Module 1 - Introduction

Objectives

- Identify volunteer roles in MA Responds
- Outline volunteer responsibilities

MA Responds Overview

MA Responds is a centralized volunteer management system that integrates local, regional, and statewide volunteer programs. This system is a partnership of DPH, local Medical Reserve Corps units (MRCs), and other public health volunteers and organizations in Massachusetts. MA Responds' mission is to assist with the recruitment, registration, training, credentialing, and communication across this distributed volunteer network, ensuring that the volunteers are prepared and mobilized in the event of an emergency or natural disaster. All levels of volunteers are needed. (www.maresponds.org)



Roles

Participating volunteer groups in MA Responds, have a wide range of opportunities for volunteers. In addition to healthcare professionals (e.g. physicians, nurses, pharmacists, and crisis counselors), there are many roles for non-health professionals.

Non-health professional volunteers play an important support role and are critical to the success of the emergency response. Examples of roles for non-health professional volunteers include:

- Providing administrative and clerical support
- Registering patients
- Transport of supplies and messages
- Interpreting for non-English speaking patients
- Assisting with patient flow through an immunization clinic

The coordination of volunteers during emergencies is critically important to ensure the quality of assistance delivered, and the safety of the workforce.

It is very important that when you are assigned a task, that you do that work, even if you think your skills and expertise are better suited for a different task.

Responsibilities

As a MA Responds volunteer it is essential that you report when and where instructed. NEVER self-deploy.

MA Responds volunteers are responsible for:

Reading and signing the MA Responds Terms of Service and the Privacy Policy

- Attending the <u>incident orientation</u> at the time of the event
- Keeping <u>your registration profile</u> up to date at all times
- Participating in <u>drills and exercises</u> when possible
- Understand and communicate within the chain of command established by <u>ICS</u>
- Maintaining patient confidentially as specified in the <u>HIPAA Act and the Privacy</u> <u>Policy</u>
- Knowing how to access and use the equipment and supplies necessary to perform your role during an event



Incident orientation

When you arrive on the scene, you may need an orientation or training on a specific aspect of the emergency. This training will take place at the site itself and will provide information about the nature and extent of the emergency.

Registration profile

When you register with MA Responds, you will provide information on how to be contacted during an emergency, other emergency response commitments you may have, credentialing information, specific skills or competencies you possess, and the duration and location of volunteer opportunities you would be interested in participating in. You may change this profile at any time, and will also be required to update it periodically.

Drills and exercises

Drills and exercises are mock events that help volunteers understand and practice their roles in an emergency response. Drills and exercises are often conducted with representatives of local public health, hospitals, police, fire, ambulance services, and others who may be involved in the response to an actual emergency.

Volunteers who participate in a drill or exercise should be active participants and respond as if the event were real. In this way, they will better understand their roles and potential problems before a real emergency occurs.

<u>ICS</u>

The Incident Command System (ICS) is the system used to *command, control,* and *coordinate* the efforts of individual agencies as they work towards the common goal of stabilizing an emergency in an effort to protect life, property and the environment. ICS uses principles that have been proven to improve efficiency and effectiveness and applies these principles to emergency response.

HIPAA Act

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires that personal health information be kept confidential. You cannot pass on health information of any sort to anyone who does not have a specific need to know, and usually you must have the patient's permission to discuss this information.

In a public health event, it remains important that volunteers are careful not to talk about the patients, their illnesses or injuries, how they were hurt, or any other information, unless the information is specifically needed by the patient's health care provider to treat the patient or may impact the health and safety of others.

Summary

- Participating volunteer groups in MA Responds include healthcare professionals and non-health professionals
- MA Responds volunteers report when and where instructed, and know key responsibilities including
 - Reading and signing the MA Responds Terms of Service and the Privacy Policy
 - Attending the incident orientation at the time of the event.

Test Your Knowledge:

1.1	What types of roles can non-health professional volunteers fulfill? Choose one
	reply.
	1. Transporting supplies and recording patient details
	2. Providing administrative and clerical support
	3. Registering patients and taking initial information
	4. Dispensing medication and documenting in records
	5. Providing patient discharge details and information
1.2	As a MA Responds volunteer you will be responsible for: (Choose one reply.)
	1. Keeping your registration profile up to date at all times
	2. Maintaining patient confidentially as specified in the HIPAA Act
	3. Attending necessary incident orientations when you volunteer
	4. Participating in drills and exercises when possible
	5. All of the above

Correct Answers

1.1: 2

1.2: 5

Module 2 - Public Health Preparedness

Objectives

- Define a public health emergency
- List examples of types of public health events and emergencies

Overview

Protecting the public from health threats involves *public health preparedness* as well as *medical preparedness*. Both are essential for national health security and, hence, to the overall preparedness of the nation.

- Public health preparedness is the ability of the *public health system*, community, and individuals to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those in which scale, timing, or unpredictability threatens to overwhelm routine capabilities.
- **Medical preparedness** is the ability of the *health care system* to prevent, protect against, quickly respond to, and recover from health emergencies, particularly those whose scale, timing, or unpredictability threatens to overwhelm routine capabilities.

Public health threats can take many forms. They can result from a natural phenomenon such as a hurricane or tsunami, or they can be caused by human acts such as a large accident or terrorist event. Regardless of their origin, all public health emergencies have certain similar basic medical and public health consequences. However, the degree to which the emergency may impact the medical and public health infrastructure of a community or region may vary. Additionally, you may be called to serve during other public health events such as a flu pandemic, disease outbreak, or other community health related events.

The core of Massachusetts' public health emergency response is comprised of an indispensable group of volunteers willing to offer their time and experience during times of crisis. Everyone who is involved in planning and responding to a emergency, from the medical personnel on the front lines to the non-health professional volunteers, plays an important role and can have a major impact on helping victims and their families.



Definition of a Public Health Emergency

A Public Health Emergency is defined as an actual or imminent threat of injury, illness or health condition that is detrimental to public health and whose actual or reasonably suspected causes may include but are not limited to natural disaster; fire; bioterrorism; terrorism; outbreak of an infectious disease; chemical attack or accidental release; nuclear attack or accident; or any other circumstance that poses a serious danger to public health or to a substantial number of people.



Types of Emergencies

Emergencies can be categorized as follows:

- Natural
- Human-made or technological
 - Unintentional
 - o Intentional

Natural Disasters

A natural disaster is a destructive change in the environment caused by natural phenomena. Some natural disasters are easily predicted, others happen without warning.

