Woodford County Health Department
MRC

“Volunteers Building Strong, Healthy, and Prepared Communities”

Standard Operating Guidelines
(SOG’s)
Team Handbook

K HELPS
In times of need, Kentucky helps.

Kentucky UNBRIDLED SPIRIT
Dear Medical Reserve Corps Volunteer,

My name is Sarah Cunliffe. I am the local Medical Reserve Corps (MRC) Unit Coordinator. On behalf of the Woodford County Health Department, I welcome you and thank you for joining KHELPS as a MRC/SERV-KY Volunteer. We recognize that trained, organized, and motivated medical and non-medical volunteers are essential to meeting the public health needs of our community should a disaster/public health crisis arise.

This handbook was created to provide information and guidance for the volunteer. If you have any questions feel to contact me at the Woodford County Health Department (859) 873-4541.

Once again welcome and thank you for your interest. I look forward to meeting and working with you.

Sincerely,

Sarah Cunliffe
MRC Unit Coordinator
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Standard Operating Guidelines  
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Revision Record

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Kentucky MRC Standard Operating Guidelines
Team Handbook

The Standard Operating Guidelines Team Handbook provides Medical Reserve Corps (MRC) volunteers with guidance and direction. This handbook is intended to serve as a reference for the volunteer.

MRC Unit Locations & Contact Information

- Log on to www.medicalreservecorps.gov.
- Choose “Find MRC Units” from the left hand side of the screen
- Follow directions to locate the local unit or any other unit across the U.S.

MRC Local Unit Coordinator: Sarah Cunliffe
Woodford County Health Department
229 North Main St
Versailles, KY 40383
(859) 873-4541 Sarah.e.cunliffe@ky.gov

State MRC Coordinator: Rebecca Hardin
KHELPS/MRC Program Coordinator
Department for Public Health
Preparedness Branch
275 East Main Street HS1EJ
Frankfort, KY 40621
502-564-7243 ext. rebecca.hardin@ky.gov

Region IV MRC Coordinator: Kathy L. Handra, Region IV MRC Coordinator
Department of Health and Human Services
Sam Nunn Atlanta Federal Center
61 Forsyth Street SW, Suite 5B95
Atlanta, Georgia 30303-8909
Office: (404) 562-4276 kathy.handra@hhs.gov

Purpose

The Woodford County Health Department MRC was formed to promote public health and safety in three key areas:

1. Public Health Emergencies: Events that threaten public health, such as a disease outbreak
2. Mass Casualty Incidents: Disasters that cause injury or threats to large numbers of people. This can include a building collapse, fire, storm, flood or other event that displaces groups of residents that must be moved to emergency shelters.
3. Community Service Activities: Opportunities to help at health fairs

The purpose of the Woodford County Health Department MRC is to:

1. Identify, organize and train volunteers before a crisis occurs, respond to a specific need in the community thereby enhancing local emergency response efforts, especially to large-scale emergencies.
2. Provide a reserve capacity at the community level to respond to local public and community health needs and priorities.
3. Educate the community on preparedness related topics as well as other public health topics further engaging volunteers in community involvement in non-disaster related activities.

Team Mission

Strengthen community response to disasters that affect Woodford County through the development of a Medical Reserve Corps composed of community volunteers including health professionals and support staff trained to support emergency agencies to protect the health and safety of the public in time of disaster and promote public health activities in non-disaster time.

Team Goals

- “To do the greatest good for the greatest number of people.”
- Identify, train, and credential volunteers for response in identified areas of expertise enabling them to work efficiently and competently in a disaster (natural/man-made) as a team.
- Engage volunteers in community involvement in non-disaster related activities.

Woodford County Risks

MRC Volunteers may be activated to respond to identified county risks. These include:
- Earthquakes (the Madrid Fault)
- Severe Weather (thunderstorms, tornadoes, winter storms, floods)
- Contagious Disease Outbreaks
- Transportation Accidents
- Emergency Related Hazards and Emergency Shortages/Outages (natural gas/petroleum products, electrical transmission, power outages/shortages)
- Water Shortages
- Hazardous Materials Accidents
- War Related Incidents
- Weapons of Mass Destruction, Terrorism, Civil Disturbances, B-NICE (Biological, Nuclear, Incendiary, Chemical, Explosive)

Role of MRC Volunteers

The Woodford County Health Department MRC is a volunteer group. Additionally the team is called MRC/CERT. Cross-Training in Community Emergency Response Team (CERT) is also available. Volunteers support emergency response agencies in the community. Volunteers have medical and non-medical backgrounds and are trained to assist in an emergency. MRC volunteers may be activated to assist the Woodford County Health Department and other agencies respond to an event that involves a county risk listed above.

Thank you again for volunteering. Keep in mind your family comes first in an emergency. Because you signed up as a volunteer does not mean you will be able to respond. Response roles can include but are not limited to:
Medical Examples
Vaccinator/dispenser, clinic prep/set-up, medical screener, triage, basic first aid treatment, distribution of SNS, supporting health needs of vulnerable populations, shelter care, mental health support, pharmaceutical consult

Non-Medical Examples
Forms, people movers, HAM Radio, Administrative support (phones, clerical), record keeping, interpreter, childcare, crown control, runners, food preparation/distribution, shelter registration, support medical workers

This handbook describes specific public health response areas you may be asked to assist with in an emergency. Examples include:

• Supporting the receipt and distribution of emergency supplies (Strategic National Stockpile/SNS)
• Supporting a community-wide mass medication clinic (antibiotics/vaccine)
• Staffing a shelter / special medical needs shelter or alternate care site
• Assisting with public health outreach information / activities

Woodford County has a Spanish speaking population. In time of need you may need to assist someone that speaks Spanish. A Spanish Quick Reference List, common phrases and key words, has been included in this handbook (Appendix H).
K HELPS Defined

The Kentucky Health Emergency Listing of Professionals for Surge (K HELPS) is a web based system used to register and alert individuals interested in volunteering to offer assistance during public health emergencies or disasters. The Kentucky Department for Public Health created & operates K HELPS. The system allows public health officials to streamline the registration of health professionals and apply emergency credentialing standards to prospective volunteers. Pre-registration provides a way to quickly reach volunteers when a disaster strikes. It does not require someone to respond if contacted.

The MRC is a group in KHELPS. MRC is divided into two groups: MRC Medical Group and MRC Non-Medical. The MRC Medical Group is for individuals with a professional license to practice in a medical field (physician, nurse, dentist, pharmacist, veterinarian etc) or those with healthcare education or experience. The MRC Non-Medical Group is for the individual with a non-medical background.

Other volunteer groups are also included in K HELPS: Kentucky Community Crisis Response Team (KCCRT), Disaster Behavioral Health and Emergency Support Function (ESF-8) Teams. In the future the Community Emergency Response Team (CERT) may be added as a group.

The KY Department for Public Health recognizes the importance of having credentialed volunteers to call upon in an emergency. MRC volunteers supplement existing local emergency & public health resources in responding to emergencies. Volunteers can register for MRC in the KHELPS Database online at https://khelps.chfs.ky.gov or contact their local MRC Coordinator for a paper application.

Process after Registering in KHELPS:

Applicants are assigned to the MRC unit associated in their geographical area. The local MRC unit will compete the license/credential verification (if applicable) process, process criminal record check, enroll volunteer in KY Emergency Management Workers Compensation, provide orientation/training, and issue an identification badge. A copy of the volunteer’s driver license and a confidentiality statement signed by the volunteer is kept on file. Applicants have six (6) months from the date of their K HELPS registration to complete membership requirements. Applicants not completing requirements within this time frame will be removed from the database. However, applicants may reactivate their registration at any time.

The volunteer has the opportunity to train at different levels (see Training Matrix ).

Volunteers who have been with a MRC unit prior to the release of the K HELPS database in July 2007 are strongly urged to register in the K HELPS Database. Volunteers willing to serve in other counties or states need to be registered to receive activation notifications for disasters occurring outside of their home county.
General Information

Citizen Corps

In his 2002 State of the Union Address, President Bush called on all Americans to make a lifetime commitment of at least 4,000 hours—the equivalent of two years of their lives—to serve their communities, the nation and the world. President Bush announced the creation of USA Freedom Corps to help Americans answer his call to service and to foster a culture of service, citizenship and responsibility.

This Address followed the terrorist attacks of September 11, 2001. After 9/11 America witnessed a wellspring of selflessness and heroism. People in every corner of the country asked, "What can I do?" and "How can I help?" Citizen Corps was created to help all Americans answer these questions through public education and outreach, training, and volunteer service.

The Citizen Corps is a component of USA Freedom that creates local opportunities for individuals to volunteer to help their communities prepare for and respond to emergencies. Citizen Corps Councils help drive local citizen participation by coordinating Citizen Corps programs, developing community action plans, assessing possible threats and identifying local resources.

The MRC is one program under the Citizen Corps umbrella. The Citizen Corps umbrella and other programs that may be available in your area are located below. Information on your local Citizen Corps Council can be found at www.citizencorps.gov.
Medical Reserve Corps (MRC) Background

The MRC is a specialized component under the Citizen Corps Umbrella. In Kentucky, MRC volunteers sign up in the KHELPS Database. The MRC is comprised of medical & non-medical individuals who are willing to volunteer their time and expertise to supplement existing public health and local resources during times of emergencies and other times of community need. In order to be most effective during emergencies, volunteers must be identified, organized and trained prior to the need for volunteer support. The MRC is designed to provide that organized structure and promote volunteer training. The community recognizes MRC Volunteers to be responsible, trustworthy and a resource in time of disaster.

The MRC is intended to supplement the resources of the existing community emergency medical response system as well as contribute to meeting public health needs in the community throughout the year. During emergencies, MRC Volunteers may provide an important “surge” capability when there is a shortage of regular healthcare providers or healthcare support staff.

The MRC was initially housed in the Office of the Surgeon General at the Federal Level. In response to the growth of MRC across the nation, the Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC) was created. The United States & its Territories (Virgin Islands, Puerto Rico & Guam) are divided into 10 MRC Regions. Kentucky is in Region IV. Region IV also includes the states of Tennessee, Alabama, Florida, Georgia, Mississippi, North Carolina and South Carolina. Other MRC units may be located on the MRC website: www.medicalreservecorps.gov.

