

Peninsula
VIRGINIA



PENINSULA Medical Reserve Corps Policies

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DECLARATION OF INTEREST IN MEDICAL RESERVE CORPS

WHEREAS, the health and welfare of the citizens of the Commonwealth of Virginia are of the utmost importance to the Department of Health;

WHEREAS, promptly and properly responding to emergencies and disasters will likely require aid from volunteers,

WHEREAS, Virginia's Medical Reserve Corps consists of volunteers many of whom are of practicing, or retired, health care professionals who desire to assist with health emergencies and disasters; and

WHEREAS, Governor Warner has declared that "Virginia is leading the way for the building of local volunteer response programs, such as the Medical Reserve Corps, that will help make communities and neighborhoods stronger, safer and more secure."

RESOLVED, Virginia's Medical Reserve Corps and other volunteer health care activities will provide communities with volunteers who can assist local health professionals during large-scale local emergencies. This Corps will consist of practicing and retired health care professionals and others who volunteer to be on a medical reserve list. Volunteers will assist the Virginia Department of Health and health care professionals during emergencies and disasters.

RESOLVED, the Department of Health has a strong interest in the establishment and success of Medical Reserve Corps. In furtherance of this interest, the Department of Health shall establish best practices and guidelines to be followed by those Medical Reserve Corps under the supervision and control of the Department of Health.

Adopted by the State Board of Health on 7/22/2005

www.vdh.virginia.gov

1.) Introduction

A. Vision:

To build a cadre of competent and confident volunteers.

B. Mission:

The PENINSULA Medical Reserve Corps engages active and approved volunteers that will augment and assist community operations during emergencies, aid in the response to public health care needs, and improve community resiliency.

C. Purpose:

The purpose of these policies is to provide overall guidance and direction to VDH staff and Medical Reserve Corps volunteers engaged in volunteer involvement and management efforts. These policies are intended for internal management and guidance only, and do not constitute, either implicitly or explicitly, a binding contractual or personal agreement. The Medical Reserve Corps reserve the exclusive right to change any of these policies at any time and to expect, adherence to the changed policy. Areas not specifically covered by these policies shall be determined by the MRC Program Director.

D. Scope:

Unless specifically stated, these policies apply to all MRC volunteers in all projects undertaken on behalf of VDH, and the PENINSULA Medical Reserve Corps.

2.) Administration

A. Organization

The PENINSULA MRC is an emergency response and support organization. Therefore, to ensure it's compatibility with state, local and federal response processes, the PENINSULA MRC Unit shall be organized into operational and administrative components. The PENINSULA Medical Reserve Corps Unit is an asset that resides under the direct supervision of the Peninsula, and Hampton Health Departments.

B. Executive Committee:

The PENINSULA MRC Executive Committee shall consist of the following (at a minimum):

1. Executive Chairperson
2. Health Directors from each district
3. Emergency Planners from each district

C. Emergency Management Advisory Committee

The PENINSULA MRC Emergency Management Advisory Committee shall consist of: Emergency Managers or emergency management representatives from each jurisdiction covered by the PENINSULA MRC unit

1. Hospital representatives

D. Volunteer Liaisons

The PENINSULA MRC Volunteer shall consist of but is not limited to the following liaison positions:

1. Shelter - Medical Special Needs
2. Shelter - Pet Welfare Leaders
3. Pet Welfare
4. Volunteer Reception Center
5. Mass Fatality
6. Family Assistance Center
7. Hospital Surge Capacity
8. Point of Dispensing Site
9. Keep the Lights On Local Health Dept. – at risk programs
10. Education/Training
11. Recruitment
12. Special Events/Recognition/Celebrations
13. Special Projects
14. Marketing
15. Technical
16. Administration

E. Roles

1. Role of the Executive Committee

The role of the Executive Committee is to provide organization and oversight to the MRC. The Executive Committee will also be responsible for overseeing the financial budget, reviewing and revising policies/procedures and communication of disciplinary actions. The Executive Committee ensures MRC operations are compliant with appropriate laws and regulations, including applicable grant requirements. The Executive Committee shall meet annually or as needed.

2. Role of the Chairperson of the Executive Committee

The Chairperson shall preside at all meetings of the Executive Committee and be responsible for preserving order and decorum, and submit recommendations and information as he or she may consider proper concerning the business, affairs and policies of the MRC.

3. Role of the Emergency Management Advisory Committee

The role of the Emergency Management Advisory Committee is to provide guidance to the MRC on how to respond to emergencies. The Emergency Management Advisory Committee provides advice and input to the Executive Committee and Coordinator about local situations, community support, and matching resources to operational needs. The Emergency Management Advisory Committee shall discuss opportunities for the MRC to be involved in emergency management when medical volunteers are needed. The Health Director responsible for the area of the meeting location shall preside over the Emergency Management as needed meetings among the two health districts.

4. Role of the Citizen Corps Councils

If available the PENINSULA MRC may request and be granted funding from local citizen corps councils. The Citizen Corps Councils and the PENINSULA MRC may

collaborate on special projects and volunteer training. In turn Citizen Corps Councils representing the cities or counties of the PENINSULA MRC may provide input to the MRC Coordinator about the MRC unit activities. The MRC Coordinator, or a MRC appointed representative, shall attend the Council meetings to represent the PENINSULA MRC.

5. Role of the Volunteer Liaison Committee

The role of the Volunteer Liaison Committee is to coordinate volunteer activities, provide updates on special projects, and assist the Coordinator in preparing for emergency drills and training. Members of the Liaison Committee should take an active role in recruiting volunteers and promoting the MRC program. Liaison responsibilities will vary based on the current unit needs. The MRC Coordinator shall determine the responsibilities of each liaison.

6. Role of the MRC Director

The role of the MRC Program Director is to be the central point of contact for the national MRC program office, and Virginia AmeriCorps or VISTA programs. The MRC Program Director provides advisory information to the MRC and Executive Committee. The MRC Program Director delegates duties to the MRC Coordinator and Assistant Coordinator. The MRC Program Director performs other duties as required. The Peninsula Emergency Planner acts as the MRC Director. The Director will act as the site supervisor.

7. Role of the MRC Coordinator

The role of the MRC Coordinator is to provide a central point of contact for volunteer and program management within the unit. The Coordinator serves as the overall manager and spokesperson for the PENINSULA MRC. The Coordinator acts as the representative for the PENINSULA MRC unit to advise community partners and committees on progress and concerns of the unit. The Coordinator delegates duties to the Assistant Coordinator and MRC volunteers and performs other duties as required.

8. Role of the MRC Assistant Coordinator

The role of the Assistant Coordinator is to provide support to the Coordinator in recruiting, managing, and training volunteers. The duties of the Assistant will be directed by the Coordinator and/or MRC Director.

F. Definition of MRC Volunteers

A "MRC volunteer" is anyone who without compensation or expectation of compensation performs a task at the direction of and on behalf of the MRC unit. A "MRC volunteer" must be officially accepted and enrolled by the organization prior to performance of any task. Unless specifically stated, MRC volunteers shall not be considered as 'employees' of the Commonwealth of Virginia.

G. Relationship of Volunteers to the Unit

VDH accepts the service of all MRC volunteers with the understanding that such service is at the sole discretion of the agency. MRC volunteers agree that VDH may at any time, for whatever reason, decide to terminate the MRC volunteer's relationship with the agency.

The MRC volunteer may at any time, for whatever reason, decide to sever the volunteer's relationship with the MRC. Notice of such a decision should be communicated as soon as possible to volunteer's event supervisor, MRC Volunteer Coordinator, or Assistant Coordinator.

MRC volunteers wishing to serve multiple volunteer organizations, such as CERT or Red Cross, etc., must indicate on application which organization they will be primarily affiliated with and will first respond to in times of an emergency.