Natural disasters can include the following:

<u>Geological</u>

- Earthquakes
- Landslides
- Tsunamis
- Volcanoes

Weather

- Tornadoes
- Hurricane/cyclones
- Floods
- Blizzards and Ice Storms
- Heat waves
- Droughts

Public Health Emergencies

- Infectious disease outbreaks
- Food-borne illnesses
- Water-borne illnesses or contamination



Preparing for Natural Disasters

Planning what to do in advance is an important part of being prepared. It's important to find out which natural disasters are most common in your area. You may be aware of some of your community's risks; others may surprise you. People who understand disasters and know what to do before and after a disaster hits, can help to significantly reduce disaster related deaths and property damage.

Accidental Events

Accidental events are unplanned events that imperil life and property such as:

- Airplane or train crashes
- Hazardous material spills
- Building fire or collapses
- Nuclear power plant incidents



MA Responds Orientation Course: September 2021

Intentional - Human-made or Technological Events

Intentional events include war, acts of terrorism and other threats to national security including the use of CBRNE agents. CBRNE stands for:

Chemical Biological Radiation Nuclear Explosives

CBRNE may also be referred to as weapons of mass destruction (WMD). These types of emergencies increasingly threaten the health and safety of people worldwide.

References and Resources

Emergency Preparedness and Response CDC https://emergency.cdc.gov/

Are You Ready? www.fema.gov

Be Informed <u>https://www.ready.gov/be-informed</u> Ready America, U.S. Department of Homeland Security

Summary

- Protecting the public from health threats involves *public health preparedness* as well as *medical preparedness*.
- Emergencies can be categorized as
 - Natural
 - Human-made or technological
 - Unintentional
 - Intentional

Test Your Knowledge

2.1	All public health emergencies result in similar basic medical and public health consequences regardless of their origin.
	□ 1. True
	□ 2. False
2.2	What are examples of <i>natural</i> disasters? Choose one reply.
	1. Tsunamis, dirty bombs, and landslides
	2. Droughts, tornadoes, and hazardous material spills
	3. Volcanoes, sarin nerve gas attacks, and rockslides
	4. Bacterial meningitis outbreaks, floods, and volcanoes
	5. Electrical outages, seasonal flu, and chemical attacks
2.3	Match the definition with the correct term.
	DEFINITIONS
	1. A destructive change in the environment by natural phenomena
	2. An accidental event that imperils life and property
	3. Weapons of mass destruction threatening the world's population
	4. An event that can include war, terrorism, and threats to national security
	TERMS
	A. Unintentional Disaster
	B. Intentional Disaster
	C. Natural Disaster
	D. CBRNE

Correct Answers

2.1: 1

2.2: 4

2.3: 1-C, 2-A, 3-D, 4-B

Module 3 - Incident Command System - ICS

Objectives

- Explain the benefits and key roles of an Incident Command System (ICS)
- List five functions of the ICS

Overview

The Incident Command System (ICS) is the system used to *command, control,* and *coordinate* the efforts of individual agencies as they work towards the common goal of stabilizing an emergency in an effort to protect life, property and the environment. ICS uses principles that have been proven to improve efficiency and effectiveness and applies these principles to emergency response.



ICS and Volunteer Responders

 The ICS system establishes who has authority and what role they fulfill in an emergency or disaster situation. Most responders will find this system more rigid than what they are used to. The main goals are establishing control, coordinating communication and ensuring safety. This section provides the overall principles of the ICS system; in an actual response situation it is essential that you follow the chain of command on-site.

Benefits of ICS

The following are some of the key benefits for using ICS:

- Establishes a predictable chain of command
- Provides a manageable span of control
- Clearly delineates roles and responsibilities
 - Uses standard or common terminology to ensure clear communication
- Manages all communications at a scene through a common plan



Common Problems in Emergencies

During emergencies, problems often occur because facility and management systems that work well on a day-to-day basis cannot effectively meet the additional needs.

Many problems involve communications including:

- Lack of accurate facts and information
- Failure to share the right amount of information
- Overload or failure of communications equipment
- Miscommunication with the media or the public

Other problems may include:

- Lack of clearly defined leadership and chain of command
- Large groups of volunteers arriving without being asked to do so
- Large numbers of news media and others seeking information

Emergency Operations Center - EOC

An Emergency Operations Center (EOC) is generally the physical location where administrators and supervisors gather during an emergency to make decisions about response activities. Before an emergency, the room or area that will serve as the EOC will be set up with needed supplies, allowing the emergency team to act quickly when an actual event occurs.

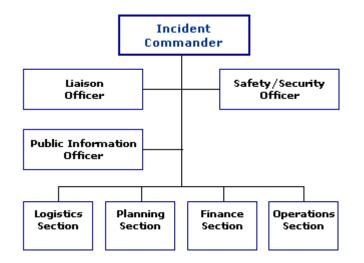
Each facility or emergency site will have a procedure for activating its EOC. Once activated, the incident management team will report to the EOC and work together to manage the situation. A fully functional EOC may have the following functional areas: command, operations, planning, logistics and finance.



ICS Organizational Structure

ICS divides an emergency response into five manageable functions essential for emergency response operations: Command, Operations, Planning, Logistics, and Finance and Administration.

The basic structure of ICS is the same regardless of the type of emergency. The ICS structure will reflect the magnitude of the event; depending on the size of the event, all positions may not be filled.



The Incident Commander (IC) or the **Unified Command** (UC) is responsible for all aspects of the response, including developing incident objectives and managing all incident operations.

The **Public Information Officer's** role is to develop and release information about the incident to the news media, incident personnel, and other appropriate agencies and organizations.

The **Liaison Officer's** role is to serve as the point of contact for assisting and coordinating activities between the IC/UC and various agencies and groups. This may include Congressional personnel, local government officials, and criminal investigating organizations and investigators arriving on the scene.

The **Safety Officer's** role is to develop and recommend measures to the IC/UC for assuring personnel health and safety and to assess and/or anticipate hazardous and unsafe situations. The Safety Officer also develops the Site Safety Plan, reviews the Incident Action Plan for safety implications, and provides timely, complete, specific, and accurate assessment of hazards and required controls.

The **Operations** Staff is responsible for all operations directly applicable to the primary mission of the response.

The **Planning** Staff is responsible for collecting, evaluating, and disseminating the tactical information related to the incident, and for preparing and documenting Incident Action Plans (IAPs).

The Logistics Staff is responsible for providing facilities, services, and materials for the incident response.

The **Finance and Administrative** Staff is responsible for all financial, administrative, and cost analysis aspects of the incident.

What this Means for You

If you are activated, you will need to follow the chain of command that has been set up through ICS. You may not be working for your day-to-day supervisor and you may be working at a different location. You will be assigned to appropriate tasks based upon your skills and what is needed. You may not be doing your usual job; someone else may be fulfilling it. You should do what you are assigned to do and only what you are assigned. The most important thing for you to remember is to follow the chain of command and do as you are told.