Most Kentucky MRC units are sponsored by the local health department and emergency management agencies. Woodford County MRC is sponsored by the Woodford County Health Department and Woodford County Emergency Management.

National Incident Management System (NIMS)

The National Incident Management System is a comprehensive, national approach to incident management that is applicable at all jurisdictional levels and across functional disciplines. It allows organizations (public & private) to work effectively and efficiently together to prepare for, respond to, and recover from incidents, regardless of cause, size, or complexity. The course introduces NIMS, explains the purpose, principles, key components and benefits. The NIMS includes a core set of concepts, principles, and terminology. It addresses command and control, resource management, communications, technology, planning, and maintenance. It mandates the use of the Incident Command System to manage all emergencies, large or small.

Woodford County Health Department and Woodford County Health Department MRC recognize NIMS and are NIMS compliant. MRC Volunteers are required to complete an introductory course on the NIMS.

Incident Command System (ICS) – Overview

Homeland Security Presidential Directive (HSPD-5) mandated the use of the Incident Command System, or ICS, to prevent, prepare for, respond to, and recover from terrorist attacks, major disasters and other emergencies. The ICS provides an
organized method of commanding and controlling resources and agencies involved in responding to an emergency to ensure coordination and effective planning in the emergency response process. The course is designed to give an introduction to the principles, common terminology and position responsibilities when responding to an event.

MRC Volunteers are required to complete an introductory course in the ICS. The Woodford County Health Department and the Woodford County Health Department MRC use the Incident Command System for incident response operations and are expected to adhere to the chain of command. Further information on the NIMS can be found at www.fema.gov. The following resources are included in the appendix:
- Incident Command Structure (Appendix A) and NIMS Definitions (Appendix B)

**Point of Dispensing Site Overview**

A Point of Dispensing Site, or POD, is a large scale clinic designed to enable the public health agency to rapidly administer vaccinations or dispense medications to a large population. PODS are activated when the normal public health response system must be supplemented due to the severity of the event. They are established to provide the first 12 – 72 hours “surge” capacity necessary to distribute needed medication to prevent mass casualties.

During a public health crisis the speed with which medication is dispensed to the public is directly related to preventing illness and saving lives. Public health agencies support the preparation and implementation of the PODS. They are a staffing resource. However, public health does not have adequate numbers of employees to handle this alone. Because the required numbers are so large, members of the community, such as MRC Volunteers, may staff PODS during a large scale public health emergency.

**Strategic National Stockpile Overview**

The Center for Disease Control’s (CDC) Strategic National Stockpile (SNS) has large quantities of medicine and medical supplies to protect the American public if there is a public health emergency severe enough that local supplies are insufficient. Once Federal, State and local authorities agree that the SNS is needed, medicines can be delivered to any state in the country within twelve (12) hours.

MRC Volunteers may be asked to assist the health department employees at a distribution node in receiving, taking inventory, and preparing the medicine/medical supplies for distribution out in the county. The SNS has medical supplies and medication.
K HELPS Membership Process

MRC Membership (Medical and Non-Medical)
Open to medical & non-medical volunteers who support the mission of the Woodford County Health Department MRC. To apply for membership volunteers must first register in the K HELPS Database at www.khelps.chfs.ky.gov. Applicants that do not have internet access can contact the local MRC unit coordinator for a paper application.

There are two (2) categories of membership:

1. SERV-KY Affiliated
2. MRC Affiliated

SERV-KY Affiliated Volunteer:
The SERV-KY affiliation represents the minimum requirements that an individual must meet to be approved as a volunteer in the K HELPS database and activated for an incident. This level is for the volunteer who is currently unable or does not desire to complete training. Volunteers at this level of membership are the second-line of volunteer support during emergencies and are called upon only after MRC affiliated resources have been exhausted. Applicants electing this level of membership are approved in the K HELPS database and issued a K HELPS MRC ID Badge after completion of the following:

1. Completes/returns to the unit coordinator:
   - Workers Compensation (KYEM Form 50)
   - Criminal Record Check Form
   - Confidentiality, Code of Conduct, Standard Operating Guidelines Certification and Photo Authorization Form
   - Healthcare Experience/Healthcare Education Form (Medical Volunteer Only)
   - Hospital/Clinic Privilege Form (Medical Volunteer Only)
   - K HELPS ID Badge Form (Information needed for the badge)
2. Criminal Record Check process is complete
3. License information is verified (if applicable)
4. Completes a phone or face-to-face interview with the unit coordinator to determine volunteer interests

MRC Affiliated Volunteer
Volunteers at this level are the first–line of volunteer support during emergencies. Applicants electing this membership are approved in the K HELPS database and issued a K HELPS MRC ID Badge after completion of all of the above PLUS the following basic trainings:

1. **KYDPH Medical Reserve Corps Orientation Training**
   Course Description: Introduces the volunteer to activation, reporting and deactivation procedures and describes the role of the local MRC unit in a public health event or emergency response. It also helps MRC members identify limits to their own skills, knowledge and abilities as they pertain to MRC roles. (about 30 minutes in length). See current training matrix.
2. **KY DPH Medical Reserve Corps – An Introduction to NIMS Training (IS-700)**
   
   Course Description: This course introduces NIMS, explains the purpose, principles, key components and the benefits NIMS (about 45-60 minutes in length). See current training matrix.

3. **ICS – 100 HC Incident Command System for Medical Reserve Corps**
   
   Course Description: This course is designed to give an introduction to the principles, common terminology and position responsibilities when responding to an event using the Incident Command System. The course discusses major ICS functions, responsibilities ICS organizational units, span of control, major incident facilities and the function of each, what an Incident Action Plan is and how it is used and common responsibilities associated with incident assignments. See current training matrix.

**Required Training**

MRC Training is aligned with the Core Competencies established by the Office of the Surgeon General (Appendix C). Training is provided at no cost to the volunteer. MRC Training consists of three levels: Basic, Intermediate and Advanced. The volunteer must complete the above membership process and submit completion certificates for Basic Training to the local MRC unit coordinator before being approved as an MRC affiliated volunteer.

Courses can be completed on-line at [www.mrc.train.org](http://www.mrc.train.org) (Appendix D: MRC TRAIN Instructions). For volunteers without internet access face-to-face training is available at times. CE’S are available for some MRC Trainings on KY TRAIN.

Volunteers are encouraged to further their training beyond Basic. A complete training matrix and course descriptions are included (Appendix E). Volunteers are encouraged to use the matrix to keep track of their training. Completion certificates on all trainings should be submitted to the MRC Coordinator. Courses will not be considered complete until certificates have been submitted to the local MRC Coordinator.

Community Emergency Response Team (CERT) Trainings are available in Woodford County. Please contact the unit coordinator for further information on CERT.

**Just-In-Time Training**

Just-In-Time training will be provided to volunteers responding to an event. This pre-printed information describes the roles and responsibilities of the position the volunteer has been assigned to for an incident. It also details who the volunteer reports to.
Operations

Exercises
Exercises are a way to promote team preparedness. They promote teamwork and most importantly improve incident response. They identify gaps in response efforts. This allows agencies to develop plans for improvement. MRC Volunteers may have the opportunity to participate in exercises in other counties if they desire. Exercises may include the following:

- Call / E-mail Drills: Coordinated to check team availability at a specific time through email or team call down.
- Tabletop Exercise: Simulation of an emergency situation in an informal environment: designed to elicit constructive discussion as participants respond to situations as presented.
- Full Scale Exercise: This is as close to a real disaster as possible. It is a field exercise designed to evaluate the operational capability of emergency management systems in a high stress environment, simulating actual response conditions. This exercise requires the mobilization and actual movement of emergency personnel, equipment and resources. Realism is achieved through on-scene actions, decisions, simulated victims, communication and actual resource allocation. One of the CERT Classes is a Disaster Simulation where the volunteer tests skills learned.

Volunteer Activation
A volunteer should never respond without being activated. Volunteers will be activated by the MRC Coordinator or other authorized person. Activation of the MRC will occur in conjunction with Emergency Management.

- In a true Emergency
  An automated call down system is used (depending on situation the media, e-mail & other methods may be utilized). If you cannot participate no action is necessary by you.
- In a Non-emergency
  E-mail will be the primary means of volunteer activation. If you cannot participate no-action is necessary by you. Newsletters are utilized to keep in contact with volunteers.

The volunteer will be provided with current known information at time of call. This may include:

- Type / Location of incident
- Check in point with Incident Command
- Size-up of incident
- Number of people affected/severity
- General operational plan based on the situation / event
- Equipment / Gear suggested
Authorized persons for activation in Woodford County:

- Woodford County Health Department
- Woodford County Emergency Management

**Identification**

Volunteers are issued a K HELPS MRC Photo ID badge that is recognized statewide. Once activated to respond to an incident, volunteers should wear their ID at all times. It is the volunteer’s responsibility to keep the badge in an easily accessible area. Vests may be issued at response check-in and should be worn as another means of identification if available.

**Valid Operator’s License**

Individuals operating a vehicle as a volunteer will be required to show proof of a valid operator’s license prior to deployment. The license of the volunteer shall be checked at the Emergency Operation Center (EOC) prior to assignment. The Woodford County EOC is located at Fire Station # 2 Big Sink Pike. The alternate site, if Big Sink Pike is involved in the disaster, is the Versailles Police Department. The volunteer will be officially logged in and receive assignment at the EOC.

**Important:** Volunteers are not considered on assignment until officially logged in. This is important and impacts workers compensation if injured and professional liability coverage. This is discussed in more detail in the Risk Management Section.

**Declining An Assignment**

Declining an assignment requires no action of behalf of the volunteer. Only those accepting an assignment should reply to the notification. Due to the numerous calls that would be made and received to coordinate a response effort, do not reply to the call or e-mail unless you are accepting an assignment.

**Accepting An Assignment / Accountability**

A volunteer must be officially logged in and receive assignment before they are considered activated. This is important and impacts workers compensation if injured and professional liability coverage. A volunteer under the influence of alcohol or medication should not respond.