H. Volunteer Rights and Responsibilities

MRC volunteers are viewed as a valuable resource to this organization, VDH, its staff, and clients. MRC volunteers shall be extended the right to be given meaningful assignments, the right to be treated as equal associates, the right to effective supervision, the right to full involvement and participation, and the right to recognition for work completed. In return, MRC volunteers shall agree to actively perform their duties to the best of their abilities and to remain loyal to the goals and procedures of the Medical Reserve Corps.

3.) Volunteer Responsibilities

Volunteers expect, and enjoy, certain rights when they donate their time. Volunteers, however, also have specific responsibilities to the Medical Reserve Corps. As a volunteer you will be free (outside of emergencies) to set your own work schedule and you must be prepared to fulfill the commitments you make.

1. You must be dependable, reliable, and businesslike, and abide by the policies of the Corps.
2. Dress appropriately for the setting and the task at hand and as directed in deployment orders.
3. Carry out duties in a safe and responsible way.
4. Maintain the confidentiality of information revealed to you regarding clients and associates.
5. Keep track of the hours you work on the official form provided or via email to Coordinator.
6. You must be non-discriminatory in serving all people regardless of race, gender, age, religion, sexual orientation, or disability.
7. Work within the guidelines of your job action sheet and accept supervision.
8. Offer feedback and suggestions.
9. Be prepared for any regularly scheduled meetings.

10. You must represent the PENINSULA Medical Reserve Corps appropriately in the community.
11. You must always be honest, respectful, and responsible.

I. Code of Conduct

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

No volunteer shall:

1. Authorize the use of or use for the benefit or advantage of any person, the name, emblem, endorsement, services, or property of the Medical Reserve Corps.
2. Accept or seek on behalf of himself or any other person, any financial advantage or gain of other than nominal value which may be offered as a result of the volunteer's affiliation with the Medical Reserve Corps.
3. Publicly utilize any Medical Reserve Corps affiliation in connection with the promotion of partisan politics, religious matters, or positions on any issue not in conformity with the official positions of the Citizen Corps Council.
4. Not disclose of any confidential Medical Reserve Corps (MRC) information that is available solely as a result of the volunteer's affiliation with the MRC to any person not authorized to receive such information, or use to the disadvantage of the Medical Reserve Corps any such confidential information, without the express authorization of the MRC.
5. Knowingly take any action or make any statement intended to influence the conduct of the Medical Reserve Corps in such a way as to confer any financial benefit on any person, corporation, or entity in which the individual has a significant interest or affiliation.
6. Operate or act in any manner that is contrary to the best interests of the Medical Reserve Corps.
7. In the event that the volunteer's obligation to operate in the best interests of the Medical Reserve Corps conflicts with the interests of any organization in which the individual has a financial interest of an affiliation, the individual shall disclose such conflict to the Medical Reserve Corps Director upon becoming aware of it, shall absent himself or herself from the room during deliberations on the matter, and shall refrain from participating in any decisions.
8. If a volunteer is found in violation of the above, or falsifies or misrepresents required information or documentation, the Peninsula Medical Reserve Corps reserves the right to immediately terminate the volunteer from the program at will.

J. Maintenance of records

A system of records will be maintained on each volunteer with the Medical Reserve Corps, including dates of service, positions held, duties performed, and training completed, copy of current licensure/certifications, evaluation of work, and awards received. MRC Volunteers and appropriate staff shall be responsible for submitting all appropriate records and information to the Volunteer Coordinator in a prompt

and accurate fashion. MRC Volunteer personnel records shall be accorded the same confidentiality as staff personnel records.

Records for the PENINSULA MRC shall be maintained at the Health District Headquarters located at 416 J. Clyde Morris Blvd, Newport News, Virginia or in the Virginia Volunteer Health System. A volunteer, with proper identification may request a report of the contents of their record at any time.

K. Contact Information

All contact information must be kept up-to-date. *Volunteers are required*, as a part of their volunteer responsibilities, to keep their contact information up to date, or to notify the MRC Coordinator of any changes in phone numbers, address, e-mail address. Keeping information updated is most critical for emergency response.

L. Safety

The reduction of personal injury and equipment damage in the workplace is essential to an efficient operation. Be aware of safety issues at all times. Report any hazards to the MRC Coordinator. Report any injury immediately to the Incident Commander or your supervisor. The PENINSULA MRC unit is not able to provide Worker's Compensation coverage at this time.

M. Conflict of Interest

No person who has a conflict of interest with any activity or program of the agency, whether personal, philosophical, or financial shall be accepted or serve as a volunteer with the agency.

L. Supervision and Evaluation

1. Requirement of a Supervisor

Each MRC volunteer who is accepted into the MRC program will have a clearly identified supervisor who is responsible for direct management of that volunteer and may be identified as the MRC Coordinator, Assistant Coordinator, MRC Program Director, or a site supervisor. This individual shall be responsible for management and guidance of the work of the volunteer, and shall be available to the volunteer for consultation and assistance. Additional staff or supervisory personnel can be added as membership or programs increases in order to maintain a proper span-of-control.

2. Volunteer/Staff Relationship

Volunteers and staff are considered to be partners in implementing the mission and programs of the PENINSULA MRC, with each having an equal but complementary role to play. It is essential for the proper operation of this relationship that each partner understands and respects the needs and abilities of the other.

4.) Recruitment, Selection and Placement

A. Recruitment

Volunteers may be recruited by way of Hospitals, clinics, local health businesses, Department of Health Professions, Schools, and the like. Volunteers shall be recruited,

selected and placed without regard to race, color, religion, sex, national origin, age, disability, veteran status or other non-job related factors to comply with all federal and state nondiscrimination, equal opportunity action laws, orders, and regulations.

Recruitment efforts shall consist of flyers, newsletters, TV/radio, attendance at local functions such as health fairs, and the like.

B. Criteria

1. Any person 18 years of age or older is eligible for membership in the PENINSULA MRC. Persons younger shall need the authorization of the LHD Director.
2. Current medical licensure is not required for membership in order to serve in a non-medical capacity.
3. Certain positions in the MRC, however do require active medical licensure in order to provide health and medical services to the public.
4. Volunteers shall be required to have a background check free of any criminal charges to serve in any role. They may begin volunteer service before the completion of the required investigation when the District or Office Director determines in writing that an urgent need exists. (The VDH Background Investigation policy is available upon request.)

C. Volunteer Process

The following is the procedure for joining the PENINSULA Medical Reserve Corps:

Become a volunteer: Completion of Volunteer Registration application via VVHS at <http://www.vdh.virginia.gov/mrc/peninsulamrc> website.

- Phone screen/interview for each applicant within 10 business days of receipt of VVHS application
- Orientation – 2 hours, classroom or on-line
- ICS-100 – classroom or on-line
- ICS-700 – classroom or on-line
- Credentialing - Photo copies of:
 - ❖ Medical Professional license if applicable
 - ❖ CPR/AED and First Aid, required for Medical Professionals and anyone performing these duties.
 - ❖ Signature Page acknowledging Orientation, Policies, HIPAA, Liability, or on-line initialed acknowledgement
 - ❖ Notarized Official Background Investigation Form, and on-line acknowledgement at time of VVHS application
- Additional screening requirements, in addition to a background check, may be required as determined by the MRC Coordinator or LHD Director according to volunteer job requirements.
- A picture will be taken following Orientation training. An ID Badge will be provided once a successful background investigation is completed.

D. Placement

Volunteers shall be placed in a position with special attention paid to their interests, capabilities and/or medical training and suitability for the role they will perform.

- For those seeking placement on specialized teams, an interview shall be conducted by the MRC Coordinator or designee to determine fit.
- For those seeking liaison positions in the MRC, the addition of a personal interview with MRC Program Director, and additional training may also be required.

E. Performance

Volunteers shall be held to the same standards in performance as a VDH employee.

- Volunteers may be given an opportunity following activation (event, exercise, emergency response, etc.) to evaluate their experience.
- Volunteers may also be evaluated on their performance using a standardized performance tool.
- The Medical Reserve Corps reserves the right to re-position volunteers based on their performance and demonstrated skill set.