National Incident Management System - NIMS

ICS is part of the National Incident Management System also called NIMS.

NIMS was developed in 2004 by the Department of Homeland Security (DHS) under the direction of the president. NIMS integrates effective practices in emergency preparedness and response into a *nationwide* framework to enable all government, private-sector, and nongovernmental organizations to work together during domestic incidents.

» The following courses may be taken online and are recommended but not required for all individuals involved in emergency response:

IS-100.c, Introduction to Incident Command System, ICS 100

IS-700.a, National Incident Management System (NIMS), an Introduction

Hospital Incident Command System - HICS

The Hospital Emergency Incident Command System (HICS) is an emergency management system used to help health-care facilities and hospitals coordinate their own response to emergencies. It is a flexible system that sets up a chain of command, defines roles and responsibilities and helps coordinate efforts with other emergency responders in the community.

The link for the HICS course is:https://emsa.ca.gov/disaster-medical-services-division-hospital-incident-

command-system-resources/

References and Resources

IS-100.b, Introduction to Incident Command System, ICS 100 FEMA http://training.fema.gov/EMIWeb/IS/IS100b.asp

IS-700.a, National Incident Management System (NIMS), an Introduction FEMA http://training.fema.gov/EMIWeb/IS/is700a.asp National Incident Management System FEMA http://www.fema.gov/nims/

Summary

- The Incident Command System (ICS) is the system used to *command, control,* and *coordinate* the efforts of individual agencies as they work towards the common goal of stabilizing an emergency in an effort to protect life, property and the environment.
- Key benefits for using ICS:
 - Establishes a predictable chain of command
 - Provides a manageable span of control
 - Clearly delineates roles and responsibilities
 - Uses standard or common terminology to ensure clear communication
 - Manages all communications at a scene through a common plan

Test Your Knowledge

3.1	The Inc	ident Command System (ICS) requires that
		 when you are activated, you will be doing the job you usually do to avoid confusion or mistakes
		If you are activated, you should do what you are assigned and offer to help anyone needing assistance
		3. An ICS system controls, commands, and coordinates towards the goal of stabilizing an emergency.
		Each state designs an ICS that will account for regional differences rather than copy the National Incident Management System.
		All ICS systems are part of the Hospital Emergency Incident Command System (HICS)

3.2	Match the ICS function with the correct definition. ICS FUNCTION	
	□ Incident Commander	
	Operations Staff	

r	
	Finance and Administrative Staff
	Planning Staff
	Logistics Staff
	DEFINITIONS
	 Responsible for collecting, evaluating, and disseminating the tactical information related to the incident.
	B. Responsible for all aspects of the response, including developing incident objectives and managing all incident operations.
	C. Responsible for providing facilities, services, and materials for the incident response.
	D. Responsible for all operations directly applicable to the primary mission of the response.
	E. Responsible for all fiscal, clerical, and cost analysis aspects of the incident.
3.3	What are characteristics of an Emergency Operations Center (EOC)?
	 1. Non-health professional volunteers are not allowed in the EOC because they cannot lead efforts.
	2. All facilities or emergency sites must use the same procedure when they activate their EOC.
	3. The location of the room that will serve as the EOC will not be disclosed until it is activated.
	4. The EOC is a physical location where administrators and supervisors gather to make decisions.
	5. A fully operational EOC requires only the core functional areas of command and operations.
·]	

Correct Answers

3.1: 3

3.2: 1-B, 2-D, 3-E, 4-A, 5-C

3.3: 4

Module 4 - Crisis and Emergency Risk Communication

Objectives

- Describe crisis and emergency risk communication
- Define the role of the public information officer

Overview

The CDC defines crisis and risk communication as...

"... the attempt by science or public health professionals to provide information that allows an individual, stakeholders, or an entire community to make the best possible decisions during a crisis emergency about their well being. Often this communication must be done within nearly impossible time constraints and requires public acceptance of the imperfect nature of the available choices for action."

Source: Center for Disease Control and Prevention. Crisis and Emergency Risk Communication Course.



Pre-event Communication Planning

Planning before an emergency occurs will help ensure the ability to communicate effectively during a crisis. As part of the response, a Public Information Officer (PIO) will be identified who will serve as a spokesperson for the event. The spokesperson's role will be to develop and release information about the incident to the news media, incident personnel, and other appropriate agencies and organizations.

Communications: Volunteer Roles and Responsibilities

The PIO is the *only person who should talk directly to the media*. If you are approached by a member of the press or media, refer them to the PIO. The PIO will be a skilled communicator who is trained to deal with the media; this individual must convey credibility and trust while communicating vital information about the crisis at hand.

As a volunteer, you will be in a unique position to hear rumors or misinformation that may be circulating. If you do hear misinformation developing, you should inform the PIO so that the message can be corrected to the public.

In an emergency you will play a critical role communicating risk to your patients and their families. It's important for you to communicate information in a clear, concise,

and credible manner. Your ability to express empathy is extremely important. *People need to know that you care before they care what you know.*

As always, respect patient confidentiality. Private medical information must remain private. Refer to the MA Responds Privacy Policy and the HIPAA Act for more information.



Summary

- The CDC defines crisis and risk communication as...
 - "... the attempt by science or public health professionals to provide information that allows an individual, stakeholders, or an entire community to make the best possible decisions during a crisis emergency about their well-being. Often this communication must be done within nearly impossible time constraints and requires public acceptance of the imperfect nature of the available choices for action."
- Planning before an emergency occurs will help ensure the ability to communicate effectively during a crisis. As part of the response, a Public Information Officer (PIO) will be identified who will serve as a spokesperson for the event.

Test Your Knowledge

4.1	A function of the MA Responds system is to provide information that allows an individual, stakeholders, or an entire community to make the best possible decisions during a crisis emergency about their well- being. 1. True 2. False	
4.2	As a volunteer, what should you do if you are approached by the press	
	or media personnel?	
	1. Respond in a clear and credible manner in plain English	
	2. Correct misinformation or rumors that you have heard	
	3. Refer the press or media to the Public Information Officer	
	4. Explain about the role you play on the team and your duties	
	5. Provide your email to ensure that quotes are correct.	

Correct Answers

4.1: 1

4.2: 3

Module 5 - Personal Preparedness

Objectives

- Prepare yourself and your family in the event of an emergency
- Recognize ways to help individuals in your family requiring additional assistance affected by a public health event

Overview

Before an emergency occurs, you will want to make sure that you have prepared a personal plan for your family to ensure that they are prepared for any emergency situation. Knowing that your family is prepared and taken care of may reduce your concerns about leaving them and improve your ability to report to work when needed.