The volunteer must:

- Have a family disaster plan and activate their individual plan
- Ensure that their family and home is secure before responding
- Report to the EOC/Incident Command and officially check-in
- Wear their photo ID badge at all times while activated
- Report as scheduled once an assignment is accepted. Do not accept the assignment if you are not able to respond.
Communications
The volunteer communicates their needs through their team leader or unit coordinator. Volunteers will not be issued individual communication equipment.

Deactivation of Volunteers / Leaving an Incident
Deactivation of volunteers from an incident will be announced by Incident Command down through the chain of command. Volunteers will receive notice of deactivation from their supervisor.

Adhering to the chain of command within the Incident Command structure is extremely important. Incident Command is responsible for knowing who is working on the scene at all times. Should a volunteer need to leave an incident or exercise prior to being deactivated, it is the volunteer’s responsibility to notify their supervisor through the proper chain of command and check out at Incident Command.

Prior to leaving an incident or following deactivation, volunteers should ensure that all equipment is returned to the appropriate agencies.

Rehabilitation
Rehabilitation (rehab) is to ensure the physical and mental condition of volunteers operating at the incident does not deteriorate to a point which affects their abilities or may jeopardize their safety and/or the integrity of the operation. Volunteer needs (i.e. food, water, medication, physical/mental rest) are of utmost importance. Rehab areas will be established for volunteers.

Post Incident Evaluation
The purpose of the post-incident evaluation is to improve future response by evaluating what worked, what didn’t, and what needs to change. After an incident, the lead agency should provide a formal / informal critique of the incident. This evaluation is conducted by a lead response agency following any incident or exercise and includes:

- Review of incident and of the operational plan used during the incident
- Evaluate volunteer response to the incident
- Evaluate volunteer / first responder agency roles

Based on the results of the evaluation, corrective action will be implemented. Corrective action may include providing further volunteer training, revising Standard Operating Guidelines, implementing changes to improve communication and/or addressing equipment failures / needs.

Deployment Outside of County
The primary role of MRC is in its own community. Volunteers, who are willing, able, and have identified a response area outside of Woodford County in their K HELPS profile, have the opportunity to serve other communities in Kentucky or in another state if a large scale emergency occurs. Activation of volunteers would occur in the same manner as listed previously. The decision to activate volunteers will be made after verification of the need for deployment and that the volunteer can conduct their mission...
effectively with minimal risk. The SERV-KY volunteer will be called upon after trained MRC resources are exhausted.

**Risk Management Legal & Liability Issues**

The volunteer must only work within the normal scope of practice of their medical license. The volunteer **must**:

- Work under the buddy system, or within a team, and never alone,
- Wear personal protective equipment (i.e. hard hats, gloves, goggles, mask) as indicated,
- Observe Standard Precautions at all times (Appendix F),
- Maintain basic measures of sanitation and hygiene (Appendix G: “Clean Hands Save Lives”).

**Volunteer Risk**

Woodford County Health Department and Emergency Management intend to minimize and prevent risk to volunteers. Attempts to reduce risks include training, education, and use of universal precautions. Volunteers will be matched accordingly to positions for which they have the skill and qualifications.

Some unanticipated risk possibilities may be present both during a public health emergency and during non-emergency work with direct patient care. The volunteer agrees to assume their own risk as a volunteer. Incidents, accidents, or injuries should be reported to the Woodford County Emergency immediately.

**Confidentiality**

*The following information explains and governs your use and exposure to confidential health information as a Medical Reserve Corps volunteer. If you have any questions about this information you should consult the person supervising your volunteer work or the MRC Unit Coordinator.*

During a volunteer’s involvement with the MRC, they may be privy to sensitive confidential information. Health information that must be kept secure is called Protected Health Information (PHI). The Health Insurance Portability & Accessibility Act (HIPAA) of 1996 establishes in Federal Laws the basic principle that an individual’s medical records belong to that individual and cannot be reused, released or disclosed without the explicit permission of that individual or legal guardian. Protected health, confidential and sensitive information is either information that is protected by law or is of such a personal nature that it is not treated as public record and must be safeguarded.

All information pertaining to personal facts, medical records and/or circumstances seen, obtained and/or overheard in conversation is confidential. All information that may lead to the identification of an individual must also be protected as Patient Health Information. This includes information that can be linked to a specific person through name, identifying number such as social security number, address or phone number. Information may be in the form of a person’s medical records, excerpts from the medical record or conversations that identify an individual. We also identify response activities specifically related to an individual. All are considered confidential.
The identities of individuals a volunteer may see and specific information a volunteer may learn from conversation or observations while responding is confidential. This includes patient identifying information as noted above. Health information must be kept secure.

The volunteer understands they shall not discuss or reveal any personal information or information held by the Woodford County Health Department MRC Unit in an area where unauthorized individuals may see or hear such information including but not limited to an individuals name or other identifying information.

Volunteers understand they shall not access or view any information other than what is required to do their assignment.

The volunteer understands that accessing or releasing confidential information and/or records or causing confidential information and/or records to be accessed or released to them or another individual would constitute a violation of the confidentiality agreement. This may subject the volunteer to civil and/or criminal liability for disclosure of confidential information to unauthorized persons. Violations of confidentiality may subject the volunteer to disciplinary action up to and including dismissal from the team.

The volunteer agrees to abide by the terms of confidentiality as stated above and certify their agreement to these terms by signing and returning the Confidentiality Agreement to the MRC Coordinator.

**Criminal Record Check**

Criminal record checks are conducted on all K HELPS MRC/SERV-KY Volunteers in Kentucky. The local procedure applies.

**Code of Conduct**

All volunteers of the Woodford County Health Department MRC shall meet the Code of Conduct Standards.

**As a MRC volunteer I shall:**

**Ethical Conduct**

- Maintain and abide by the standards of my profession, including licensure, certification and / or training requirements to support my role.
- Not act in the capacity of a MRC responder, nor present myself as a MRC Volunteer, at any given site without prior authorization / deployment from the Woodford County Health Department or Emergency Management.
- Avoid profane and abusive language and disruptive behavior including behavior that is dangerous to self and others including acts of violence, physical or sexual abuse, or harassment.
- Avoid situations that could be interpreted as a conflict of interest as a volunteer.
- Abstain from the use of county equipment / resources for personal use.
- Abstain from transport, storage and / or consumption of alcoholic beverages/or illegal substances while performing volunteer duties.
• Abstain from responding for duty under the influence of alcohol or illegal substances or under the influence of prescription/non-prescription medication that may influence my ability.

• Abstain from the use of audio or video recording equipment, unless authorized.

• Keep contact information current in the KHELPS Database.

Safety

• Put safety first in all volunteer activities.

• Dress for the environment. Wear closed toe shoe-wear if activated.

• Respect and use all equipment appropriately.

• Promote healthy and safe work practices.

• Take care of self and others.

• Report injuries, illnesses, and accidents to the appropriate staff member.

Respect

• Respect the cultures, beliefs, opinions, and decisions of others although I may not always agree.

• Treat others with courtesy, sensitivity, tact, consideration, and humility.

• Accept the chain of command and respect others regardless of position.

As a Volunteer I shall not:

• Deploy/respond to an event without being activated.

• Comment, answer questions or divulge any information to the media.

• Accept or seek on behalf of myself or any other person, any financial advantage or gain as a result of my volunteer’s affiliation with the MRC / SERV-KY.

• Publicly use any MRC affiliation in connection with the promotion of partisan politics, religious matters, or positions on any issue.

• Disclose or use any confidential information that is available solely as a result of the volunteer’s affiliation with MRC to any person not authorized to receive such information.

• Knowingly take any action or make any statement intended to influence the conduct of the unit 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.

• Authorize the use of or use for the benefit or advantage of any person, the name, emblem, services, or property of the MRC, except in conformance with MRC Policy.
**Media Relations**

During a disaster, the Public Information Officer (PIO) (see NIMS definitions Appendix B) - as specified through Incident Command - is authorized to speak to the media. Members of the MRC should **not** provide any information to the media nor answer any media questions. MRC members are instructed to refer the press to their supervisor (who will reference the PIO), rather than provide opinions or information. The supervisor will know who the PIO is.

Volunteers should be aware that media might intercept personal two-way radio signals. Care should be exercised to protect patient confidentiality when using two-way radios.

**Volunteer Insurance**

Volunteers are encouraged to check the limitations of their own insurance policies related to coverage in volunteer service. The Kentucky Commission on Community Volunteerism and Service offers volunteer insurance. Go to [http://chfs.ky.gov/dfrcvs/kccvs/insurance.htm](http://chfs.ky.gov/dfrcvs/kccvs/insurance.htm) for more information or call (502) 564-7420 or (800) 239-7404.

**Kentucky Good Samaritan Law**

Kentucky's *Good Samaritan Law* states in KRS 411.148 that no physician, nurse, EMT, person CPR certified or any board of education employee shall be liable in civil damages for administering emergency care or treatment at the scene of an emergency outside of a hospital, doctor's office, or other place having proper medical equipment excluding house calls, for acts performed at the scene of such emergency, unless such acts constitute willful or wanton misconduct. (2) Nothing in this section applies to the administering of such care or treatment where the same is rendered for remuneration or with the expectation of remuneration. ([http://www.lrc.ky.gov/KRS/411-00/148.PDF](http://www.lrc.ky.gov/KRS/411-00/148.PDF))

However, volunteers should be aware that in 1979 the Office of the Attorney General gave an advisory opinion and questioned the constitutionality of this law under the Kentucky Constitution. ([http://kbn.ky.gov/practice/goodsam.htm](http://kbn.ky.gov/practice/goodsam.htm))

Information on the Kentucky Good Samaritan Act of 2007 can be found at: [http://www.lrc.ky.gov/record/07rs/hb287.htm](http://www.lrc.ky.gov/record/07rs/hb287.htm)

**Professional Liability Coverage**

Professional liability coverage may be extended to volunteers through local county agency policy **but only while acting at the direction of, and within the scope of their duty for the agency**. This coverage is limited to nurses, paramedics and emergency medical technicians. It does **not** cover physicians. The MRC Coordinator has information about professional liability coverage.