5.) Recognition

As grant budgetary funds permit, PENINSULA MRC Volunteers who have met and exceeded their position requirements will be recognized during a yearly volunteer meeting. Volunteer awards will be broken down into the following categories:

A. Leadership Award

The Leadership award will be presented to the volunteer who has gone above and beyond the call in the unit through training, exercises and actual responses (if applicable). This individual will have additional training in leadership, Incident Command, and Management above the requirements of their position. This individual will have exhibited a can-do attitude to any challenge or mission presented to them.

The Leadership award will be determined by the MRC Coordinator in collaboration with the MRC Assistant Coordinator and MRC Program Director.

NOTE: There may be multiple awardees of this accolade as the MRC expands its membership.

B. Volunteer of the Year Award

This award will be presented to the volunteer from the MRC unit who has the most hours of logged time for that year within the unit. This can be accomplished through training, exercises, responses, special projects, or any combination. Those in leadership positions are exempt from this award. The volunteer hours will be evaluated. There will be three awards issued under this category. 1st, 2nd, 3rd. These will be the MRC volunteers with the top three most accumulate hours logged with the unit for that year.

C. Other Awards

Volunteers may be nominated for miscellaneous awards such as Citizen Corps Council Super Star Awards.

6.) Credentialing and Licensure

Rigorous credentialing protocols are followed upon receiving a volunteer application through VVHS.

- Licensure will be verified through the Virginia Department of Health Professionals through a VVHS and DHP synchronization process, or online through the Virginia Department of Health Professionals.
- Volunteers, who are medical professionals and may be performing medical care, may be required to produce their current medical license which will be copied maintained in the volunteer's personnel file. The MRC Coordinator may print the copy directly from DHP website - <http://www.dhp.virginia.gov>; A volunteer performing medical duties must hold an active, unencumbered, unexpired license.
- CPR/AED/First Aid credentials will be verified by the MRC Coordinator or Assistant Coordinator and tracked in VVHS. It is the responsibility of the volunteer to provide updates to this credential as certification expires or is renewed.
- ESAR-VHP is assigned in accordance the volunteers DHP primary license and specified primary place of employment listed in VVHS.
- MRC Level is assigned in accordance to the VVHS Job Aid

Special programs credentialing shall be done in cooperation with the entity for which the volunteer will be participating such as MRC Hospital Emergency Response Team (H.E.R.T.). Certain program credentials that are held by the entity and required of the volunteer will be handled by the entity and communicated to the MRC.

State VDH Employee Screening Sensitivity Levels:

The VDH Background Investigation policies containing this detail can be provided upon request through the MRC Coordinator.

National HRSA Screening Sensitivity Levels: <http://www.hrsa.gov>

Adjusted VAMRC levels (based on job duties and position with MRC):

Please see the Virginia Volunteer Health System Job Aid – Appendix B

Background checks:

These are recommended for all volunteers as funding permits through VAMRC grants or other funding streams. If funding does not permit a formal background check, volunteers should be checked against the National Sex Offender Registry at a minimum.

However, for practical purposes the VDH recommends that volunteers in leadership, highly sensitive positions (MRC level 1) complete background investigation to include fingerprinting.

Reference checks:

References may be checked for volunteers serving in sensitive positions based on the VDH Background Investigation Policy.

Education checks:

These may be required to verify licensure, education or other necessary qualifications for specific positions.

Physical Ability checks:

National MRC guidelines state that volunteers should be in good health, should have documentation that includes the results of a physical exam, and an assessment of their safe activity level in order to ensure that they are assigned to duties matching their fitness

levels. Volunteers should have current immunizations such as Tetanus, TB, Hepatitis B, and TST. Volunteer medical information is not maintained in the MRC Unit.

Special Service Volunteers or SUVs

Depending on the situation, these volunteers may be subject to all of the above credentialing, depending on position and timing of event. Upon emergency declaration by the Governor of the Commonwealth of Virginia, state guidelines for emergency personnel shall be followed.

Special service or SUV volunteers will not be included in engagement or emergency opportunities unless the need for additional resources warrants their involvement. They will be filtered through a Volunteer Reception Center, MRC process for credentialing, training, and placement if needed.

7.) Training

Training is the gateway to serving with the Peninsula Medical Reserve Corps. Much time and effort goes in to hosting training, and sometimes instructors travel long distances to provide training, typically free of charge, and often pre-empting their own work or personal schedule.

- When you receive a training alert and you click on available, your name is added to the roster and the instructor is expecting you.
- It is your responsibility to mark your calendar; training reminders MAY NOT be provided.
- No show/no call for training is tracked in VVHS and subject to review and determination of removal from the Corps for continual offenders.

The Peninsula MRC receives all of its funding from grants. Grants are relied upon to support the operation of the entire MRC Unit, as well as specialized programs that help augment and support the health, preparedness, and resiliency of the Hampton and Peninsula communities. In 2012, grant consideration will no longer be given on total number of volunteers recorded in VVHS, but only on the number of volunteers who have completed the Peninsula MRC Orientation, background check, AND FEMA ICS-100, and are then considered deployable assets. Additionally, since VDH is a NIMS (National Incident Management System) compliant organization, training in FEMA ICS-700 is highly recommended.

Peninsula MRC Orientation - For new volunteers and for those who have never had the Orientation, classes may be offered; please watch email for a training alert and register. Orientation is also available on-line with a mandatory post-test review. Volunteers must still report to the Peninsula MRC Office to obtain a badge and complete a background investigation form following successful completion of Orientation.

ICS-100 <http://training.fema.gov/emiweb/is/is100b.asp>

ICS-700 <http://training.fema.gov/EMIWeb/is/is700a.asp>

Peninsula MRC does not have access to the FEMA database; to ensure proper credit for the course, please send the .pdf certificate(s) following the course test by email to the Peninsula MRC Office.

Core Competencies training is based on MRC National Recommendations. Please see the 'Training Matrix' tab in the Orientation Manual, visit the Peninsula MRC Website or TRAINVirginia <http://va.train.org> for most current training matrix.

Additional training will be required in order to be considered for specialized team placement.

First Aid & CPR is *strongly encouraged* for non-medical volunteers as a matter of personal preparedness and is *required* for medical volunteers in order to provide medical care (i.e. vaccinations).

A. Just-In-Time Training

It is impossible to train every person for every possible contingency due to time constraints and the amount of material needing to be covered. During certain types of emergencies it may be necessary to conduct just in time training to MRC volunteers. Just in time training contains information that is specific to the incident occurring, special considerations for dispensing medications or vaccines, job duties, etc.

B. Training Records:

All MRC volunteers are responsible for providing documentation of any training they take, required or additional. Training records are maintained by the MRC Coordinator in VVHS, or by the TRAINVirginia user if an account is available. MRC volunteers will be presented with an individual training record upon written request.

Any certificates or acknowledgement of training must be copied and promptly submitted to the MRC leadership for placement in the volunteer's file.

C. Non compliant volunteers:

Volunteers who do not comply with the Peninsula MRC requirements(orientation, ICS 100, & background investigation)are not considered deployable assets and are subject to review and removal from the Corps.

8.) Activation

Volunteers are utilized in emergency and non-emergency events in a medical or non-medical (support) capacity, depending upon qualifications and training, and current credentials. Volunteers can be activated for an emergency or non-emergency via the Virginia Volunteer Health System alerting system – phone or email.

The Medical Reserve Corps is an extension of the Peninsula Health District and Hampton Health District. Volunteers must follow ALL rules and regulations for the deployment of emergency personnel. At NO time will any member of the PENINSULA MRC volunteer self-deploy to any emergency. In the event a PENINSULA MRC volunteer self-deploys to an incident without being activated, dispatched and deployed through the procedures outlined in this document, it will constitute a breach of the MRC code of conduct and the individual(s) will be immediately terminated from service with the PENINSULA MRC.