Four Steps to be Prepared

You will be better able to cope with an emergency by preparing in advance and working with your family. Follow the four steps to be prepared:

- 1. Get informed
- 2. Create a personal emergency plan
- 3. Assemble a Emergency Supplies kit
- 4. Maintain your plan and kit



1. Get Informed

You should understand the risks you may face and what you can do to protect yourself and your family.

- Find out what types of disasters are most likely to occur in your community.
- Learn about your community's response plans, evacuation plans, and locations of emergency shelters.
- Learn about your community's warning signals and what you should do when you hear them.
- Find out about the emergency plans at work, your children's school or daycare, and other places where your family spends time.



2. Create a Personal Emergency Plan

Make sure that you involve all members of your family when you create your personal emergency plan. It should be as simple as possible and include:

- Where to meet. Choose two locations -- one should be near your home; the other should be outside of your neighborhood in case you can't return home.
- Who to contact. Choose an out-of-town contact. Family members should call this person and let them know where they are. Everyone should know the contact's phone number.
- **An escape route.** Everyone in your family should know the best escape routes out of your home as well as where the safe places are in your home for each type of emergency.
- **Plan for the care of others.** Make special arrangements for the care of children, elderly, and disabled family members as well as pets.

See Appendix 3.2 on Page 31 for a list of items to prepare for before an emergency.



3. Assemble an Emergency Supplies Kit

An emergency supply kit is a collection of basic items a family would need to stay safe during and after an emergency.

- Your supply kit should cover the needs for your entire family for *at least three days.*
- Keep your supplies in portable containers such as duffle bags or plastic storage boxes.
- Renew and reorganize the contents of your supply kit every six months.



Contents of an Emergency Supplies Kit

Your supply kit should contain the following items:

- Water 1 gallon per person per day
- **Food** nonperishable items such as canned goods
- First Aid and Medical Supplies –bandages, latex gloves, glasses/contacts and medications
- Clothing and Bedding blankets and clothing for each family member
- **Emergency Tools and Supplies** such as battery powered radio, money and credit cards
- **Sanitation Supplies** toilet paper, personal hygiene products, etc.
- Special Supplies items needed by adults, infants, elderly or disabled persons, and pets

See Appendix 3.2 on Page 31 to see a complete list of supplies that you should include in your kit.

4. Practice and Maintain your Plan

Every six months you should:

- Review your plan and quiz your family on what to do.
- Conduct fire and emergency evacuation drills on a regular basis.
- Replace stored water every 3 months and food every six months.
- Test your smoke and Carbon Monoxide alarms monthly and change batteries at least once a year.
- Test and recharge your fire extinguisher(s) according to the manufacturer's directions.



Considerations for Individuals with Access or Functional Needs

Emergency situations such as acts or terrorism and natural disasters pose a real challenge for the millions of Americans who have access issues or functional disabilities. It is important for people who require additional assistance and their families to prepare for an emergency.

If you or someone in your family requires additional assistance, you should:

- Create a support network to help in an emergency.
- Tell the people of their support network where emergency supplies are located.
- Give one member of the support network a key to the individual's house or apartment.
- Contact local city or county government's emergency information management office. Many local offices keep lists of people with disabilities so they can be located quickly in a sudden emergency.
- Make sure the individual wears medical alert tags or bracelets to help identify their disability.
- Know the location and availability of more than one facility if the individual is dependent on dialysis or other life sustaining treatment.
- Show others how to operate wheelchairs or other personal mobility devices if needed.
- Know the size and weight of wheelchairs or other personal mobility devices and whether they are portable (can be collapsed or taken apart and reassembled), in case they need to be transported.



References and Resources

Massachusetts Department of Public Health Office of Preparedness and Emergency Management Get Prepared www.mass.gov/dph/getprepared

Disabilities or Access and Functional Needs Online Resources

https://www.disasterassistance.gov/information/disabilities-access-and-functional-needs/online-resources

Get a Family Disaster Kit American Red Cross https://www.redcross.org/store/4-person-3-day-emergencypreparednesskit/91053.html#utm_campaign=shopbutton&utm_content=resputi l&utm_medium=utilnav&utm_source=RCO&start=4

Types of Emergencies American Red Cross https://www.redcross.org/get-help/how-to-prepare-foremergencies/types-of-emergencies.html

People with Disabilities American Red Cross http://www.redcross.org/prepare/location/home-family/disabilities

Appendix 3-1

Checklist of Items to Prepare for Before an Emergency

- □ Post emergency telephone numbers (fire, police, ambulance, etc.) by phones and program them into cell phones.
- □ Teach children how and when to call 9-1-1 or your local Emergency Medical Services number for emergency help.
- □ Show each family member how and when to turn off the utilities (water, gas, and electricity) at the main switches.
- □ Check if you have adequate insurance coverage.
- □ Get training from the fire department for each family member on how to use the fire extinguisher (ABC type), and show them where it's kept.
- □ Install smoke and Carbon Monoxide detectors on each level of your home, especially near bedrooms.
- □ Conduct a home hazard hunt.
- □ Take a First aid and CPR class.
- Determine the best escape routes from your home. Find two ways out of each room.
- □ Find the safest places in your home for each type of emergency.
- □ Gather vital documents such as birth certificates and passports and put them in a safety deposit box or other safe location.
- □ Inventory your home possessions and store a record of them in a safe location.

Appendix 3-2

Emergency Supplies Kit

WATER

- Store one gallon of water per person per day.
- Store water in plastic containers such as soft drink bottles. Avoid using containers that will decompose or could break, such as milk cartons or glass bottles

FOOD

- Store at least a three-day supply of non-perishable food.
- Select foods that require no refrigeration, preparation or cooking, and little or no water:
 - Ready-to-eat canned meals, meats, fruits, and vegetables.
 - Canned juices.
 - High-energy foods (granola bars, energy bars, etc.).

FIRST AID SUPPLIES

Assemble a first aid kit for your home and one for each car.

- (20) Adhesive bandages, various sizes
- (1) 5" x 9" sterile dressing
- (1) Conforming roller gauze bandage
- (2) Triangular bandages
- (2) 3 x 3 sterile gauze pads
- (2) 4 x 4 sterile gauze pads
- (1) Roll 3" cohesive bandage
- (2) Germicidal hand wipes or waterless alcohol-based hand sanitizer
- (6) Antiseptic wipes
- (2) Pair large medical grade non-latex gloves
- Adhesive tape, 2" width
- Anti-bacterial ointment
- Cold pack
- Scissors (small, personal)
- o Tweezers
- o CPR breathing barrier, such as a face shield
- Non-prescription medications (e.g. aspirin)

CLOTHING AND BEDDING

Include at least one complete change of clothing and footwear per person.

