



Disaster Healthcare Volunteers Handbook

<https://healthcarevolunteers.ca.gov/>



California Emergency Medical Services Authority
<https://ems.ca.gov/>

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The Basics

Purpose of the Handbook

The purpose of this Handbook is to provide both new and current volunteers with a clear understanding of the structure, purpose, and activities of the Disaster Healthcare Volunteers (DHV) Program in California. DHV volunteers are licensed healthcare professionals like you, who are committed to serving during emergencies and disasters. Your contributions are critical before, during, and after disasters and public health emergencies.

This Handbook serves as both a reference guide and a framework, offering essential information about the benefits of volunteering, the organizational structure of the program, and the rules and regulations that govern volunteer engagement. We encourage you to review this Handbook thoroughly and refer to it whenever you have questions or need guidance. The “Contents” section at the beginning of the document will help you quickly locate specific topics.

While we hope this Handbook is a valuable resource as you prepare for disaster response efforts, it's important to exercise professional judgment when addressing the various issues presented. Every effort has been made to ensure the accuracy and completeness of this document; however, given the unpredictable nature of disaster scenarios, it may not address every possible situation. Please also note that local disaster officials retain final authority over disaster-related policies and operational procedures.

If you have suggestions to enhance the content or usefulness of this Handbook, we welcome your feedback. Please feel free to contact the Emergency Medical Services Authority at dhv@emsa.ca.gov.

Historic Perspective of the DHV

When terrorists attacked the World Trade Center's Twin Towers in 2001, the nation witnessed an overwhelming volunteer response. Tens of thousands rushed to help victims, survivors, and first responders—driven by a shared desire to assist in the face of tragedy. Among them were nurses, EMTs, physicians, counselors, and other healthcare professionals, all compelled by a deep commitment to serve.



In the aftermath, evaluations revealed a major gap in emergency response: there was no system to verify the credentials of professional volunteers. To address this, federal officials created the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP),

implemented at the state level. In California, this became the **Disaster Healthcare Volunteers (DHV)** Program.

Today, over 46,000 healthcare professionals are registered in DHV, enabling rapid identification and deployment of qualified volunteers during crises. For healthcare organizations—such as hospitals, public health departments, and EMS agencies—verifying licenses is critical, but often hindered during disasters. This was evident after 9/11, when credential verification proved challenging.

The DHV Program resolves this issue by pre-registering, verifying, and mobilizing healthcare professionals. It supports a wide range of roles—from physicians and nurses to mental health practitioners—and connects with licensing boards to confirm credentials in real time.

Examples of DHV/MRC Deployments:

In California, Disaster Healthcare Volunteers (DHV) and Medical Reserve Corps (MRC) volunteers are critical components of the disaster response infrastructure. In the wake of disasters and medical emergencies, many of our health professionals are eager and willing to volunteer their services.

The **2018 Camp Fire** was the deadliest and most destructive wildfire in California's history. There were over 540 DHV and MRC volunteers that deployed. Volunteers offered their services working at the county coroner, medical support in shelters, and animal care at shelters.

DHV and MRC volunteers were crucial in California's **COVID-19** response efforts. During the COVID-19 pandemic, there were over 7,400 DHV and MRC volunteers that deployed to provide medical support across California. Volunteers put in over 212,000 hours of their time and skills in COVID-19 vaccination clinics, COVID-19 testing sites, COVID-19 hotlines, contact tracing, patient care, alternate care site support, and operation center support.

Each year hundreds of DHV and MRC volunteers participate in deployment drills and exercises designed to increase the knowledge and capacity of the participants to respond to future public health emergencies and disasters. Funds for the DHV Program are provided by the United States Department of Health and Human Services through the Hospital Preparedness Program. The DHV Program is based upon national guidelines and a mandate set by the US Department of Health and Human Services to create a nationwide web-based program for the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP).