**Worker Compensation Coverage**

All MRC Volunteers complete an enrollment form (Form 1) with KY Division of Emergency Management before approval in the K HELPS Database. The MRC Unit Coordinator gives a copy of your form to the County/Regional Emergency Management
Director. This form certifies your participation and eligibility for Worker’s Compensation. Remember: You are not considered under coverage until the MRC has been activated by Emergency Management and you have signed in and received an official assignment at the volunteer mobilizations site. The volunteer mobilization site in Woodford County is Fire Station #2 on Big Sink Pike. Alternate site if Big Sink is damaged in the disaster is the Versailles Police Department. (Workers Compensation Coverage Limitations, Appendix I)

**Denial of Membership**
An applicant may be denied membership for, but not limited to, the following:
- Submitting false information in the K HELPS registration process.
- Results of a Criminal Record Check

**Dismissal from Team**
A volunteer may be dismissed from service for, but not limited to, the following:
- Violation of confidentiality
- Violation of the Code of Conduct/Self-Deployment
- Activity as defined by Criminal Record Check Guidance

The Woodford County Health Department MRC recognizes its responsibility to volunteer staff to assure fair and equal treatment and will not discriminate on the basis of color, religion, sex, age or national origin or against any qualified individual with a disability.
CROSS-TRAINING
What is CERT?
The CERT Program educates people about disaster preparedness for hazards that may impact their area and trains them in basic disaster response skills, such as fire safety, light search and rescue, team organization, and disaster medical operations. Using the training learned in the classroom and during exercises, CERT members can assist others in their neighborhood or workplace following an event when professional responders are not immediately available to help. CERT members also are encouraged to support emergency response agencies by taking a more active role in emergency preparedness projects in their community.

How does CERT benefit the community?
People who go through CERT Training have a better understanding of the potential threats to their home, workplace and community and can take the right steps to lessen the effects of these hazards on themselves, their homes or workplace. If a disaster happens that overwhelms local response capability, CERT members can apply the training learned in the classroom and during exercises to give critical support to their family, loved ones, neighbors or associates in their immediate area until help arrives. When help does arrive, CERTs provide useful information to responders and support their efforts, as directed, at the disaster site.

Why take the CERT Training?
Local government prepares for everyday emergencies. However, there can be an emergency or disaster that can overwhelm the community's immediate response capability. While adjacent jurisdictions, State and Federal resources can activate to help, there may be a delay for them getting to those who need them. The primary reason for CERT Training is to give people the decision-making, organizational, and practical skills to offer immediate assistance to family members, neighbors, and associates while waiting for help. While people will respond to others in need without the training, the goal of the CERT Program is to help people do so effectively and efficiently without placing themselves in unnecessary danger.

Woodford County CERT Class Schedule (Includes MRC)

1. Disaster Preparedness
2. Fire Safety
3. Disaster Medical I
4. Disaster Medical II
5. Search & Rescue
6. Disaster Psychology / Communications
7. Terrorism / Weapons of Mass Destruction
8. Disaster Simulation
9. Intro to Large Scale Clinics / Strategic National Stockpile (SNS) & Intro to National Incident Management System (NIMS)
10. MRC Standing Operating Guidelines & Team Recognition
Appendix A  Incident Command

Incident Command System
Incident Command
Has responsibility for managing the overall response. The PHD will advise the County Judge Executive on pandemic influenza issues. The Woodford County Health & Medical Coordinator is the PHD. The Health & Medical Coordinator sets incident objectives, strategies, and priorities and has overall responsibility of the operation.

ICS Positions use distinct titles:
Incident Commander (The person who will lead)
This person manages the overall response effort including the other functions listed below.

Command Staff Positions Include:
Public Information Officer
Coordinates all incident related public information and works with the media. The Public Information Officer (PIO) is responsible for getting information out to medical providers/ the public and participates in the Joint Information System (JIS).

Liaison Officer
This position serves as the contact person for other agencies involved in the response. The Liaison Officer is responsible to work with community agencies and may represent health and medical at the County Emergency Operations Center (EOC).

Safety Officer
This position is responsible for making sure all response personnel are working under safe conditions.

General Staff include:

- **Operations Section Chief** *(The person who will do the work / carries out the plan)* has responsibility for whatever the agency does in an emergency to respond to community needs. Directs the carrying out of initial response functions, some of which may be delegated to other staff.

- **Planning Section Chief** *(The person who writes the plan & determines options available)* gathers facts and provides current information on the agency situation. Projects short and long term needs for client and agency recovery.

- **Logistics Section Chief** *(The person to provide support and get the resources)* responsible for getting everything operations needs (supplies, personnel) to function to ensure the health and safety of clients, staff and volunteers.

- **Administration/Finance Section Chief** *(The person who will track costs and keep records)* oversees the processing and documenting of all disaster related costs.
SAMPLE Command Structure

Judge Executive

Public Health Director/
Incident Commander

→ Safety Officer
→ PIO Officer
→ Liaison Officer

Operations
Section Chief
Planning
Section Chief
Logistics
Section Chief
Adm. / Finance
Section Chief
Appendix B
National Incident Management System (NIMS) Definitions

- **Command**: The act of directing or controlling resources under the authority of explicit legal or agency authority or delegated authority. May also refer to the Incident Commander.

- **Command Post**: An area where the *Incident Commander* can optimally see at least two sides of the incident and where on scene personnel can find and communicate face to face with the Incident Commander.

- **Command Staff**: Consists of the Public Information Officer (PIO), Safety Officer (SO) and Liaison Officer (LNO). They report directly to the Incident Commander.

- **Emergency**: Absent a Presidentially declared emergency, any incident(s), human-caused or natural, that requires responsive action to protect life or property. Under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, an emergency means any occasion or instance for which, in the determination of the President, Federal assistance is needed to supplement State and local efforts and capabilities to save lives and to protect property and public health and safety, or to lessen or avert the threat of a catastrophe in any part of the United States.

- **Emergency Operations Center (EOC)**: The physical location at which the coordination of information and resources to support domestic incident management activities normally takes place.

- **General Staff**: A group of incident management personnel organized according to function and reporting to the Incident Commander. The General Staff normally consists of Operations, Planning, Logistics, Finance/Administration. Each area is managed by a Section Chief.
  - **Operations Section**: Directs all incident tactical resources to accomplish goals and objectives developed by Command. Includes Branches, Divisions and/or Groups, Task Forces, Strike Teams, Single Resources, and Staging Areas.
  - **Planning Section**: Collects, evaluates and disseminates information related to the incident, and prepares and documents the Incident Action Plan. The Section also maintains information on the current and forecasted situation, and on the status of resources assigned to the incident.
  - **Logistics**: Provides services and supplies needed to support incident tactical operations.
  - **Finance/Administration**: Responsible for managing all financial aspects of an incident.

- **Hazards**: Any situation or substance that can harm the health, property, environment, or system operation of persons involved in an incident.

- **Incident**: Any occurrence or event, natural or human-caused, that requires an emergency response to protect life or property. Incidents can, for example, include major disasters, emergencies, terrorist attacks, terrorist threats, wildland and urban fires, floods, hazardous materials spills, nuclear accidents, aircraft accidents, earthquakes, hurricanes, tornadoes, tropical storms, war-related disasters, public health and medical emergencies, and other occurrences requiring an emergency response.

- **Incident Action Plan (IAP)**: An oral or written plan containing general objectives reflecting the overall strategy for managing an incident.
• **Incident Commander (IC):** The individual responsible for all incident activities, including the development of strategies and tactics and the ordering and the release of resources. The IC has overall authority and responsibility for conducting incident operations and is responsible for the management of all incident operations at the incident site.

• **Incident Command Post (ICP):** The field location at which the primary tactical-level, on-scene incident command functions are performed.

• **Incident Command System (ICS):** A standardized on-scene emergency management construct specifically designed to provide for the adoption of an integrated organizational structure that reflects the complexity and demands of single or multiple incidents, without being hindered by jurisdictional boundaries. ICS is the combination of facilities, equipment, personnel, procedures, and communications operating within a common organizational structure, designed to aid in the management of resources during incidents. It is used for all kinds of emergencies and is applicable to small as well as large and complex incidents. ICS is used by various jurisdictions and functional agencies, both public and private, to organize field-level incident management operations.

• **Incident Management Team (IMT):** The Incident Commander and appropriate Command and General Staff personnel assigned to an incident.

• **Incident Types:** Incidents are categorized by five types based on complexity. Type 5 incidents are the least complex and Type 1 the most complex.

• **Joint Information Center (JIC):** A facility established to coordinate all incident-related public information activities. It is the central point of contact for all news media at the scene of the incident.

• **Leader:** The ICS title for an individual responsible for a Task Force or Strike Team.

• **Liaison Officer:** Serves as a point of contact between the Incident Commander and the Agency Representatives of the assisting and cooperating agencies supporting the incident.

• **Logistics:** Providing resources and other services to support incident management.

• **National Incident Management System (NIMS):** A system mandated by HSPD-5 that provides a consistent nationwide approach for Federal, State, local, and tribal governments; the private-sector; and nongovernmental organizations to work effectively and efficiently together to prepare for, respond to, and recover from domestic incidents, regardless of cause, size or complexity. To provide for interoperability and compatibility among Federal, State, local, and tribal capabilities, the NIMS includes a core set of concepts, principles, and terminology.

• **Public Information Officer (PIO):** A member of the command staff that offers information relevant to the incident to the public and media or with other agencies with incident-related information requirements.

• **Rehab:** Safe area near the incident site that provides a means for personnel to break from the action, replenish equipment, and rest.

• **Safety Officer:** Person responsible for monitoring and assessing safety hazards or unsafe situations, and for developing measures for ensuring personnel safety. The Safety Officer may have Assistants.

• **Sector:** An area of operations assigned by the Incident Commander or Operations Officer responsible for strategy and tactics of a special area of the incident.
- **Single Resource:** an individual, a piece of equipment and its personnel complement, or a team with an identified work supervisor that can be used on an incident. (i.e. three dump trucks, each with a driver could be considered a single resource).

- **Span of Control:** The number of individuals a supervisor is responsible for, usually expressed as the ratio of supervisors to individuals. (Under the NIMS, an appropriate span of control is between 1:3 and 1:7).

- **Staging:** A designated area for apparatus and personnel to locate and maintain a state of readiness.