Field Service in Emergencies, Public Health Outreach, or Exercises:

Volunteers may be called upon to serve in austere conditions and work long hours in accordance to the needs of the operation. Volunteering is serious business for Peninsula Medical Reserve Corps and volunteers are relied upon more and more by those in our communities. If alerted to serve, and you have expressed you are available, and have received your official deployment instructions from the MRC office, you are expected to attend the event or incident, because you will fill role that is critical to the operation.

Please show up. Not being there has a domino effect on the ability to provide critical and timely services, and can be a hindrance to the effectiveness of the operation.

No shows damage the reputation, reliability, and integrity of the Medical Reserve Corps organization, and place a heavier burden on other volunteers and staff.

We understand life happens, but you must call your assigned supervisor (or MRC office) at least 24 hours in advance if you are unable to follow through on your commitment. The sooner you call the easier it is to back-fill your slot.

Not showing for an event will not be tolerated and repeated offenders will be removed from the Peninsula MRC.

A. Intra-district Activation

When a decision is made to activate the Emergency Operations Plan (EOP) for any locality or jurisdiction, the Public Health or Citizen Corps representative at the Emergency Operation Center will notify the MRC Coordinator of the need to activate the MRC. The health director will then provide the following information to the person activating the team via the MRC Request For Volunteer Form:

1. Nature and scope of the emergency
2. Location(s) to which volunteers are to report
3. Estimated numbers and types of volunteers needed

After receiving notification from the EOC Representative, the MRC Coordinator will then activate the appropriate MRC resources. The MRC Coordinator will make contact with the MRC unit liaisons or individual volunteers.

For safety and security reasons, it may be necessary to assemble volunteers at a staging area and transport team members to their operational destinations.

B. Inter-district Activation

Should MRC volunteers be needed in another area of the Commonwealth, the above procedure will be followed in accordance with the state Emergency Operations Center and the Virginia Department of Health Emergency Coordination Center (ECC) and the VDH Emergency Mobilization Plan.

C. Interstate Activation

In certain emergencies of regional or national significance, MRC resources MAY be needed to assist outside the Commonwealth. In the event of an incident of this type (example: Hurricane Katrina, national security emergency, etc.). This will require activation of an Emergency Management Assistance Compact (EMAC). This is a request for resources from another state and must come under an official disaster declaration and will be coordinated through the State Emergency Operations Center. The state EOC will then filter the request to the local MRC's and may partner them with existing resources (Red Cross, etc.) During an EMAC request the same activation procedure will be followed. MRC volunteers may also register with the Department of Health and Human Services to be deployed nationally as a federal volunteer.

9.) Demobilization

The MRC volunteers will support emergency, public health, other personnel, and operations for the duration of an incident or as long as their services are needed. It is possible that some MRC volunteers will be demobilized before others as their assignments are completed.

Demobilization will take place at the discretion of the Incident Commander and the Incident Action Plan or as dictated by specific incident needs and priorities. Depending on the incident, demobilization may include a mental and physical health assessment.

When demobilization commences MRC volunteers should ensure that the following objectives are completed:

- Ensure all assigned activities are completed
- Determine whether additional assistance is required
- If within the scope of one's assignment, help ensure all injured personnel, patients, victims and fatalities are properly processed, disposition and transported to the appropriate facility
- Account for all issued equipment, supplies, and other MRC volunteers
- Clean up debris or trash associated with MRC assignments
- Check out with the Incident Commander, Task Force or Strike Team Leader, Shelter Manager or other health department personnel before leaving the scene or site.
- Complete physical/mental health assessment (if required and outprocessing staff is available)
- Report hours to their local MRC Unit and receive debriefing.
- Complete an evaluation form with the MRC Coordinator

10.) Communication

Routine Communications

In non-emergency situations, the PENINSULA MRC will communicate with MRC volunteers through normal lines such a phone, fax, and e-mail, or VVHS non-emergency alerts.

All PENINSULA MRC volunteers are responsible for providing contact information to the health district liaisons and/or MRC Volunteer Coordinator in order to ensure the most current contact information is available. Failure to update contact information may result in removal from the Peninsula MRC without notice.

A. Website

The PENINSULA MRC unit will maintain a website thru the Virginia Dept. of Health webmaster. The address for the website is www.vdh.virginia.gov/mrc/peninsula. Every effort will be made to keep the website up-to-date.

B. Newsletter

As time and funds permit, Peninsula MRC will provide its members with a quarterly newsletter distributed via email through VVHS. Volunteers are encouraged to submit articles and assist in producing the newsletter.

C. Email

Volunteers must provide the MRC with an email address, and check their email routinely as they will receive communication from the unit weekly and monthly and as non-emergency opportunities arise via email. *It is necessary for MRC volunteers to notify the coordinator when any changes are made to their email address.*

D. Emergency Communications

During emergencies volunteers may be contacted using the state notification system, Virginia Volunteer Health System alerts, email, and phone trees. All volunteers

should follow the procedures for MRC Activation using the Incident Command System ESF #8 function and the National Incident Management System.

E. Medical Reserve Corps Logo

The MRC logo is only for official MRC use. The use must be applied for and approved for use through the Dept. of Health and Human Services - OCVMRC. The PENINSULA MRC Coordinator is responsible for submitting all requests regarding the use of the MRC logo.

Public Information

All requests by the media SHALL be directed to the MRC Coordinator and the Health District Director and the regional VDH Public Information Officer. At NO time is any member of the MRC permitted to discuss MRC operations with the media without permission from the Health District Director, the Incident Commander, or the MRC Coordinator.

11.) Identification Cards

All PENINSULA MRC deployable/deployed volunteers will be issued an Identification card/badge upon completion of the PENINSULA MRC Orientation and successful background investigation. This badge must be carried at all times especially in times of an emergency. MRC volunteers may not be admitted into scenes of disaster and emergencies or facilities without proper ID.

12.) Uniforms and Equipment

During an emergency event volunteers may be provided vests with reflective tape for the purpose of identification and safety. Volunteers may, depending on available supplies receive volunteer go-bags that contain personal safety equipment useful in their job responsibilities.

While there is no standard uniform, it is expected for MRC volunteers to present themselves in a professional manner of dress at all times while operating under the MRC, therefore the VDH Peninsula Health Center attire policy is in effect. Volunteers may request a copy from the MRC Volunteer Coordinator. If a Peninsula MRC shirt has been issued, it is expected attire at an emergency or non emergency event. If a shirt has not been issued, a simple red shirt can be worn. Volunteers should also take into account for duty locations, hours of service and weather conditions and adjust their dress accordingly.

13.) Confidentiality

Volunteer Information - Protection of volunteer information will be respected by the MRC leadership, staff, and volunteers. Information will be shared on a "need to know" basis.

Strategic National Stockpile and Dispensing Site locations shall be kept confidential by MRC volunteers and shared on a "need to know" basis.

14.) HIPAA Compliance

The volunteers shall read and sign a copy of the HIPAA statement. The signed HIPAA statement should be filed in the volunteer file and kept as a matter of record.

HIPAA Guidelines state:

- As a volunteer performing duties for the Medical Reserve Corps, you will have access to the protected health information (PHI) of the patients.
- Federal and state laws, including HIPPA and the policies and procedures of the Virginia Department of Health, protect the privacy and security of this PHI.
- It is illegal for you to use or disclose PHI outside the scope of your volunteer duties for the Medical Reserve Corps. This includes oral, written, or electronic uses and disclosures.
- You may use PHI as necessary PHI to carry out your duties.
- You may only share PHI with other health care providers for treatment purposes.
- You may **NOT** photocopy PHI.
- You must access only the minimum amount of PHI necessary to care for a patient.
- You may NOT record PHI (such as patient names, diagnoses, dates of birth, addresses, phone numbers, etc.) on any reports you may need to turn in to your program, or forms you may need to take with you.
- You may only access the PHI of patients for whom you are caring/when there is a need for the PHI.
- Be aware of your surroundings when discussing PHI. For example, because others may overhear you, it is inappropriate to discuss PHI in bathrooms, lunch areas or in any other public place.
- Shred non-necessary PHI, do not dispose of it in the public trash.
- At a dispensing site it is important to obtain the PHI as discreetly as possible.

