ECC) Team will support CDH during an ECC Activation. The ECC comprises trained individuals that inform and guide callers to the best resource available that will address their question and/or concern. Reasons for an ECC Activation include: CDH receiving an influx of calls due to a public health emergency or event, CDH supporting external partners during a large-scale incident (i.e. mass fatality, mass casualty) by filtering questions through the ECC.

Skills that are easily transferrable onto this team include but not limited to:
- Communication skills – bilingual speakers are encouraged to join
- Conflict management skills
- Computer skills
- Organizational skills
- Adaptability
- Positive attitude
- Active listening
General roles and responsibilities of individuals on the ECC Deployment Team include:

- Using a script to answer incoming questions
- Directing public to resources as applicable to the situation
- Maintaining a log of frequently asked questions
- Referring unusual questions/situations to the ECC Supervisor

The ideal candidate will be available to work 4-8-hour shifts during an ECC Activation, be computer literate, have organizational and planning skills, and be a team player. ECC Activations are in-person and would be local to Boise, ID.

Epidemiology Support Deployment Team

The Epidemiology Support Deployment Team, or Epidemiology (Epi) Support Team, will support the health district in preparing for and responding to potential emerging infectious disease (EID) and other communicable disease outbreaks. This team will offer training support for health district staff to conduct disease investigations and patient interviews. In addition, they’ll receive cross training to be able to conduct disease investigations for EIDs. Potential infectious diseases may include, but are not limited to, newly emerged viruses like a novel influenza or the emergency of vaccine-preventable diseases such as polio, measles, etc.

Skills that are easily transferrable onto this team include but not limited to:

- Medical terminology knowledge
- Motivational interviewing
- Health Education experience
- Good imagination or minimal acting skills to conduct mock interviews
- Communication skills
- Speaking multiple languages
- Computer skills and/or data entry skills
- Organizational skills
- Adaptability
- Positive attitude
- Active listening

General roles and responsibilities of individuals on the Epi Support Deployment Team include:

- Participating in epidemiology preparedness training and exercise activities
- Using a standardized interview process to collect information from patients
- Providing infection prevention education to patients and close contacts
- Direct public to resources as applicable to the situation
- Refer unusual questions/situations to the Epi Support Team Supervisor or designated point of contact (POC)

The ideal candidate will be available to work a 4-hour shift during a Epi Support Team activation, and be available for pre-planned preparedness activities whose durations may vary. Team activations and trainings are in-person and would be local to Boise, ID.

Family & Clinical Services (FCS)

Family and Clinical Services (FCS) Deployment Team will support CDH during district clinical events, primarily the annual clinics CDH assists with (i.e., flu vaccine clinics and dental hygiene clinics). The purpose of this team is to standardize any screening requirements when supporting Central District Health’s FCS
Division, including prioritizing background checks.

**Skills** that are easily transferrable onto this team include but not limited to:

- Medical licensing that allows for non-supervised vaccination administration
- Administration skills
- Organizational skills
- Communication skills

General **roles and responsibilities** of individuals on the FCS Deployment Team include:

- Providing updated contact information to be listed on the team
- Completing required trainings as defined by the FCS Division
- Completing a background check (funded by the district)
- Administering vaccinations
- Assisting with medical screening
- Assisting with patient paperwork
- Walking students to/from a clinic
- Providing administrative support as needed

The ideal candidate will be available to work a 4–8-hour shifts during a FCS Clinical event, have organizational and planning skills, and be a team player. FCS Activations are in-person and will be within the health district jurisdiction (Ada, Boise, Elmore, and Valley County).

**Point of Distribution (POD)**

The Point of Distribution (POD) Deployment Team will support CDH during a POD Activation. A POD is a designated location that distributes resources like medication and vaccinations to the public. Its primary purpose is to help control disease by preventing people from getting sick. The POD Deployment Team is vital for getting life-saving medication to the public as quickly as possible.

**Skills** that are easily transferrable onto this team include but not limited to:

- Medical licensing that allows for non-supervised vaccination administration
- Med management
- Healthcare administration knowledge
- Clinical management knowledge
- Administration skills
- Organizational skills

General **roles and responsibilities** of individuals on the POD Deployment Team include:

- Completing POD training
- Participating in POD exercises
- Administering vaccinations/distributing medication
- Escorting patients to/from the POD site
- Registering new patients
- Assisting with paperwork
- Setting up/breaking down the POD

The ideal candidate will be available to work a 8-12 hour shifts during a POD Activation, be computer literate, have organizational and planning skills, and be a team player. POD Activations are in-person and
would be within the health district jurisdiction (Ada, Boise, Elmore, and Valley County).
Checklist for Volunteer Activation

In the event you are contacted by the MRC Coordinator to respond, the following checklist should be reviewed prior to reporting for service. This a suggested list of actions and items that may benefit you before an activation. Volunteers should use their discretion for individual and family preparedness.

Family:
☐ Notify appropriate family members of your activation.
☐ Implement your personal Family Preparedness Plan.
☐ Ensure your pets are being cared for.

Employer:
☐ Advise your employer that you have been contacted for activation and request approval for time off to volunteer.

Items to Bring (may change depending on the incident):

Identification/Licensure
☐ Badging - CDH/ MRC
☐ License—Copies Only
☐ Drivers license
☐ Medical licensure

Communications
☐ Cell phone and chargers

PPE (optional)
☐ Goggles/face shield
☐ Latex Gloves

Food
☐ Water bottles
☐ Finger foods (granola bars, canned fruit, etc.)

Personal hygiene products
☐ Baby wipes or face cloths
☐ Hand Sanitizer
☐ Blood Pressure Cuff & Stethoscope (optional)

General
☐ Flashlight/batteries (optional)
☐ Whistle

Personal Items
☐ Prescription medications
☐ Insect repellant
☐ Comb/brush
☐ Change of clothing
☐ Change of shoes
☐ Toothbrush/ paste/dental floss

Proof of immunization
☐ Hepatitis B series
☐ Tetanus/diphtheria
☐ Rubella Titer
☐ Hepatitis A recommended