- Sturdy shoes
- Blankets
- Hat and gloves
- Thermal underwear
- o Sunglasses

EMERGENCY TOOLS AND SUPPLIES

- Battery-operated radio and extra batteries
- Flashlight and extra batteries
- Cash or traveler's checks, change*
- Non-electric can opener, utility knife*
- Fire extinguisher: small canister ABC type
- Tube tent
- o Pliers
- o Tape
- Compass
- Matches in a waterproof container
- Aluminum foil
- Plastic storage containers
- o Signal flare
- Paper, pencil
- Needles, thread
- Medicine dropper
- Shut-off wrench, to turn off household gas and water
- o Whistle
- Plastic sheeting
- Map of the area (for locating shelters)

SANITATION SUPPLIES

- Toilet paper
- Soap, liquid detergent
- Feminine supplies
- Personal hygiene items
- Plastic garbage bags, ties (for personal sanitation uses)
- Plastic bucket with tight lid
- o Disinfectant
- Household chlorine bleach

SPECIAL SUPPLIES

Adults

- Prescription drugs
- Denture needs
- Contact lenses and supplies
- Extra eye glasses
- Immunization records

Infants/Children

- Formula
- Diapers/wipes
- Bottles
- Powdered formula, milk, or baby food
- Medications
- Immunization records

Elderly

- List of prescription medications including dosage. Include any allergies
- Extra eyeglasses and hearing-aid batteries
- Extra wheelchair batteries or other special equipment
- A list of the style and serial numbers of medical devices such as pacemakers
- Copies of medical insurance and Medicare cards
- List of doctors and emergency contacts

Disabled

- Prescription medicines, list of medications including dosage, list of any allergies
- Extra eyeglasses and hearing-aid batteries
- Extra wheelchair batteries
- Oxygen, if applicable
- Keep a list of the style and serial number of medical devices
- Medical insurance and Medicare cards
- List of doctors, relatives or friends who should be notified if you are hurt

Pets

- Food
- Extra water
- Leash/harness
- Collar
- Identification tags
- Medications
- Vaccinations and medical records

Summary

- Four steps to plan for an emergency ٠
 - Get informed
 - 0
 - Create a personal emergency plan Assemble a Emergency Supplies kit Maintain your plan and kit 0
 - 0
- It is important for people who require additional assistance and their families to create • a plan for emergencies.

Test Your Knowledge

5.1	What should you do to prepare yourself and your family for an emergency?
	Click on your answer.
	1. Create an emergency plan for you and your family before an
	emergency occurs.
	\Box 2. Understand the risks you may face so you can protect yourself and
	your family.
	□ 3. Assemble an emergency supply kit with items that will keep your
	family safe for at least 3 days.
	□ 4. Review and practice your plan at least every 6 months, replacing food
	as necessary
	□ 5. All of the above
F D	
5.2	Family and friends who may need additional assistance in an emergency
	I. Must wait until others have activated their emergency plans before acting help
	getting help 2. May require local government to help with a plan and provide
	resources for assistance
	 3. Can map out a plan that creates a support network to help in an
	emergency before it occurs
	 4. Should have emergency and medical supplies to last for at least 30
	days at all times
	 5. Must hide a key near the door for emergency situations to help
	volunteers gain entry
5.3	Some of the critical things in an emergency supplies kit include
	1. Water – 1 gallon per person per day
	2. Food – nonperishable items such as canned goods
	3. First Aid and Medical Supplies –bandages, latex gloves,
	glasses/contacts and medications
	 4. Emergency Tools and Supplies – such as battery powered radio,
	money and credit cards
	5. All of the above

Correct Answers

- 5.1: 5
- 5.2: 3
- 5.3: 5



Module 6: Activation

Objectives

- Describe the MA Responds system activation process
- Outline activation information and requirements for volunteers

Getting Notified

When a <u>public health emergency</u> or <u>declared emergency</u> occurs and additional assistance is needed, a notification will go out to volunteers from your local volunteer leader. This could be a call for any available volunteers, or a specified number of a particular category of personnel; for example, ten burn nurses, eight respiratory therapists, or two administrators. Requests may or may not specify location, duration of time needed, or local conditions. This information will be provided if the volunteer indicates interest in learning more about the request.

Volunteers may be activated via phone, email or text message.

Public Health Emergency

A Public health emergency is defined as an actual or imminent threat of injury, illness or health condition that is detrimental to public health and whose actual or reasonably suspected causes may include but are not limited to natural disaster; fire; bioterrorism; terrorism; outbreak of an infectious disease; chemical attack or accidental release; nuclear attack or accident; or any other circumstance that poses a serious danger to public health or to a substantial number of people.

Declared Emergency

A declared emergency results in an organized large scale response to an event or immediate threat of widespread illness, injury, death or damage to property.

A state of emergency may be declared by the Governor or a local or federal official. As an alternate or at the same time, the Governor may declare a public health emergency.

Things to Consider Before You Respond to an Event

Volunteers should consider the following questions prior to responding to an event:

- Does my knowledge or experience adequately prepare me for the role I might play?
- Am I healthy enough to withstand the physical demands that might be placed on me?
- How do I usually respond when the work I'm doing is emotionally difficult?
- Have I considered the potential adverse medical and psychological consequences of volunteering?

- Have I reached agreement with my loved ones about when I should volunteer and what degree of risk we can accept?
- Do I have an emergency response plan in place for my loved ones while I am separated from them?
- Do I have approval from my employer, supervisor, or other emergency response commitments?



Registration

When you register with MA Responds, you will provide information on how to be contacted in an emergency, the other emergency response commitments you may have, credentialing information, specific skills or competencies you possess, and the duration and location of response you would be interested in participating in. You may change your profile at any time by logging into MA Responds: www.maresponds.org

> Responding to a Request for Volunteers

You will be contacted to be notified that volunteers are needed by the communication method(s) you specified when you filled out your volunteer profile (phone, text, email, fax, and pager). When you receive a phone call or respond through MA Responds to a voice message, email, or text that you receive, you will be prompted to indicate your availability or unavailability for the activation.

Learn more about the activation

More information about the details of the event, like the location, time, expected duration, what to bring, or any advance preparations that you may need to make, will be provided in the message you receive, by logging into MA Responds, or by contacting your local administrator. Advance preparations may include transportation arrangements, immunizations and medical needs, reading material, or other information. In some cases, it will be necessary to clear your activation with your employer or other organizations that you have a commitment to.