15.) Liability Coverage/Legislation/Laws

Persons who volunteer to serve in a Medical Reserve Corp Unit could be protected from liability for injuries to persons treated by the MRC through several Virginia statutes as well as the Federal Volunteer Protection Act. (See Appendix C for further details on State and Federal laws)

A. State Laws

- ∅ **Virginia Code § § 8.01- 225 et seq., the “Good Samaritan Act”**
 - MRCU volunteers should be immune from liability for harm caused when providing emergency care to ill or injured persons at the scene of an accident, fire or any life-threatening emergency.
- ∅ **Virginia Code § § 44-146.13 et seq., the “Commonwealth of Virginia Emergency Services and Disaster Law of 2000”**
 - During a declared emergency, MRC volunteers will be immune from liability for harm caused when providing medical and health services so long as they are doing so under supervision of the MRCU.
 - Additionally, during a declared emergency, those volunteers who are licensed or certified to render health care services will receive immunity when they gratuitously render aid using their skills.

Ø **Virginia Code § § 2.2-3600 et seq., the “Virginia State Government Volunteers Act”**

○ MRC volunteers may enjoy the protection of the Commonwealth's sovereign immunity if they are deemed to be a volunteer of a state agency, such as VDH.

Ø **Volunteer Protection Act**

○ Volunteers will not be liable for economic harm caused during the performance of volunteer activities so long as the activities are within the scope of the volunteer's responsibilities to the MRCU.

Ø **Virginia Code § 32.1-48.016 “ Immunity from liability” – March 2005, Effective July 1, 2005**

○ Any person, including any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under Virginia CORPS, who, in good faith and in the performance of his duties, acts in compliance with this article and the Board of Health's regulations shall not be liable for any civil damages for any act or omission resulting from such actions unless such act or omission was the result of gross negligence or willful misconduct.

In addition, Virginia courts have established the doctrines of charitable immunity and sovereign immunity. Both of these doctrines are partially applicable to MRCU volunteers. Under the doctrine of charitable immunity, MRCU volunteers may be immune from liability for harm caused while acting within the scope of their duties to the MRCU because the MRCU is a not-for-profit organization. Sovereign immunity may immunize MRCU volunteers if a court finds that they are agents of the Commonwealth. None of these statutes or doctrines were specifically written with MRCU volunteers in mind. Therefore, they do not provide absolute immunity.

B. Federal Laws

The federal government has given certain liability protection to narrow group of health service providers under a Homeland Security Act declaration by Health and Human Services. During declared emergencies there is some protection under the Good Samaritan Act and the Volunteer Protection Act.

16.) Risk Management

Workers Compensation is not provided to volunteers. The participation of volunteers in non-emergency events is on behalf of the Commonwealth of Virginia, Virginia Department of Health, and the Peninsula and Hampton Health Districts. Volunteers performing activities is always under the direction of the LHD Director.

MRC volunteers who are registered with the Virginia Department of Health are entitled to the benefits described in § 2.2-3605 of the Code of Virginia. While they are acting under the direction of the Virginia Department of Health, and within the course and scope of their assigned emergency and disaster response activities, volunteers are eligible for the same liability protection available to state employees. In addition to this protection, if a volunteer is injured while performing an assignment the state may also provide up to \$10,000 reimbursement for medical expenses.

For volunteers to be covered under the State's liability, they must:

- ✓ Be registered as a member of an organized MRC Unit
- ✓ Demonstrate comprehension of basic emergency competencies – refer to Orientation.
- ✓ Be “Officially deployed” by MRC Coordinator or designee
- ✓ Act under the direction of the VDH or other state agency, and assigned site supervisor

- ✓ Follow the policies and protocols of the MRC Unit or VDH
- ✓ Act within the scope of their education and experience and within the confines of their training and job action sheet.

In the event of a claim (or potential claim) immediately notify:

Your immediate supervisor or acting state agency director who should send a report of the incident to VDH Human Resources within 48 hours

AND

The Virginia Department of the Treasury
 Division of Risk Management--Claims
 P. O. Box 1879
 Richmond, VA 23218-1879
 Phone: 804-786-3152 Fax: 804-371-2442
 Visit DRM: www.trsvirginia.gov

Provide Risk Management with:

- ✓ Current contact information for the volunteer
- ✓ Documentation of the Volunteer's assignment
- ✓ Name of MRC Unit, date, duration of the assignment, services provided by volunteer
- ✓ Supervisor contact information (or other authorizing personnel)
- ✓ A complete description of the incident, injury or damage
- ✓ Names and contact information for witnesses
- ✓ When applicable – All notices of claim, demand, summons or other process received
- ✓ Time lines do apply. Please do this as soon as possible, following the incident.

17.) Unit Contact Information

The Headquarters for the PENINSULA MRC unit is located at:
 416 J. Clyde Morris Blvd, Newport News, VA 23601

Website: <http://www.vdh.virginia.gov/mrc/peninsulamrc>
 Unit email: [N/A](#)

**Teresa Blakeslee
 MRC Coordinator**

Virginia Dept. of Health - Peninsula Medical Reserve Corps
 416 J. Clyde Morris Blvd. | Newport News, VA 23601
 Main: 757-594-8045 | Fax: 757-594-8612