- **Strike Team:** a specific combination of the same kind and type of resources with common communications and a leader (i.e. a team of nurses)

- **Team Leader:** MRC volunteer in charge of a group of volunteers for call trees or in response to an incident.

- **Task Force:** a combination of single resources assembled for a specific tactical need with common communications and a leader (i.e. an EPI, environmentalist, nurses, clerical)
In partnership with the National Association of City and County Health Officials, the MRC Program Office has identified eight core competencies for MRC volunteers. Although these core competencies are not a requirement, they are recommended for all units because they establish a minimum baseline for volunteers that will help them function effectively. These core competencies are appropriate for all volunteers, regardless of background. Competencies for specific medical and health volunteers have not been established at this time.

All active members of a MRC unit, at a minimum, are encouraged to be able to:

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

2. Document that the MRC member has an existing personal and family preparedness plan.

3. Describe the chain of command (e.g., Emergency Management Systems, ICS, NIMS), the integration of the MRC, and its application to a given incident.

4. Describe the local MRC unit’s role in public health and/or emergency response and its application to a given incident.

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

6. Describe the impact of an event on the mental health of the MRC member, responders, and others.

7. Demonstrate the MRC member’s ability to follow procedures for assignment, activation, reporting, and deactivation.

8. Identify limits to own skills, knowledge, and abilities as they pertain to MRC role(s).
How to Create Your Own Learner Record

1. Type “ky.train.org” into the address field of your browser to get to the KY TRAIN site. (Remove the http:// and/or www)

2. Click on “Create Account” which appears underneath the login on the left hand side of the screen. (Should only do this once. If login name or password has been misplaced contact Hardin Stevens at 502-564-4990 Ex 3639 or by email at: hardin.stevens@ky.gov).

3. Fill out all the necessary information on the subsequent pages. Required fields are indicated with a red asterisk (*). Do not hit the “Back” button at any time during the registration process.

4. Answer the secret question at the bottom of the page with an easy-to-remember, one-word answer. In the event that you forget your password, this question will be posed as a security measure during the password retrieval process. Click “Next” when finished.

5. On the resulting page, you will be asked to provide your location, job role and additional professional information. Please select up to 3 professional roles that best match your job description. Some roles may require you to select a specialization from the adjacent drop down menu. If you select “Other,” please type your specialization in the space provided. Click “Next” when finished.

6. MRC Member – Leave this unchecked unless you are a member and Click “Next”.

7. On the resulting page, please select the 3 settings that best fit your work environment. Click “Next” when finished.

8. On the resulting page, additional demographic information will be requested. This information is not required for registration. Click “Continue” to finish registering for TRAIN. You are now free to enter the site.

Note: Learner information can be edited at any time after registration under “My Account” of the My Learning Record. It is important to keep this information current.

How to Edit Your Learner Record

1. Log on to the TRAIN site.

2. From the home page, click “My Account” from the “My Learning Record” box located on the right hand side of the page.

3. On the resulting pages, update information as needed (including your password, if desired) by clicking on either the “Details” or “My Profile” tab.
HOW TO REGISTER FOR COURSE, COMPLETE EVALUATION
AND RECEIVE CONTACT HOUR(S) OR CERTIFICATE OF ATTENDANCE

- Logon to: ky.train.org (remove the http:// and/or the www)
- Enter the Login Name and Password that you established as you registered as a T.R.A.I.N. learner.
  - (If you have not registered as a T.R.A.I.N. learner click the Create Account and follow the Becoming an Initial User instructions that are attached.)
  - If an account has been set up, but have misplaced Login Name or Password contact: Hardin Stevens at 502-564-4990 Ext 3639, E-Mail: hardin.stevens@ky.gov
- Click the Login button
- Enter the Course ID Number in the “Search By Course ID” box on the right side of the Homepage
  - This number should be provided to you by the Course Provider.
- Click the title of the course/offering
- Click the Registration Tab
- Select from the Credit Type dropdown the appropriate credit type (Do not choose “None”).
- Click on the Register button to the right of the session location. (Screen will refresh)
- Click on the Home Tab
- Click on My Learning under the My Learning Record to confirm that registration went through.
  (Course(s) you are currently registered for will appear in center of page.)

TO MARK COURSE AS COMPLETE:
After completion of course/offering return to your TRAIN account.

- Click on “My Learning” under the “My Learning Folder”.
- Click on the [(M)] beside of the course title that you completed.
- Click on “Completed”
- Click “Start Evaluation “ to complete it
- Return to the Homepage
- Click on the “Certificate” folder
- Click on the title of the course and you may view/print the Certificate

If course provider verified your attendance before you mark yourself complete there will be the text “There Are Pending Evaluations” above the “My Learning Record”, click on it to access the evaluation.

TO WITHDRAW FROM A COURSE:
Login to T.R.A.I.N. and click on My Learning under the My Learning Folder.
Click on the [(M)] beside of the course that you wish to withdraw, click “Withdraw”, OK and Back.
HOW TO LAUNCH AN ONLINE MODULE

• Logon to:  ky.train.org (remove the http:// and/or the www)
• Enter the Login Name and Password that you established as you registered as a T.R.A.I.N. learner.
  o  (If you have not registered as a T.R.A.I.N. learner click the Create Account and follow the Becoming an Initial User instructions that are attached.)
  o  If an account has been set up, but have misplaced Login Name or Password contact: Hardin Stevens at 502-564-4990 Ex 3639, E-Mail: hardin.stevens@ky.gov
• Click the Login button
• Enter the Course ID Number in the “Search By Course ID” box on the right side of the Homepage
  ▪ This number should be provided to you by the Course Provider.
• Click the title of the course/offering
• Click the Registration Tab
• Select from the Credit Type dropdown the appropriate credit type (Do not choose “None”).
• Click on the Launch button to the right. (Screen will refresh)
• Once the course appears an instructional screen will appear to assist you with navigation through the course module.

For assistance contact the Training Branch staff at: 502-564-4990 or by E-Mail: Hardin.stevens@ky.gov; David Knapp—david.knapp@ky.gov; betsy.mcdowell@ky.gov; VivEllen Chesser—vivellen.chesser@ky.gov; Steve Sieberts—steve.sieberts@ky.gov; Dawn Terry—dawn.terry@ky.gov; Danny Robinson—danny.robinson@ky.gov; Joa Harville—joa.harville@ky.gov; Patricia Brown—patricia.brown@ky.gov
### Volunteer Name

**SERV KY**

### Basic Approved MRC

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To become an approved MRC Team Member, Complete Level 1 Requirements and:

- Background Check Request Form
- Workers Comp Enrollment Form
- Code of Conduct/Confidentiality Agreement
- Phone Interview with MRC Unit Coordinator
- Present current, valid photo ID to MRC Coordinator

### Intermediate MRC

Complete Level 2 Requirements and:

- KY DPH MRC Family Disaster Plan 1009110 0.5 R R 1,2
- KY DPH MRC Psychology of Disaster 1009534 1 R R 6
- MRC Infection Control 1004805 1 O R

### Advanced MRC

*Note: Most Teams Still Under Development*

Complete Level 3 Requirements, Train with ESF-8 Strike Teams as opportunities arise and attend exercises. Volunteer chooses track(s) based on interest/experience. Tracks are as follows:

#### Strategic National Stockpile Team

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### OTHER AVAILABLE COURSES

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<td>IS-800B National Response Framework (NRF)</td>
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<tr>
<td>ICS-300 Intermediate ICS for Expanding Incidents</td>
<td></td>
<td>O</td>
<td>O</td>
<td></td>
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<tr>
<td>ICS-400 Advanced Incident Management System</td>
<td></td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
</tbody>
</table>

* Family Disaster Plan and Risk Communication must both be taken to earn the total of 1.0 Contact Hour.
** Two part course. The first part can be completed on line. For scheduling of the on-site portion in your area, see you MRC Coordinator.
***These courses are offered on occasion in the state. Check with MRC coordinator or visit [http://kyem.ky.gov/training/](http://kyem.ky.gov/training/)

**KEY:**
- **M** = Minimum training an individual should complete to effectively assist during a community response to an event.
- **R** = Recommended training for an individual that will enhance their ability to assist during a community response to an event.
- **O** = Optional training for an individual that will maximize their ability to assist during a community response to an event.

### COURSE DESCRIPTIONS

**SERV**

Requirements for completion of the SERV affiliation are described in this handbook in the K HELPS MRC Membership Section.

**MRC Basic**

**KY DPH Medical Reserve Corps Orientation Training**

Introduces MRC volunteers to activation, reporting and deactivation procedures and describes the role of the local MRC unit in a public health event or emergency response. Also helps MRC members identify limits to their own skills, knowledge and abilities as they pertain to MRC roles. (~60 minutes in length). TRAIN course ID # 1009215.

**KY DPH Medical Reserve Corps – An Introduction to NIMS Training**

“On February 28, 2003, President Bush issued Homeland Security Presidential Directive-5. HSPD-5 directed the Secretary of Homeland Security to develop and administer a National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private-sector, and nongovernmental organizations to work together during domestic incidents.” This course introduces NIMS, explains the purpose, principles, key components and benefits of NIMS. (~45-60 minutes in length). TRAIN course ID # 1009103.
ICS-100 HC Introduction to ICS
Designed to give an introduction to the principles, common terminology and position responsibilities when responding to an event using the Incident Command System. The course specifically discusses major ICS functions and their primary responsibilities, ICS organizational units, span of control, major incident facilities and the function of each, what an Incident Action Plan is and how it is used, and the common responsibilities associated with incident assignments from the Federal disaster response workforce perspective. TRAIN course ID# 1014646

MRC Intermediate
Kentucky Department of Public Health MRC Family Disaster Plan
This module describes the procedure and steps necessary for the MRC member to protect health, safety, and overall wellbeing of themselves, their families, the team and the community. Different types of disasters and how individuals and families can better prepare are described. The module takes approximately 30-45 minutes to complete. This course is a prerequisite for the MRC Risk Communication Training Module.