Unavailable for the activation

You may at any time indicate that you are not available to assist. Doing so will not remove you as a volunteer from the MA Responds system. You may refuse as many requests as you wish. However, should you choose to no longer receive requests for

assistance from MA Responds, you can go to your online profile, or contact your local coordinator, and have your name removed from the system.

Volunteer Deployments

- Getting Notified. Once you accept activation, you may receive an email (or other communication as requested in your profile) with specific information, including the incident check-in location where you are to report and any travel and other logistical information that may be needed.
- **Checking-in.** You will need to check-in before you can begin to work. This will involve verification of your photo ID, any assignments you may have, and whom you should report to.



On-Site Training

When you arrive on the scene, you may need an orientation or training on a specific aspect of the event. This training will take place at the site itself and will provide information about the specific event.

It will also include specific policies and procedures regarding:

- Safety and Security
- The incident specific chain of command
- How information is communicated during an emergency
- <u>HIPAA</u>

You will also learn about discipline specific policies and procedures such as:

- Diagnostic and clinical practice protocols
- What services you are expected to provide
- Procedures for "reporting on" and "reporting off"
- HIPAA Act

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires that personal health information be kept confidential. You cannot pass on health information of any sort to anyone who does not have a specific need to know, and, usually, you must have the patient's permission to discuss this information.

In an emergency, it remains important that volunteers are careful not to talk about the patients, their illnesses or injuries, how they were hurt, or any other information,

unless the information is specifically needed by the patient's health care provider to treat the patient or may impact the health and safety of others.



Summary

- When a public health emergency or declared emergency occurs and additional assistance is needed, a notification will go out to volunteers from your local volunteer leader.
- A Public Health Emergency is defined as an actual or imminent threat of injury, illness or health condition that is detrimental to public health
- A declared emergency results in an organized large scale response to an event or immediate threat of widespread illness, injury, death or damage to property.

6.1	 Select the term that describes this definition: "An actual or imminent threat of injury, illness or health condition that is detrimental to public health and whose actual or reasonably suspected causes may include but are not limited to natural disaster; fire; bioterrorism; terrorism; outbreak of an infectious disease; chemical attack or accidental release; nuclear attack or accident; or any other circumstance that poses a serious danger to public health or to a substantial number of people." 1. Public Health Emergency 2. Declared Emergency 3. Disaster
6.2	 Select on the term that describes this definition: "It results in an organized response to an event or immediate threat of widespread illness, injury, death or damage to property. A state of emergency may be declared by the Governor or by a local or federal official." 1. Public Health Emergency 2. Declared Emergency 3. Disaster
6.3	Check all of the statements about the MA Responds activation process that are TRUE.

	1. Volunteers can refuse as many activations as they wish. They can ask for more detail about location, time, and expected duration.	
	2. If volunteers accept activation, employers are legally obligated to give them the time off from work to respond to the problem.	
	3. If volunteers accept activation, they must go to a central site to receive specific information, including the incident location.	
	4. Once volunteers have checked-in, they can immediately begin work, reporting later to their supervisor in the ICS command.	
	5. Once volunteers have checked-in, they must do what they are told by their supervisor, unless they see a more important task.	

6.1: 1

6.2: 2

6.3: 1

Module 7 - Safety and Security

Objectives:

- List priorities for safety and security
- Identify the components of proper hand hygiene and use of Personal Protective Equipment (PPE)

Overview

Your personal safety and the safety of the patients, visitors, and other volunteers are paramount.

If you notice a life-threatening situation, remove patients or visitors who can walk from danger and direct them through the nearest safe exit. Then help to isolate or move others.

Be sure to contact the safety officer as quickly as possible.

In an emergency, personnel without an ID may be denied access. Control of entry and exit from the facility or site may be done to maintain a secure environment and minimize unauthorized access.

You must carry your usual work or volunteer specific identification with you at all times.



Hand Hygiene

Performing hand hygiene is the easiest, and in most cases, the most important measure you can take to stop the spread of infectious organisms. Be sure to practice hand hygiene before and after each patient contact.

Use of soap and running water is best. Rub your hands together for at least 20 seconds.

- Wash all parts of your hands, including wrists and between fingers and under fingernails
- Rinse your hands well under running water
- Air dry or use a clean towel to dry your hands and turn off the faucet.

If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Alcohol-based hand sanitizers can quickly reduce the number of germs on hands in some situations, but sanitizers do **not** eliminate all types of germs.

- Push the dispenser once, covering all surfaces of your hands with the solution, rubbing hands together until the solution dries (about 15 seconds).
- There is no need to rinse your hands.

Personal Protective Equipment (PPE)

During a hazardous materials incident, public health emergency, terrorist event, or other disaster, responders frequently wear personal protective equipment (PPE). PPE is designed to protect the skin and the mucous membranes of the eyes, nose, and mouth of health professionals from exposure to blood or other potentially infectious material.

PPE includes gloves, protective clothing and respiratory protection apparatus designed to prevent exposure to chemical, biological, and/or radiological materials.

If there is a need for specialized equipment, only those with prior education and training in the use of this equipment will be provided with the equipment and allowed to enter the area of the incident where they are needed. All other volunteers will remain in an area that is safe.

You will not be expected to use equipment that you are not trained to use, or that you are not comfortable using. You may refuse to wear the equipment and to enter a contaminated area at any time. Your supervisor will be in charge of assigning you a role, and should be told of any training in the use of PPE you have had, or a preference to not fill that role.

Using Gloves

Gloves are worn to:

- Provide a protective barrier for and to prevent contamination of hands when touching or possibly touching blood, body fluids, secretions, excretions, mucous membranes, and non-intact skin.
- Reduce the likelihood that microorganisms present on the hands will be transmitted to patients or other volunteers or staff. Gloves may also be used during the handling of food products.

Gloves must be changed between patient contact or when contaminated and disposed of in specially provided waste containers. Hand washing must be performed after gloves are removed.



Gowns, Masks and Eye Protection

Gowns are worn to:

- Protect the skin and prevent soiling of clothing during patient care or activities that are likely to generate splashes or sprays of blood or body fluids.
- Prevent the transmission of microorganisms to other patients, health care workers or volunteers.

Masks and eye protection are worn to:

 Protect mucous membranes of the, eyes, nose, and mouth during patient care or activities that are likely to generate splashes of blood or body fluids.

Gowns, masks and gloves should be removed and disposed of in specially provided biological waste containers. Hand hygiene must be performed after removing gowns or masks.