Teresa.Blakeslee@vdh.virginia.gov

PenMRC Website: <http://www.vdh.virginia.gov/mrc/peninsulamrc>

VVHS: <https://vms.vdh.virginia.gov/vms/default.jsp?main=req>

TRAINVirginia: <http://va.train.org>

 Peninsula Medical Reserve Corps

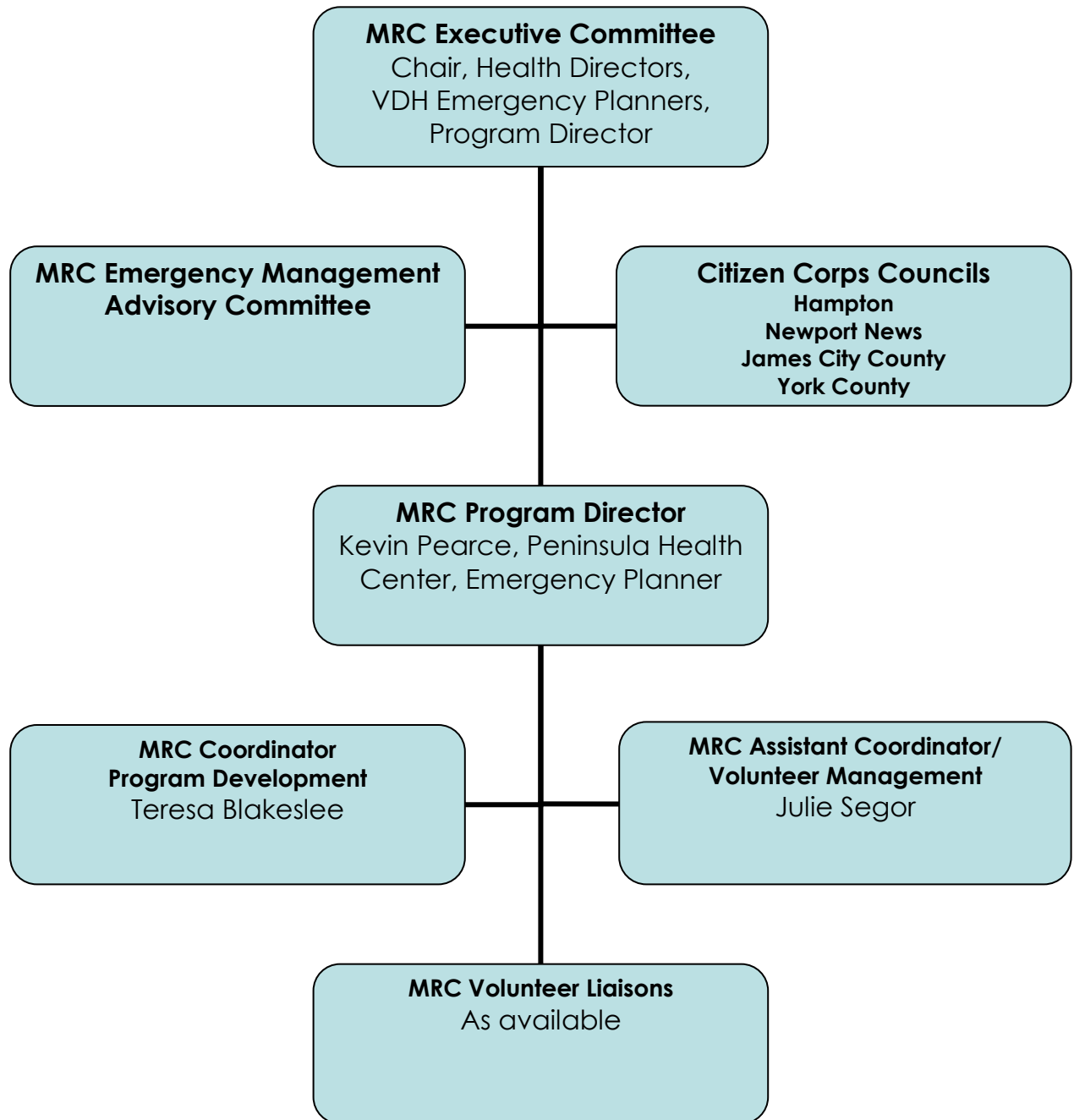


Julie Segor
 Assistant MRC Coordinator/Volunteer Manager
 Email: Julie.Segor@vdh.virginia.gov

Kevin Pearce
 Emergency Planner, Peninsula HD
 Email: Kevin.pearce@vdh.virginia.gov
 Office: 757-218-9439

Staysi Blunt
 Emergency Planner, Hampton HD
 Email: Staysi.Blunt@vdh.virginia.gov
 Office: 757-315-3770

Appendix A: Organizational Chart



VIRGINIA VOLUNTEER HEALTH SYSTEM (VVHS) JOB AID

<u>MRC Volunteer Level</u>	<u>Medical/ESAR-VHP Level</u>	<u>Alert Category</u>
<p>MRC Level 1: Volunteers assigned to Level 1 are in a high leadership position with specific leadership roles assigned. Higher level training requirements include IS200, IS800, and participation in an exercise in a leadership position.</p>	<p>ESAR-VHP Credential Level 1: Assignment to Level 1 requires the verification that the volunteer is actively employed or has privileges in a hospital.</p>	<p>Activation: should be used to activate volunteer for a specific activity and should include activation specifics such as the date, location and time. Volunteers can confirm their availability.</p> <p>Awareness: should be used to inform volunteer about important public health information. It does NOT have confirmation capability.</p>
<p>MRC Level 2: Volunteers assigned to Level 2 are in a mid-leadership position in the unit. This volunteer has specific assigned roles and has met MRC Core competency requirements.</p>	<p>ESAR-VHP Credential Level 2: Assignment to Level 2 requires verification that the volunteer is clinically active in any setting other than a hospital (e.g., clinic, private practice, nursing home, etc.).</p>	<p>Deactivation: should be used to let volunteers know that their support is no longer needed for an activation that they received previously. It does NOT have confirmation capability.</p> <p>Emergency: should be used to notify volunteers in a public health emergency only.</p>
<p>MRC Level 3: Volunteers assigned to Level 3 have completed minimal training to include an MRC unit orientation and have no specific volunteer responsibility.</p>	<p>ESAR-VHP Credential Level 3: Assignment to Level 3 requires verification of the volunteers license, certification, or other state requirement to practice. In situations where the state does not govern a profession, Assistant Secretary for Preparedness and Response (ASPR) has identified requirements that are deemed to be usual and customary for employment in the profession, which must be verified.</p>	<p>Exercise: should be used to notify volunteers about an upcoming exercise or if system test alert message is being sent. Volunteers can confirm their availability.</p> <p>Readiness: should be used to determine if volunteers are potentially able to support an activity, without all the specifics confirmed. This can be used to determine if there is volunteer interest. Volunteers can confirm their availability.</p>
<p>MRC Level 4: Volunteers assigned to Level 4 are registered in the unit but have had no formal training and are inactive.</p>	<p>ESAR-VHP Credential Level 4: Assignment to Level 4 requires that the volunteer possess verified documentation of health professional education or experience. This level may include, but is not limited to, health profession students or retired health professionals who no longer hold a license.</p>	<p>Training: should be used to notify volunteers of specific training opportunities. Volunteers can confirm their availability.</p> <p><i>By default, phone alerts are sent out with NO alerting security code and Log-in is <u>not</u> required to confirm email messages. To improve the security of sensitive information, consider changing these options.</i></p>

This Job Aid provides definitions of MRC Levels and ESAR-VHP Levels. Alert Categories are described for when that specific category should be utilized.

Revised February 2012

Appendix C: State and Federal Liability Coverage

1. That §§ [2.2-3601](#), [2.2-3602](#), [2.2-3605](#), [8.01-225](#), [32.1-48.016](#), and [44-146.23](#) of the Code of Virginia are amended and reenacted as follows:

§ [2.2-3601](#). Definitions.

As used in this chapter, unless the context requires a different meaning:

"Volunteer" means any person who, of his own free will, provides goods or services, without any financial gain, to any agency, instrumentality or political subdivision of the Commonwealth;

"Volunteer in state and local services" shall include, but not be limited to, any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS while engaged in emergency services and preparedness activities as defined in § [44-146.16](#).

"Regular-service volunteer" means any person engaged in specific voluntary service activities on an ongoing or continuous basis;

"Occasional-service volunteer" means any person who provides a one-time or occasional voluntary service;

"Material donor" means any person who, without financial gain, provides funds, materials, employment, or opportunities for clients of agencies, instrumentalities, or political subdivisions of the Commonwealth;

"Department" includes all departments established in the executive branch of state government and local agencies under the jurisdiction or supervision thereof, and for the purposes of §§ [2.2-3602](#), [2.2-3604](#) and [2.2-3605](#), shall include political subdivisions of the Commonwealth.

§ [2.2-3602](#). Scope of chapter; status of volunteers; reimbursements.

A. Every department, through its executive head, may develop volunteer programs and accept the services of volunteers, including regular-service volunteers, occasional-service volunteers, or material donors, to assist in programs carried out or administered by that department.

B. Volunteers recruited, trained, or accepted by any department shall, to the extent of their voluntary service, be exempt from all provisions of law relating to state employment, hours of work, rate of compensation, leave time, and employee benefits except those enumerated in or consistent with § [2.2-3605](#). Volunteers shall, however, at all times comply with applicable work rules.

C. Every department utilizing the services of volunteers may provide volunteers with such incidental reimbursements as are consistent with the provisions of § [2.2-3605](#), including transportation costs, lodging, and subsistence, as the department deems appropriate to assist volunteers in performing their duties.

D. For the purposes of this chapter, individuals involved in emergency services and preparedness activities pursuant to the definition of "emergency services" in § [44-146.16](#) shall be considered volunteers in state and local services and shall be accordingly entitled to the benefits conferred in this chapter. As volunteers in state and local services, such individuals shall be deemed to be regular-service volunteers.

§ [2.2-3605](#). Volunteer benefits.

A. Meals may be furnished without charge to regular-service volunteers, *if* scheduled work assignments extend over an established meal period. Meals may be furnished without charge to occasional-service volunteers at the discretion of the department's executive head.

B. Lodging, if available, may be furnished temporarily, at no charge, to regular-service volunteers.

C. Transportation reimbursement may be furnished those volunteers whose presence is determined to be necessary to the department. Rates or amounts of such reimbursement shall not exceed those provided in § [2.2-2823](#). Volunteers may utilize state vehicles in the performance of their duties, subject to those regulations governing use of state vehicles by paid staff.