Kentucky Department of Public Health MRC Psychology of Disaster
This module describes the impact of an event on the mental health of the MRC member, responder and others. This course introduces Psychology of Disaster and takes approximately 45-60 minutes to complete. This is an awareness level course. Objectives: Describe the disaster and post-disaster emotional environment, describe the steps that responders can take to relieve their own stress and those of disaster survivors, identify "Psychological First Aid" concepts, describe Kentucky's Disaster Behavioral Health Assets-Emergency Support Function-8 (ESF-8).

MRC Infection Control
Helps MRC volunteers identify possible infection control hazards and safe practices when working in an environment where bloodborne or airborne pathogens are present.

MRC Advanced
Strategic National Stockpile Team
SNS 100 Introduction, Terms & Concepts/Introduction to the Department Operations Center (DOC)
This first section of this introductory level training will introduce the participant to the Strategic National Stockpile, federal repository of pharmaceuticals and medical supplies for emergencies/disasters. Objectives: Define the Strategic National Stockpile (SNS), describe the concept for communities to receive the SNS, identify SNS contents. Estimated time of completion for this section: 30 minutes.
The Department Operations Center (DOC) section will introduce the participant to the concept of managing an agencies response under the direction of a DOC and how the DOC fits into overall community response. Objectives: State the purpose and function of the Department Operations Center (DOC), describe the difference between the DOC and the Emergency Operations Center (EOC), describe the Incident Command Structure of a DOC and the duties of the staff, describe the operational phases of a DOC activation, state the requirements for DOC location, activation, operations, and deactivation, list the documentation requirements of DOC operations, including After Action Reports (AAR). Estimated time of completion for this module: 30 minutes.
SNS 110 Point of Dispensing (POD) Staff Introductory Level Training / SNS 120 Distribution Node (DN) Staff Introductory Level Training
This section will introduce participants to Points of Dispensing (POD) Operations. The Point of Distribution (POD) module will introduce the participant to the concepts associated with distributing emergency supplies to communities. Objectives: Describe the purpose of a Point of Dispensing (POD), discuss when it may be necessary to open a POD, define the goal of a POD, recommend an Incident Command Structure (ICS) for the organization of POD staff, recommend minimum job functions for a POD, recommend job action sheets (JAS) for POD functions, identify a possible POD flow diagram. Estimated time of completion for this module: 30 minutes.

This section will introduce participants to the Distribution Node (DN) and its function in the distribution of emergency supplies. The Distribution Node (DN) module provides awareness level training on the receipt, storage, and distribution of SNS assets. Objectives: Describe a Distribution Node (DN), list events that could cause a DN to be utilized, summarize the purpose of a DN, and describe job functions in a DN. Estimated time of completion for this module: 30 minutes.

SNS 210 Dispensing (Level 2 Jurisdictional)
AVAILABLE

SNS 220 Distribution Node (Level 2 Jurisdictional)  
This course is currently under development and will be available soon.

SNS-300 Management Considerations
This course is currently under development and will be available soon

Special Medical Needs Shelter (This training track is currently under development and will be available soon. Further information will be provided to volunteers when courses are available).  
100 Special Medical Needs Shelter  
200 Special Medical Needs Shelter

Environmental Health (This training track is currently under development and will be available soon. Further information will be provided to volunteers when courses are available).

Epidemiology (This training track is currently under development and will be available soon. Further information will be provided to volunteers when courses are available).

Other Available Courses

Public Health Orientation
The module is an efficient tool to orient and train employees on the history, vision, and mission of Public Health, the Core Functions of Public Health, and the 10 Essential Services of Public Health. Because as many as 45% of the Public Health workforce may retire by 2008, Public Health Departments will be facing the orientation of many employees. To assure a competent workforce, able to achieve Public Health Goals and deliver Essential Public Health Services, Public Health must find a way to orient these
employees as effectively and efficiently as possible. An online orientation/training module offers Public Health a method to accomplish this task.

KY DPH Pandemic Influenza: Kentucky’s Response – Awareness Level
This is an awareness level training providing an overview of the current knowledge of past pandemics, and Kentucky’s response to these events. Information about the current state of “bird flu” around the world is available, as well as links to Kentucky’s preparedness plan. Also included are measures individuals and families can take to decrease their exposure to a possible outbreak and how to develop a personal preparedness plan.

MRC Category “A” Agents
The module identifies category "A" biological agents, their signs, symptoms and treatments. The module also discusses emergency infections and their possible threat. Objectives: Discuss three emerging infections and their possible threat, and identify Category A Biological agents, their signs/symptoms and treatments.

Death Registration
The module is for physicians, dentists, chiropractors and coroners. The Death Registration Made Easy Module is designed to facilitate an understanding of proper completion of a death certificate in a timely manner; as well as to create an understanding of the importance of collecting accurate information.

Psychological Impact of Disasters & Catastrophic Events
This is a 2 part course. The first part must be completed on-line on TRAIN. The second part is in the classroom. The ON-LINE COURSE and EVALUATION MUST be completed BEFORE attending a FACE-TO-FACE training. You MUST bring your certificate from the module to be admitted to the face-to-face training.

This training will include information on the following topics: types of trauma caused by disaster, phases of disaster, and risk factors that make disasters and terrorist events psychologically toxic for survivors and responders. Participants will learn the factors and situations that influence psychological response; assessment of community needs; effects of terrorism before, during and after impact; types of terrorist agents (CBRNE) and the psychological reactions likely with each. Participants will learn the types of crisis intervention and mental health services applicable in the aftermath of disaster and terrorism, and will practice numerous interventions. Recent innovations in service delivery as a result of mass terrorism and disaster will be presented. The Oklahoma City bombing, the September 11, 2001 attacks, Hurricane Katrina, Pandemic Influenza, and Severe Acute Respiratory Syndrome (SARS) will be used as case studies, and students will participate in a variety of small group learning exercises and scenarios.

Kentucky Department of Public Health MRC Risk Communication
This module describes the MRC member’s communication role(s) and processes with response partners, media, general public and others. This awareness level course defines Risk Communication, "The Seven Cardinal Rules of Risk Communication" and "The 10 Deadly Sins of Communication". This course should take approximately 30 minutes to complete.
Objectives: The overall objective of risk communications is to establish and maintain the public confidence by providing information, identify the purpose of Risk
Communication, define the role of the Public Information Officer, list the 10 Deadly Sins of communication.

**IS-200 Single Resources, Incident Action Plan**
ICS 200 is designed to enable personnel to operate efficiently during an incident or event within the Incident Command System (ICS). ICS-200 provides training on and resources for personnel who are likely to assume a supervisory position within the ICS. IS-100 is a pre-requisite to the IS-200 course.

**IS-800 National Response Plan (NRP)**
The National Response Plan, or NRP, specifies how the resources of the Federal Government will work in concert with State, local, and tribal governments and the private sector to respond to Incidents of National Significance. This course introduces you to the NRP, including the concept of operations upon which the plan is built, roles and responsibilities of the key players, and the organizational structures used to manage these resources. The NRP provides a framework to ensure that we can all work together when our Nation is threatened.

**ICS-300 Intermediate ICS for Expanding Incidents**
ICS-300 and ICS-400 courses are courses conducted in a classroom. Both the Emergency Management Institute and the National Fire Academy sponsor NIMS compliant ICS-300 and 400 training. Please contact your local or State's Emergency Management Agency or State Fire Academy for details about when and where these courses will be available. (http://kyem.ky.gov/training/)

**ICS-400 Advanced Incident Management System**
ICS-300 and ICS-400 courses are courses conducted in a classroom. Both the Emergency Management Institute and the National Fire Academy sponsor NIMS compliant ICS-300 and 400 training. Please contact your local or State's Emergency Management
Appendix F

STANDARD PRECAUTIONS

Standard Precautions are basic infection control guidelines for preventing the spread of diseases. These "work practices" should be used in the care of ALL patients ALL of the time—even if they don’t seem sick! Using standard precautions reduces your risk of getting an infection from someone else, whether you know they are ill or not.

*Standard Precautions should be used with every patient AND when you have contact with:*

- Blood
- All other body fluids, secretions and excretions (except sweat), even if you don’t see blood
- Broken skin
- Mucous membranes (like the inside of the eyelids, nose or mouth)
- Dried blood and body fluids, including saliva

**Preventing Disease Transmission**

When you follow standard precautions, you reduce your risk of getting a disease or infection. Whenever possible, you should:

- Avoid contact with blood and other body fluids.
- Avoid touching objects that may be soiled with blood or other body fluids.
- Cover any cuts, scrapes or sores before you put on protective equipment, such as gloves.
- Remove jewelry such as rings and watches before giving care.
- Avoid eating, drinking, smoking, applying cosmetics or lip balm, handling contact lenses, or touching your mouth, nose or eyes when you may be exposed to infectious materials.
- Place barriers between you and a person’s blood or other body fluids using such items as:
  - Disposable gloves
  - Protective eyewear (goggles, glasses, face shield)
  - CPR breathing barriers (CPR mask or face shield)

**Hand Washing is the single most important thing you can do to prevent the spread of infection!!** Wash your hands following contact with blood & body fluids (liquid or dried), broken skin, mucous membranes. (See following page for general information on hand washing and proper hand washing technique).

**Remember:**

- Assume that all patients have a disease or illness that can be spread to you. You cannot tell if a person is infected with a bloodborne disease by their appearance.
- Assume that all blood or body fluids are possibly infected with germs that can make you sick.
- After coming into contact with a patient, avoid touching your mouth, nose, or eyes until you have washed your hands thoroughly. Hand sanitizer may be used.
- If you are involved in any situation involving blood or other potentially infected materials, make sure to avoid getting another person’s blood or body wastes on your skin or mucous membranes by wearing protective equipment.

**To learn more about how to protect yourself while helping others, call your local health department and enroll in a First Aid course.**
Appendix G

Clean Hands Save Lives: Emergency Situations
After an emergency, finding running water can be difficult. However, keeping your hands clean helps you avoid getting sick. It is best to wash your hands with soap and water for 20 seconds. However, when water is not available, you can use alcohol-based hand products made for washing hands (sanitizers).