References and Resources

Additional information regarding PPE and COVID19: https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html

Content for this lesson was taken from the Centers for Disease Control and Prevention website. <u>www.cdc.gov</u>

Summary

- Your personal safety and the safety of the patients, visitors, and other volunteers are paramount.
- Volunteers must be able to do proper hand hygiene and use personal protective equipment (PPE)

7.1	 What should you do if you notice a life-threatening situation? Check one reply. 1. Verify that you think the situation is dangerous 2. Call 911 about the situation, providing full details 3. Contact the public affairs officer about the situation 4. Formulate an immediate plan to address the situation 5. Direct patients and visitors to the nearest safe exit
7.2	 Which of the following are true about Hand hygiene 1. It is the easiest way to stop the spread of organisms. 2. Wash your hands with soap and water for at least 20 seconds. 3. Wash your hands, wrists, between fingers, and under nails. 4. Use a waterless hand hygiene solution if no running water. 5. All of the above
7.3	 Which statement is TRUE about PPE? 1. PPE is an acronym for partial protection in emergencies to prevent trauma. 2. PPE is designed to prevent exposure to chemical, biological, and radiological materials. 3. If there is an immediate need to use PPE, education and training will not be required. 4. If your supervisor instructs you to enter a contaminated area, you must follow the order. 5. Gloves and paper gowns are not sufficient protection to be labeled as part of PPE.

7.1: 5

7.2: 5

7.3: 2

Module 8 - Individuals with Disabilities or Access & Functional Needs

Objectives

- Define groups that may require additional assistance
- Recognize ways to help individuals who need additional assistance affected by a public health event

Planning for the Whole Community

FEMA's National Response Framework recognizes that preparedness is a shared responsibility, it calls for the involvement everyone—not just the government—in preparedness efforts. By working together, everyone can keep the nation safe from harm and resilient when struck by hazards, such as natural disasters, acts of terrorism, and pandemics.

Whole Community includes: individuals and families, including those with access and functional needs, individuals with a disability or an access and functional need, may need to take additional steps to prepare for emergencies.

Populations whose members may have additional needs before, during, and after an incident in functional areas, including but not limited to: maintaining independence, communication, transportation, supervision, and medical care. Individuals in need of additional response assistance may include those who have disabilities; who live in institutionalized settings; who are elderly; who are children; who are from diverse cultures; who have limited English proficiency or are non-English speaking; or who are transportation disadvantaged.

During an emergency, care may need to be modified for:

- The elderly
- Children
- People with physical and cognitive disabilities
- Non-English speakers
- Other individuals with additional needs



Ways that Volunteers Can Help

MA Responds Volunteers can provide support to members who may need it by:

- Making certain that everyone is safe and assisting people who require help to move out of harm's way
- Sharing information in various ways including written, spoken and visual options
- Moving items, such as portable diagnostic equipment and beds, out of the way that could cause slips, falls or injuries
- Showing respect to each person and assisting them in a calm, patient and helpful manner

Ways to Help the Elderly

Older adults, especially those over age 80, may tire more easily and need to rest. Some may become confused and need supervision to make sure they are safe.

Volunteers can:

- Ask if help is needed with walking, hearing, seeing or performing tasks
- Help find medications, glasses, hearing aids or walking aids, as needed
- Ask if information can be heard, especially in noisy situations
- Offer adequate seating options to help avoid lengthy standing times
- Allow extra time for responding to questions, moving from place to place and performing tasks
- Assist those with dementia and their families with registration in the <u>Alzheimer's Association Safe Return Program</u>



Ways to Help Children

Children's needs vary based on their age and development levels. Smaller children may be less aware of signs of injury or failing health and may be less able to seek help on their own; they also may need additional supervision to prevent injuries.

Volunteers should:

- Provide supervision, especially in busy areas or around potentially dangerous equipment
- Help small children with walking, feeding and other activities, as needed; provide comfort and support
- Encourage age-appropriate activities, such as playing with toys or coloring, to reduce stress and provide comfort
- Allow additional time for answering questions, moving from place to place and performing tasks
- Help children find parents and/or other designated caregivers, if possible
- Whenever possible, keep children and parents together



Ways to Help People with Physical Disabilities

A disability is a limitation that affects a person's ability to perform a specific function. With the help of assistive devices, however, many people with disabilities can perform needed tasks.

Volunteers can:

- Ask if assistance is needed with walking, hearing, seeing or performing tasks
- Use of gestures and facial expressions to help communicate with hearing impaired patients or family members, as needed
- Offer emotional support to people separated from their assistive devices
- Provide American Sign Language interpreters, assistive listening devices and Braille and large print documents, if available
- Provide power backups and rechargers for equipment needed for medical disabilities, if available



Ways to Help People with Cognitive and Learning Disabilities

Individuals with cognitive disabilities often cannot understand well what to do in an emergency and may not respond quickly. They are often disoriented and confused in crisis situations and may not know what to avoid and may not be able to perceive potential danger. Continuous supervision and communication modifications may be needed.

Volunteers can:

- Allow additional time for thinking and answering questions
- Offer assistance when forms need to be completed
- Give clear, simple and specific directions
- Provide help if patient is unable to make decisions about safety or seems to be confused



Ways to Help Non-English Speakers

On-site translators and language line (phone) interpreters may or may not be available. English-speaking family members and some volunteers also may speak the needed language.

Volunteers can:

- Ask if information needs to be provided in a language other than English
- Give clear, simple and specific directions
- Use common English phrases and words that may be familiar
- Offer "point and say options" which include universally understandable images that can be used when answering questions
- Offer emotional support to those who have difficulties communicating because of limited English reading, writing and speaking skills
- Be sensitive to cultural differences



References and Resources

https://unmhealth.org/services/development-disabilities/programs/otherdisability-resources/first-responder-tips.html University of New Mexico Center for Development and Disability's Tips for First Responders

People with Disabilities and Other Access and Functional Needs

Ready.gov

https://www.ready.gov/disability

Disaster Mitigation for Persons with Disabilities Center for an Accessible Society

Summary

- During an emergency, care may need to be modified for:
 - The elderly
 - Children
 - People with physical and cognitive disabilities
 - Non-English speakers
 - Other individuals with additional needs

8.1	Check the statement that is TRUE about individuals with disabilities or
	access and functional needs
	1. May request volunteers to provide additional assistance or attention
	before an emergency
	2. May only be helped by MA Responds volunteers who have completed specialized training
	J. Must be provided with translators before implementing any emergency plan
	 4. Include non-English speakers, people with physical and cognitive disabilities, children, and elderly
	5. Can only be moved by medical personnel to have completed required training courses
	Check the statement that describes how MA Responds volunteers can work
8.2	with individuals with disabilities or access and functional needs:
	MA Responds volunteers:
	□ 1. must check with their supervisor to work with people who need assistance
	2. can assist people with additional needs by showing respect and treating them in a calm helpful manner
	3. must receive special training on ways to help each group needing assistance
	4. can provide support to people with additional needs by making sure everyone is evacuated
	5. can help people with additional needs by not giving bad news to keep people calm

8.1: 4 8.2: 2

Module 9: Behavioral Health

Objectives

- Define common behavioral health reactions to emergencies
- Identify people most at risk and ways MA Responds volunteers can help

Overview

Behavioral Health addresses our ability to function as individuals, families, institutions, and communities. The purpose of a Behavioral Health Response is to mitigate the emotional consequences that may occur through prevention and intervention.