D. Liability insurance may be provided by the department utilizing their services both to regular-service and occasional-service volunteers to the same extent as may be provided by the department to its paid staff. Volunteers in state and local service, *including, but not limited to, any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS*, shall enjoy the protection of the Commonwealth's sovereign immunity to the same extent as paid staff.

§ [8.01-225](#). Persons rendering emergency care, obstetrical services exempt from liability.

A. Any person who:

1. In good faith, renders emergency care or assistance, without compensation, to any ill or injured person at the scene of an accident, fire, or any life-threatening emergency, or en route there from to any hospital, medical clinic or doctor's office, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such care or assistance.

2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in active labor who has not previously been cared for in connection with the pregnancy by such person or by another professionally associated with such person and whose medical records are not reasonably available to such person shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care or assistance. The immunity herein granted shall apply only to the emergency medical care provided.

3. In good faith and without compensation, including any emergency medical services technician certified by the Board of Health, administers epinephrine in an emergency to an individual shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if such person has reason to believe that the individual receiving the injection is suffering or is about to suffer a life-threatening anaphylactic reaction.

4. Provides assistance upon request of any police agency, fire department, rescue or emergency squad, or any governmental agency in the event of an accident or other emergency involving the use, handling, transportation, transmission or storage of liquefied petroleum gas, liquefied natural gas, hazardous material or hazardous waste as defined in § [18.2-278.1](#) or regulations of the Virginia Waste Management Board shall not be liable for any civil damages resulting from any act of commission or omission on his part in the course of his rendering such assistance in good faith.

5. Is an emergency medical care attendant or technician possessing a valid certificate issued by authority of the State Board of Health who in good faith renders emergency care or assistance whether in person or by telephone or other means of communication, without compensation, to any injured or ill person, whether at the scene of an accident, fire or any other place, or while transporting such injured or ill person to, from or between any hospital, medical facility, medical clinic, doctor's office or other similar or related medical facility, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, treatment or assistance, including but in no way limited to acts or omissions which involve violations of State Department of Health regulations or any other state regulations in the rendering of such emergency care or assistance.

6. In good faith and without compensation, renders or administers emergency cardiopulmonary resuscitation, cardiac defibrillation, including, but not limited to, the use of an automated external

defibrillator, or other emergency life-sustaining or resuscitative treatments or procedures which have been approved by the State Board of Health to any sick or injured person, whether at the scene of a fire, an accident or any other place, or while transporting such person to or from any hospital, clinic, doctor's office or other medical facility, shall be deemed qualified to administer such emergency treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of such emergency resuscitative treatments or procedures.

7. Operates an automated external defibrillator at the scene of an emergency, trains individuals to be operators of automated external defibrillators, or orders automated external defibrillators, shall be immune from civil liability for any personal injury that results from any act or omission in the use of an automated external defibrillator in an emergency where the person performing the defibrillation acts as an ordinary, reasonably prudent person would have acted under the same or similar circumstances, unless such personal injury results from gross negligence or willful or wanton misconduct of the person rendering such emergency care.

8. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue or any other place or while transporting such injured or ill person to a place accessible for transfer to any available emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, treatment or assistance, including but not limited to acts or omissions which involve violations of any state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such emergency care or assistance, unless such act or omission was the result of gross negligence or willful misconduct.

9. Is an employee of a school board, authorized by a prescriber and trained in the administration of insulin and glucagon, who, upon the written request of the parents as defined in § [22.1-1](#), assists with the administration of insulin or administers glucagon to a student diagnosed as having diabetes who requires insulin injections during the school day or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if the insulin is administered according to the child's medication schedule or such employee has reason to believe that the individual receiving the glucagon is suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee of a school board is covered by the immunity granted herein, the school board employing him shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin or glucagon treatment.

10. Renders emergency services and preparedness activities, as defined in § [44-146.16](#), as a member of a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS, in good faith and without compensation, shall not be liable for any civil damages for any act or omission resulting from the rendering of such emergency services and preparedness activities during any natural or man-made disasters or any other natural or man-made emergency, including any outbreak, potential epidemic, or epidemic of disease, unless the act or omission was the result of the person's gross negligence or willful misconduct.

B. Any licensed physician serving without compensation as the operational medical director for a licensed emergency medical services agency in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from the rendering of emergency medical services in good faith by the personnel of such licensed agency unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any person serving without compensation as a dispatcher for any licensed public or nonprofit emergency services agency in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from the rendering of emergency services in good faith by the

personnel of such licensed agency unless such act or omission was the result of such dispatcher's gross negligence or willful misconduct.

Any individual, certified by the State Office of Emergency Medical Services as an emergency medical services instructor and pursuant to a written agreement with such office, who, in good faith and in the performance of his duties, provides instruction to persons for certification or recertification as a certified basic life support or advanced life support emergency medical services technician shall not be liable for any civil damages for acts or omissions on his part directly relating to his activities on behalf of such office unless such act or omission was the result of such emergency medical services instructor's gross negligence or willful misconduct.

Any licensed physician serving without compensation as a medical advisor to an E-911 system in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering medical advice in good faith to establish protocols to be used by the personnel of the E-911 service, as defined in § [58.1-3813.1](#), when answering emergency calls unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any licensed physician who directs the provision of emergency medical services, as authorized by the State Board of Health, through a communications device shall not be liable for any civil damages for any act or omission resulting from the rendering of such emergency medical services unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any licensed physician serving without compensation as a supervisor of an automated external defibrillator in ~~this~~ *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering medical advice in good faith to the owner of the automated external defibrillator relating to personnel training, local emergency medical services coordination, protocol approval, automated external defibrillator deployment strategies, and equipment maintenance plans and records unless such act or omission was the result of such physician's gross negligence or willful misconduct.

C. Any provider of telecommunication service, as defined in § [58.1-3812](#), including mobile service, in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering such service with or without charge related to emergency calls unless such act or omission was the result of such service provider's gross negligence or willful misconduct.

Any volunteer engaging in rescue or recovery work at a mine or any mine operator voluntarily providing personnel to engage in rescue or recovery work at a mine not owned or operated by such operator, shall not be liable for civil damages for acts or omissions resulting from the rendering of such rescue or recovery work in good faith unless such act or omission was the result of gross negligence or willful misconduct.

D. Nothing contained in this section shall be construed to provide immunity from liability arising out of the operation of a motor vehicle.

E. (Expires July 1, 2005) 1. In the absence of gross negligence or willful misconduct, a health care provider shall not be liable in any civil action resulting from (i) injuries to any health care worker sustained in connection with administration of the vaccinia (smallpox) vaccine or other smallpox countermeasure, or (ii) any injuries to any other person sustained as a result of such other person coming into contact, directly or indirectly, with a health care worker; provided the vaccinia (smallpox) vaccine or smallpox countermeasure was administered and monitored in accordance with the recommendations of the Centers for Disease Control and Prevention in effect at the time of the vaccinia (smallpox) vaccine or other smallpox countermeasure administration. Nothing in this subsection shall preclude an injured health care worker, who is otherwise eligible for workers' compensation benefits pursuant to Title 65.2, from receipt of such benefits.

2. In the absence of gross negligence or willful misconduct, a health care worker shall not be liable in any civil action for injuries to any other person sustained as a result of such other person

coming into contact, directly or indirectly, with a health care worker, provided the vaccinia (smallpox) vaccine or smallpox countermeasure was administered and monitored in accordance with the recommendations of the Centers for Disease Control and Prevention in effect at the time of the vaccinia (smallpox) vaccine or other smallpox countermeasure administration.