When should you wash your hands?
• Before preparing or eating food
• After going to the bathroom
• After changing diapers or cleaning up a child who has gone to the bathroom
• Before and after caring for someone who is sick
• After handling uncooked foods, particularly raw meat, poultry, or fish
• After blowing your nose, coughing, or sneezing
• After handling an animal or animal waste
• After handling garbage
• Before and after treating a cut or wound

Using alcohol-based hand sanitizers
When your hands are visibly dirty, you should wash them with soap and water when available. However, if soap and water are not available, use alcohol-based hand sanitizers.
• Apply product to the palm of one hand.
• Rub hands together.
• Rub the product over all surfaces of hands and fingers until your hands are dry.
Note: the volume needed to reduce the number of germs on hands varies by product.

Washing with soap and water
1. Place your hands together under water (warm water if possible).
2. Rub your hands together for at least 20 seconds (with soap if possible). Wash all surfaces well, including wrists, palms, backs of hands, fingers, and under the fingernails.
3. Clean the dirt from under your fingernails.
4. Rinse the soap from your hands.
5. Dry your hands completely with a clean towel if possible (this helps remove the germs). However, if towels are not available it is okay to air dry your hands.
6. Pat your skin rather than rubbing to avoid chapping and cracking.
7. If you use a disposable towel, throw it in the trash.

Remember: If soap and water are not available, use an alcohol-based hand sanitizer.

For more information, visit www.bt.cdc.gov/disasters, or call CDC at 800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).

Also visit www.cdc.gov/cleanhands
## Appendix H  SPANISH QUICK REFERENCE LIST

<table>
<thead>
<tr>
<th>ENGLISH</th>
<th>SPANISH (Español)</th>
<th>PRONUNCIATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>My name is</td>
<td>Mi nombre es ______</td>
<td>(Mee ‘nom-breh es ___)</td>
</tr>
<tr>
<td>What is your name?</td>
<td>¿Cual es su nombre?</td>
<td>(kwahl es soo ‘nom-breh)</td>
</tr>
<tr>
<td>We’re going to help.</td>
<td>Vamos a ayudar</td>
<td>(’vah-mohs ah ah-yoo-dahr)</td>
</tr>
<tr>
<td>Are you in pain?</td>
<td>¿Tiene dolor?</td>
<td>(tee-’eh-neh doh-’lohr)</td>
</tr>
<tr>
<td>Where does it hurt?</td>
<td>¿Donde le duele?</td>
<td>(’dohn-deh le ’dweh-leh)</td>
</tr>
<tr>
<td>Point to where it hurts</td>
<td>Señale donde le duele</td>
<td>(seh-’nyah-’leh ’dohn-deh le ’dweh-leh)</td>
</tr>
<tr>
<td>Do you have a family?</td>
<td>¿Tiene usted familia?</td>
<td>(Tee-eh-neh oo-’stehd fah-’mee-lee-ah)</td>
</tr>
<tr>
<td>Where are they?</td>
<td>¿Donde están?</td>
<td>(’dohn-deh ’ehs-tahn)</td>
</tr>
<tr>
<td>How many in your family?</td>
<td>¿Cuántos hay en su familia?</td>
<td>(’kwahn-tohs hi en soo fah-’mee-lee-ah)</td>
</tr>
<tr>
<td>What is happening?</td>
<td>¿Que pasa?</td>
<td>(keh ’pah-sah)</td>
</tr>
<tr>
<td>Are you tired?</td>
<td>¿Está consado/a</td>
<td>(’ehs-tah kahn-’sa-doh)</td>
</tr>
<tr>
<td>Are you thirsty?</td>
<td>¿Tiene sediento?</td>
<td>(Tee-eh-neh seh-dee-’ehn-toh)</td>
</tr>
<tr>
<td>Are you hungry?</td>
<td>¿Tiene hambre?</td>
<td>(Tee-eh-neh ’ahm-breh)</td>
</tr>
<tr>
<td>Are you cold?</td>
<td>¿Tiene frio?</td>
<td>(Tee-eh-neh free-oh)</td>
</tr>
<tr>
<td>Do you need a telephone?</td>
<td>¿Necesita usted el telefono?</td>
<td>(Neh-seh-’see-tah oo-’stehd ehl the-’leh-fon-noh)</td>
</tr>
<tr>
<td>Do you need a bathroom?</td>
<td>¿Necesita usted el bano?</td>
<td>(Neh-seh-’see-tah oo-’stehd ehl ’bah-nyoh)</td>
</tr>
<tr>
<td>Do you take medicine?</td>
<td>¿Toma usted medicina?</td>
<td>(’toh-meh oo-’stehd meh-dee-’see-nah)</td>
</tr>
<tr>
<td>Do you have medicine with you?</td>
<td>¿Tiene usted su medicina aqui?</td>
<td>(Tee-eh-neh oo-’stehd soo meh-dee-’see-ah)</td>
</tr>
<tr>
<td>Does medicine need to be in the refrigerator?</td>
<td>¿Necesita la medicina estar en el refrigerador?</td>
<td>(Neh-seh-’see-tah lah meh-dee-’see-ah ehs-’tahr en el reh-free-heh-rah-’dohr)</td>
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<tr>
<td>Do you need help?</td>
<td>¿Necesita usted ayuda?</td>
<td>(Neh-seh-’see-tah oo-’stehd ah-’yoo-dah)</td>
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<tr>
<td>Are you sick?</td>
<td>¿Puede usted enfermo?</td>
<td>(’Pweh-deh oo-’stehd ehn-fehr-’moh)</td>
</tr>
<tr>
<td>Can you move?</td>
<td>¿Puede moverse?</td>
<td>(’Pweh-deh oo-’stehd moh-’behr-seh)</td>
</tr>
<tr>
<td>Does it hurt?</td>
<td>¿Le duele?</td>
<td>(le ’dweh-leh)</td>
</tr>
<tr>
<td>Can you breathe?</td>
<td>¿Puede usted respirar</td>
<td>(’Pweh-deh oo-’stehd rehs-’pee-rah)</td>
</tr>
<tr>
<td>Can you see?</td>
<td>¿Puede usted ver?</td>
<td>(’Pweh-deh oo-’stehd behr)</td>
</tr>
<tr>
<td>Can you hear?</td>
<td>¿Puede usado oir?</td>
<td>(’Pweh-deh oo-’stehd oh-’eer)</td>
</tr>
<tr>
<td>Can you talk?</td>
<td>¿Puede usted hablar?</td>
<td>(’Pweh-deh oo-’stehd ah-’blahr)</td>
</tr>
<tr>
<td>Can you walk?</td>
<td>¿Puede usted caminar?</td>
<td>(’Pweh-deh oo-’stehd kah-mee-’nahr)</td>
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<tr>
<td>More slowly!</td>
<td>¡Más despacio!</td>
<td>(mahs dehs-’pah-see-oh)</td>
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<td>ENGLISH</td>
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<td>PRONUNCIATION</td>
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</tr>
<tr>
<td>Again</td>
<td>Otra vez</td>
<td>(‘oh-trah behs)</td>
</tr>
<tr>
<td>Hello</td>
<td>Hola</td>
<td>(‘oh-lah)</td>
</tr>
<tr>
<td>Do you speak English?</td>
<td>¿Habla Inglés?</td>
<td>(ah-blah een-glehs)</td>
</tr>
<tr>
<td>I don’t understand!</td>
<td>¡No entiendo!</td>
<td>(noh ehn-tee-‘ehn-doh)</td>
</tr>
<tr>
<td>I speak little Spanish</td>
<td>Hablo poquito Español.</td>
<td>(‘ah-bloh poh-‘kee-toh ehs-pah-‘noh)</td>
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**Key Words**

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<th>ENGLISH</th>
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<tr>
<td>What</td>
<td>Qué</td>
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</tr>
<tr>
<td>When</td>
<td>Cuándo</td>
<td>(‘kwahn-doh)</td>
</tr>
<tr>
<td>Where</td>
<td>Donde</td>
<td>(‘dohn-deh)</td>
</tr>
<tr>
<td>Who</td>
<td>Quién</td>
<td>(kee-‘ehn)</td>
</tr>
<tr>
<td>Which</td>
<td>Cual</td>
<td>(kwahl)</td>
</tr>
<tr>
<td>Why</td>
<td>Por qué</td>
<td>(pohr keh)</td>
</tr>
<tr>
<td>Because</td>
<td>Porque</td>
<td>(pohr-keh)</td>
</tr>
<tr>
<td>How many?</td>
<td>Cuántos tiene?</td>
<td>(‘kwahn-tohs tee-‘eh-neh)</td>
</tr>
<tr>
<td>Please</td>
<td>Por Favor</td>
<td>(pohr fah-‘bohr)</td>
</tr>
<tr>
<td>Want to</td>
<td>Quiere</td>
<td>(kee’eh’reh)</td>
</tr>
<tr>
<td>Head</td>
<td>La Cabeza</td>
<td>(lah kah-‘beh-sah)</td>
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<tr>
<td>Arm</td>
<td>El brazo</td>
<td>(ehl ‘brah-soh)</td>
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<td>leg</td>
<td>La Pierna</td>
<td>(lah pee-ehr-nah)</td>
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<td>El pecho</td>
<td>(ehl ‘peh-choh)</td>
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<td>El Estomago</td>
<td>(ehl ehs-‘toh-mah-goh)</td>
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<td>La espalda</td>
<td>(lah ehs-‘pahl-dah)</td>
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<td>knee</td>
<td>La Rodilla</td>
<td>(lah roh-‘dee-yah)</td>
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<td>foot</td>
<td>El pie</td>
<td>(ehl ‘pee’eh)</td>
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<td>shoulder</td>
<td>El hombro</td>
<td>(ehl ‘ohm-broh)</td>
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<td>Water</td>
<td>El agua</td>
<td>(ehl ‘ah-gwah)</td>
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<tr>
<td>Food</td>
<td>La Comida</td>
<td>(lah koh-‘mee-dah)</td>
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<tr>
<td>Blanket</td>
<td>La Colcha or Cobija</td>
<td>(lah kohl-chah)</td>
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<tr>
<td>Medicine</td>
<td>La Medicina</td>
<td>(lah meh-dee-‘see-nah)</td>
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<tr>
<td>Glass</td>
<td>El Vaso</td>
<td>(ehl ‘bah-soh)</td>
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<tr>
<td>Coffee</td>
<td>El café</td>
<td>(ehl kah-feh)</td>
</tr>
<tr>
<td>A glass of water</td>
<td>Un vaso de agua</td>
<td>(oon ‘bah-soh day ‘ah-gwah)</td>
</tr>
<tr>
<td>Grandfather</td>
<td>El abuelo</td>
<td>(ehl ah-‘bweh-loh)</td>
</tr>
<tr>
<td>Grandmother</td>
<td>La abuela</td>
<td>(lah ah-‘bweh-lah)</td>
</tr>
<tr>
<td>Mother</td>
<td>La madre</td>
<td>(lah ‘mah-dreh)</td>
</tr>
<tr>
<td>Father</td>
<td>El padre</td>
<td>(lah ‘pah-dreh)</td>
</tr>
<tr>
<td>Boy, Child</td>
<td>El Niño</td>
<td>(ehl ‘nee-nyoh)</td>
</tr>
<tr>
<td>Teenage male</td>
<td>El Muchacho</td>
<td>(ehl moo-‘chah-choh)</td>
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<tr>
<td>Teenage female</td>
<td>La Muchacha</td>
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<tr>
<td>Son</td>
<td>El Hijo</td>
<td>(ehl ‘ee-hoh)</td>
</tr>
<tr>
<td>Daughters</td>
<td>Las Hijas</td>
<td>(lahs ‘ee-hahs)</td>
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### Spanish Quick Reference List continued…