In most situations trained behavioral health responders will be available to address the emergent and ongoing stress related needs of people affected by the event as well as the emergency personnel responding to the event.

Trained behavioral health responders include mental health professionals, substance abuse professionals as well as paraprofessionals with behavioral health skills.

Common Behavioral Health Reactions to an Emergency

People experience common reactions to emergencies; everyone who sees or experiences an emergency is affected differently by it. A range of feelings including profound sadness, grief, and anger are normal reactions to an abnormal event.

The following are common symptoms to a traumatic event. These symptoms can be felt by victims, first responders, or those not directly affected.

- Difficulty concentrating; limited attention span
- Disorientation or confusion
- Depression, sadness
- Feelings of hopelessness
- Mood-swings and easy bouts of crying
- Physical symptoms such as headaches and stomach problems
- Difficulty communicating thoughts
- Difficulty sleeping
- Poor work performance
- Increased use of drugs/alcohol
- Fear of crowds, strangers, or being alone
- Overwhelming guilt and self-doubt



People Most Likely at Risk

Some people are at greater risk than others for developing sustained and long-term reactions to a traumatic event. People who have a higher risk of suffering long term effects include:

- People who have had direct exposure to the event; closer exposure to the actual event leads to greater risk
- Victims of the event; people who were physically injured
- People who have witnessed death or serious injury
- People with a history of trauma
- Those with chronic medical illness or psychological disorders



When to Get Further Assistance

If someone experiences emotional symptoms for an extended period of time or if the symptoms interfere with their ability to function, crisis counseling or stress management may be helpful.

Immediate help is needed if the affected person...

- is having life-threatening symptoms
- is suicidal or homicidal
- is `out of control'



How MA Responds Volunteers Can Help

In most situations trained behavioral health responders will be available to address the emergent and ongoing stress related needs of people affected by the event as well as the emergency personnel responding to the event. However, other emergency responders can support those affected using these guidelines:

Do say:

- These are normal reactions.
- Your feelings are understandable.
- The way you feel right now does not mean you are going crazy.
- Things may never be the same, but you won't always feel the way you do right now.

Don't say:

- It could have been worse.
- You can always get another pet/car/house.
- It's best if you just stay busy.
- I know just how you feel.
- You need to get on with your life.



Self-Care Tips

You too will be under stress and it is important to take care of yourself so that you stay focused and are better able to care for others. During an emergency it is important to:

- Pace yourself; take frequent rest breaks away from your work area as much as possible.
- Drink plenty of water and eat healthy snacks such as fruit and whole grain products.
- Talk to supportive co-workers and supervisors about your experience.
- **Recognize and accept what you cannot change**—the chain of command, organizational structure, waiting, equipment failures, etc.
- Stay in touch with your family and friends.



Getting Help for Yourself

Behavioral health counseling is helpful to many emergency responders. If the following symptoms continue beyond a few weeks, seek professional help:

- Persistent and intrusive memories or thoughts about the event
- Numbness
- Irritability
- Fatigue
- Anxiety
- Feelings of Helplessness
- Difficulty concentrating



Training for Behavioral Health Responders

Currently Massachusetts has no unified, statewide training system for disaster crisis counselors. All MA Responds and State volunteers are encouraged to take training in Psychological First Aid, commonly referred to as "PFA".

The following is a description of resources and trainings offered through the State:

Medical Reserve Corps Psychological First Aid (PFA) training

https://www.nctsn.org/resources/psychological-first-aid-pfa-field-medical-reserve-corps-field-operations-guide

https://www.train.org/main/course/1095955/

Crisis Counseling Assistance and Training Program (CCP)

The Crisis Counseling Assistance and Training Program (CCP) is one of a number of programs funded by the Federal Emergency Management Agency (FEMA) under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1974 (Stafford Act). The Stafford Act was designed to supplement the efforts and available resources of State and local governments in alleviating the damage, loss, hardship, or suffering caused by a federally declared disaster. Specifically, section 416 of the Stafford Act authorizes FEMA to fund mental health assistance and training activities in affected areas for a specified period of time. This mental health assistance is called crisis counseling. More information is available on-line at: https://www.samhsa.gov/dtac/ccp-toolkit

References and Resources

Helping Patients Cope with A Traumatic Event CDC, Department of Health and Human Services https://www.cdc.gov/masstrauma/factsheets/professionals/coping_professional.pdf

At-Risk Individuals, Behavioral Health & Community Resilience (ABC) U.S. Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response https://www.phe.gov/Preparedness/planning/abc/Pages/default.aspx

Disaster Behavioral Health Services

https://www.samhsa.gov/dtac/disaster-behavioral-health-resources

Summary

- People experience common reactions to emergencies; everyone who sees or experiences an emergency is affected differently by it. A range of feelings including profound sadness, grief, and anger are normal reactions to an abnormal event.
- Emergency responders can support those affected using these guidelines

Do say:

- These are normal reactions.
- Your feelings are understandable.
- The way you feel right now does not mean you are going crazy.
- Things may never be the same, but you won't always feel the way you do right now.

Don't say:

- It could have been worse.
- You can always get another pet/car/house.
- It's best if you just stay busy.
- I know just how you feel.
- You need to get on with your life.

9.1	Normal reactions to emergencies include profound sadness, grief, and anger. 1. True 2. False
9.2	You should get <i>immediate</i> assistance for a person affected by an emergency if the person has: (Choose one reply.) 1. poor work performance 2. difficulty sleeping 3. life-threatening symptoms 4. problems concentrating 5. a loss of appetite
9.3	 What is helpful for you say to support those affected by an emergency? Choose one reply. 1. I know just how you are feeling about this 2. You can rebuild your house to be even better 3. The situation could have been much worse 4. Your feelings are normal and understandable 5. It's best to stay focused and busy at this time
9.4	As a volunteer, what can you do to take care of yourself and cope with the emotional toll that an emergency can bring? Choose one reply 1. Recognize and accept what you cannot change. 2. Drink plenty of water and eat healthy snacks.

	 3. Pace yourself; including frequent rest breaks. 4. Talk to co-workers and supervisors about your experiences. 5. All of the above
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- 9.1: 1
- 9.2: 3
- 9.3: 4
- 9.4: 5