3. For the purposes of this subsection, "-health care provider-" means a health care provider participating in a smallpox preparedness program, pursuant to a declaration by the United States Department of Health and Human Services ("HHS"), through which individuals associated with the health care provider have received the vaccinia (smallpox) vaccine or other smallpox countermeasure defined by HHS from any hospital, clinic, state or local health department, or any other entity that is identified by state or local government entities or the HHS to participate in a vaccination program.

4. For the purposes of this subsection, "health care worker" means a health care worker to whom the vaccinia (smallpox) vaccine or other smallpox countermeasure has been administered as part of a smallpox preparedness program pursuant to a declaration by HHS. Such health care workers shall include but shall not be limited to: (i) employees of a health care provider referenced in subdivision 3, (ii) independent contractors with a health care provider referenced in subdivision 3, (iii) persons who have practice privileges in a hospital, (iv) persons who have agreed to be on call in an emergency room, (v) persons who otherwise regularly deliver prehospital care to patients admitted to a hospital, and (vi) first responders.

F. For the purposes of this section, the term "compensation" shall not be construed to include (i) the salaries of police, fire or other public officials or personnel who render such emergency assistance, (ii) the salaries or wages of employees of a coal producer engaging in emergency medical technician service or first aid service pursuant to the provisions of §§ [45.1-161.38](#), [45.1-161.101](#), [45.1-161.199](#) or § [45.1-161.263](#), (iii) complimentary lift tickets, food, lodging or other gifts provided as a gratuity to volunteer members of the National Ski Patrol System, Inc., by any resort, group or agency, or (iv) the salary of any person who (a) owns an automated external defibrillator for the use at the scene of an emergency, (b) trains individuals, in courses approved by the Board of Health, to operate automated external defibrillators at the scene of emergencies, (c) orders automated external defibrillators for use at the scene of emergencies, or (d) operates an automated external defibrillator at the scene of an emergency.

For the purposes of this section, an emergency medical care attendant or technician shall be deemed to include a person licensed or certified as such or its equivalent by any other state when he is performing services which he is licensed or certified to perform by such other state in caring for a patient in transit in ~~this~~ *the* Commonwealth, which care originated in such other state.

Further, the public shall be urged to receive training on how to use cardiopulmonary resuscitation (CPR) and an automated external defibrillator (AED) in order to acquire the skills and confidence to respond to emergencies using both CPR and an AED.

§ [32.1-48.016](#). Immunity from liability.

Any person, including any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS, who, in good faith and in the performance of his duties, acts in compliance with this article and the Board of Health's regulations shall not be liable for any civil damages for any act or omission resulting from such actions unless such act or omission was the result of gross negligence or willful misconduct.

§ [44-146.23](#). Immunity from liability.

A. Neither the Commonwealth, nor any political subdivision thereof, nor federal agencies, nor other public or private agencies, nor, except in cases of willful misconduct, public or private employees, nor representatives of any of them, engaged in any emergency services activities, while complying with or attempting to comply with this chapter or any rule, regulation, or

executive order promulgated pursuant to the provisions of this chapter, shall be liable for the death of, or any injury to, persons or damage to property as a result of such activities. The provisions of this section shall not affect the right of any person to receive benefits to which he would otherwise be entitled under this chapter, or under the Workers' Compensation Act (§ [65.2-100](#) et seq.), or under any pension law, nor the right of any such person to receive any benefits or compensation under any act of Congress. *For the purposes of the immunity conferred by this subsection, representatives of public or private employees shall include volunteers in state and local services who are persons who serve in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS.*

B. Any person owning or controlling real estate or other premises who voluntarily and without compensation grants a license or privilege, or otherwise permits the designation or use of the whole or any part or parts of such real estate or premises for the purpose of sheltering persons, of emergency access or of other uses relating to emergency services shall, together with his successors in interest, if any, not be liable for negligently causing the death of, or injury to any person on or about such real estate or premises or for loss of or damage to the property of any person on or about such real estate or premises during such actual or impending disaster.

C. If any person holds a license, certificate, or other permit issued by any state, or political subdivision thereof, evidencing the meeting of qualifications for professional, mechanical, or other skills, the person may gratuitously render aid involving that skill in *the* Commonwealth during a disaster, and such person shall not be liable for negligently causing the death of, or injury to, any person or for the loss of, or damage to, the property of any person resulting from such gratuitous service.

D. No person, firm or corporation which gratuitously services or repairs any electronic devices or equipment under the provisions of this section after having been approved for the purposes by the State Coordinator shall be liable for negligently causing the death of, or injury to, any person or for the loss of, or damage to, the property of any person resulting from any defect or imperfection in any such device or equipment so gratuitously serviced or repaired.

E. Notwithstanding any law to the contrary, no individual, partnership, corporation, association, or other legal entity shall be liable in civil damages as a result of acts taken voluntarily and without compensation in the course of rendering care, assistance, or advice with respect to an incident creating a danger to person, property, or the environment as a result of an actual or threatened discharge of a hazardous substance, or in preventing, cleaning up, treating, or disposing of or attempting to prevent, clean up, treat, or dispose of any such discharge, provided that such acts are taken under the direction of state or local authorities responding to the incident. This section shall not preclude liability for civil damages as a result of gross negligence, recklessness or willful misconduct. The provisions of this section shall not affect the right of any person to receive benefits to which he would otherwise be entitled under this chapter, or under the Workers' Compensation Act (§ [65.2-100](#) et seq.), or under any pension law, nor the right of any such person to receive any benefits or compensation under any act of Congress. The immunity provided by the provisions of this paragraph shall be in addition to, not in lieu of, any immunities provided by § [8.01-225](#).

PRIOR to March 2005, information on liability coverage was included in the "Liability Statement" provided by legal council to the VDH, with a place for volunteers to read and document that they were given this information.

14.3.1 Federal Laws

14.3.1 The National MRC suggests that there are some protections for volunteers under the Good Samaritan Laws, the Volunteer Protection Act.

14.3.2 The VPA provides qualified immunity from liability for volunteers and, subject to exceptions, preempts inconsistent state laws on the subject, except for those that provide protections that are stronger than those in the VPA.

14.3.3 The VPA defines a volunteer as "an individual performing services for a nonprofit organization or a governmental entity which does not receive compensation (other than reasonable reimbursement or allowance for expenses actually incurred) or any other thing of value in lieu of compensation in excess of \$500 per year.

14.3.4 Under the VPA a volunteer is immune from liability for harm caused by an act of omission of the volunteer on behalf of the organization or entity if:

- 1) the act or omission was within the scope of the volunteer's responsibilities in the organization or entity;
- 2) if required, the volunteer was properly licensed, certified or authorized for the activities or practice giving rise to the claim;
- 3) the harm was not caused by "willful or criminal misconduct, gross negligence, reckless misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer"
- 4) the harm was not caused by the volunteer's operation of a motor vehicle, vessel, aircraft, or other vehicle requiring the operator to possess a license or maintain insurance.



Volunteer's Printed First and Last Name: _____

Volunteer Liability

I acknowledge that I have read and understand the MRC Volunteer Liability Statement provided in the PENINSULA Medical Reserve Corps Policies. I understand that my participation in non-emergency events is on behalf of the Commonwealth of Virginia, Virginia Dept. of Health, and the Peninsula and Hampton Health Districts, and that I am performing activities under the direction of the LHD Director.

Volunteer Signature

Date

HIPAA

I have read and understand the information provided in the VDH HIPAA & Students/Volunteers provided by the MRC unit and VDH. I realize that there are civil and criminal penalties for the unauthorized use and disclosure of PHI. I will abide by the guidelines when performing my duties as a MRC volunteer.

Volunteer Signature

Date

MRC Policies

I have read and understand the information provided in the PENINSULA Medical Reserve Corps Policies. I will abide by the policies when performing my duties as a MRC volunteer.

Volunteer Signature

Date

MRC Coordinator Signature

Date

Please sign and return to:

MRC Coordinator

Virginia Dept. of Health - Peninsula Medical Reserve Corps

416 J. Clyde Morris Blvd. | Newport News, VA 23601

FAX: 757-594-8612