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<tbody>
<tr>
<td>Baby</td>
<td>El Bebe</td>
<td>(ehl beh-'beh)</td>
</tr>
<tr>
<td>Yes</td>
<td>Sí</td>
<td>(see)</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>(no)</td>
</tr>
<tr>
<td>Thank you</td>
<td>Gracias</td>
<td>(‘grah-see-ahs)</td>
</tr>
<tr>
<td>Afternoon</td>
<td>La Tarde</td>
<td>Lah-Tar-deh</td>
</tr>
<tr>
<td>Day</td>
<td>El Dia</td>
<td>El Dee-ah</td>
</tr>
<tr>
<td>Day before</td>
<td>Anteayer o antier</td>
<td>An-the-ah-jer o an-tee-er</td>
</tr>
<tr>
<td>Evening</td>
<td>La Tarde</td>
<td>Lah Tar-deh</td>
</tr>
<tr>
<td>Month</td>
<td>Mes</td>
<td>Mess</td>
</tr>
<tr>
<td>In the morning</td>
<td>En la manana</td>
<td>En-la-mah-nyah-nah</td>
</tr>
<tr>
<td>Next day</td>
<td>Dia siguiente</td>
<td>Dee-ah see-gee-en-the</td>
</tr>
<tr>
<td>Night</td>
<td>Noche</td>
<td>Noh-cheh</td>
</tr>
<tr>
<td>Noon</td>
<td>Medio dia</td>
<td>Meh-de-o dee-ah</td>
</tr>
<tr>
<td>Today</td>
<td>Hoy</td>
<td>O-ee</td>
</tr>
<tr>
<td>Tomorrow</td>
<td>Manana</td>
<td>Man-nyah-nah</td>
</tr>
<tr>
<td>Week</td>
<td>Semana</td>
<td>She-mah-nah</td>
</tr>
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#### Days Of The Week

<table>
<thead>
<tr>
<th>Day</th>
<th>Spanish</th>
<th>Pronunciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Lunes</td>
<td>Loo-ness</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Martes</td>
<td>Mar-tess</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Miercoles</td>
<td>Mee-err-co-less</td>
</tr>
<tr>
<td>Thursday</td>
<td>Jueves</td>
<td>Who-eh-vess</td>
</tr>
<tr>
<td>Friday</td>
<td>Viernes</td>
<td>Vee-err-ness</td>
</tr>
<tr>
<td>Saturday</td>
<td>Sabado</td>
<td>Sah-bah-doh</td>
</tr>
<tr>
<td>Sunday</td>
<td>Domingo</td>
<td>Doh-meen-goh</td>
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</table>

#### Months Of The Year

<table>
<thead>
<tr>
<th>Month</th>
<th>Spanish</th>
<th>Pronunciation</th>
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</thead>
<tbody>
<tr>
<td>January</td>
<td>Enero</td>
<td>Eh-neh-roh</td>
</tr>
<tr>
<td>February</td>
<td>Febrero</td>
<td>Feh-breh-roh</td>
</tr>
<tr>
<td>March</td>
<td>Marzo</td>
<td>Mar-soh</td>
</tr>
<tr>
<td>April</td>
<td>Abril</td>
<td>Ah-breel</td>
</tr>
<tr>
<td>May</td>
<td>Mayo</td>
<td>Mah-joh</td>
</tr>
<tr>
<td>June</td>
<td>Junio</td>
<td>Who-nee-oh</td>
</tr>
<tr>
<td>July</td>
<td>Julio</td>
<td>Who-lee-oh</td>
</tr>
<tr>
<td>August</td>
<td>Agosto</td>
<td>Ah-gos-toh</td>
</tr>
<tr>
<td>September</td>
<td>Septiembre</td>
<td>Sep-tee-ehm-breh</td>
</tr>
<tr>
<td>October</td>
<td>Octubre</td>
<td>Oc-too-breh</td>
</tr>
<tr>
<td>November</td>
<td>Noviembre</td>
<td>Noh-bee-ehm-bre</td>
</tr>
<tr>
<td>December</td>
<td>Diciembre</td>
<td>Dee-pee-ehm-bre</td>
</tr>
</tbody>
</table>

#### Numbers

<table>
<thead>
<tr>
<th>Number</th>
<th>Spanish</th>
<th>Pronunciation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Uno</td>
<td>80 Ochenta</td>
</tr>
<tr>
<td>2</td>
<td>Dos</td>
<td>90 Noventa</td>
</tr>
<tr>
<td>3</td>
<td>Tres</td>
<td>100 Cien</td>
</tr>
<tr>
<td>4</td>
<td>Cuatro</td>
<td>90 Noventa</td>
</tr>
<tr>
<td>5</td>
<td>Cinco</td>
<td>100 Cien</td>
</tr>
</tbody>
</table>
Appendix I

39C.110 WORKERS’ COMPENSATION COVERAGE—Limitations

Local emergency management agencies, including local directors or their deputies, and other local emergency management agency staff personnel and workers, and local emergency management agency-supervised operating units or personnel officially affiliated with the local disaster and emergency services organizations pursuant to KRS 39B.070, paid or volunteer, for the purposes of receiving workers’ compensation benefits paid by the division, shall be covered by those benefits when performing emergency assessment, mitigation, preparedness, response, or recovery functions, with the following limitations:

(1) The local emergency management agencies, including local directors or staff personnel and workers, and local emergency management agency-supervised operating units or personnel, shall not be covered when performing fundraising functions, unless all proceeds of the function are to be dedicated to the administration or operation of the local emergency management agency or operating unit.

(2) No person shall be covered when performing hazardous materials emergency response operations defined in 29 C.F.R. 1910.120 which are above the first-responder operations level, on-scene incident commander level excluded, except as provided in subsection (3) of this section.

(3) A volunteer hazardous materials response team as defined in 29 C.F.R. 1910.120 which meets all provisions of 29 C.F.R. 1910.120(q), operates on a regional basis, and is supervised by a local emergency management agency may, by action of the director pursuant to administrative regulations, be provided Kentucky emergency management workers’ compensation coverage. Such hazardous materials response teams shall take no actions involving environmental clean-up, removal, or transportation of hazardous substances or materials except as may be essential for initial emergency control or initial emergency stabilization when there is a clear and evident risk of harm to people.

(4) No personal shall be covered unless enrolled on a workers’ compensation enrollment form that is filed with the area manager of the division, except when the magnitude of an emergency, or a preparedness exercise activity, is so great that a local director must solicit additional workers. At these times, the local director may develop and maintain a list of workers, to include names, Social Security account numbers, missions assigned, and dates covered, and submit a copy of the list to the area manager within twenty-four (24) hours of the conclusion of the emergency, or the preparedness exercise activity.

Effective: July 15, 1998

Kentucky Division of Emergency Management

WORKERS’ COMPENSATION ENROLLMENT FORM

☐ New Member  ☐ Updated Enrollment

Name (Last) (First) (Middle)

Street / P.O. Box / Route #

(City) (Zip Code) (County)

Social Security Number  DOB

Phone: Home  Work

Sex  Male  Female

Height  Weight  Hair Color  Eye Color

Emergency Services Organization

List any Special Training

Are you presently any of the following?

1. Volunteer Firefighter  ☐ Yes  ☐ No  2. Auxiliary Policeman  ☑ Yes  ☐ No

3. Water Rescue Member  ☐ Yes  ☐ No  4. Cave Rescue Member  ☑ Yes  ☐ No

5. Other:

Signature

Date

DO NOT WRITE BELOW THIS LINE

Date Received in Area Office

KyEMForm 50
Revised: October 2007
FORM 3A: Volunteer Copy

Medical Reserve Corps / SERV-KY
Confidentiality, Code of Conduct, Standard Operating Guidelines Certification

I, ______________________________ certify that I have read & understand the Woodford County Health Department Standard Operating Guidelines/Team Handbook, have had the opportunity to ask questions and agree to comply with the terms set forth therein, including, but not limited to, Confidentiality & Code of Conduct. I will utilize the Incident Command System and will be accountable to my supervisor/team leader during a response event.

I understand that photos of me may be taken during training classes, exercises and other events. I give permission to use any photograph of me in the advertisement/promotion of the local unit. Photos may be used, but not limited to use, in the following ways: Newsletter, newspaper, Woodford County Health Department website or in other publications.

I understand this is an unpaid volunteer position. I agree that as a MRC/SERV-KY Volunteer I may not accept payment for my services and that I will incur transportation costs. If for any reason, my membership ceases with the unit, I agree to return to the MRC Coordinator any equipment issued to me for use in my volunteer service including name badge.

I understand that this signed and dated document will become a part of my volunteer file.

___________________________________           ____________________________
Signature                Date
FORM 3B: Sign and Return to MRC Coordinator

Medical Reserve Corps / SERV-KY
Confidentiality, Code of Conduct, Standard Operating Guidelines Certification

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