The Disaster Healthcare Volunteers Program

DHV is California's ESAR-VHP Program



The Emergency System for Advance Registration of Volunteer Health Professionals (ESAR- VHP) is a federal program created to support states and territories in establishing standardized volunteer registration programs for disasters and public health and medical emergencies. Disaster Healthcare Volunteers (DHV), California's ESAR-VHP program is administered by local System Administrators in each county and maintained by California Emergency Medical Services Authority (EMSA) in

partnership with the California Department of Public Health.

America's Health Volunteers



Why Do We Need ESAR-VHP?

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

There are significant problems associated with registering and verifying the credentials of professional health volunteers immediately following major disasters or emergencies. Specifically, hospitals and other facilities may be unable to verify basic licensing or credentialing information, including training, skills, competencies, and employment. Further, the loss of telecommunications may prevent contact with sources that provide credential or privileged information. The goal of the ESAR-VHP program is to eliminate problems that arise when mobilizing volunteer healthcare professionals in an emergency response.

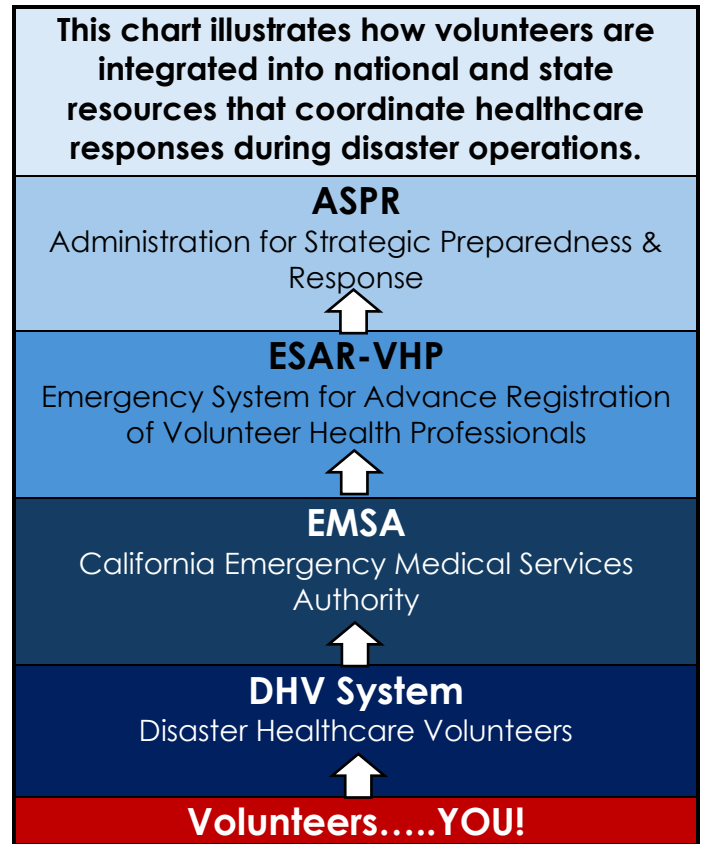
Disaster Healthcare Volunteers (DHV)

In accordance with federal mandate, California developed the DHV Program to manage the registration, license verification, credentialing, and deployment of volunteer healthcare professionals (VHPs). DHV uses a software system to handle volunteer registration, notification, communication, and credentialing, and is operated by local, regional, and state public health and emergency medical services agencies. DHV's are pre-registered and pre-credentialed. Deployment of volunteers will follow California's Standardized Emergency Management System (SEMS) procedures.

Benefits of Volunteering

Volunteering allows you to “Make a Difference” in your community

The opportunity to “**make a difference**” in your community is the better-known benefit of volunteering. “Making an impact on the community” is often cited as a volunteer’s primary reason to serve. Volunteers can often be the glue that holds a community together. Volunteering allows you to make your community a better place to live. And volunteering is a two-way street, benefitting you and your family as much as the cause you choose to help. Dedicating your time as a volunteer gives you a chance to make new friends and expand your social network. An example would be serving as a Medical Reserve Corps volunteer on an on-going basis, or participating in a disaster response can introduce you to colleagues in the healthcare community with whom you might otherwise have no connection.



Scope of Participation

Volunteers may be utilized locally, regionally or throughout the state. Assignments can range from a few hours to multiple days. As a volunteer, you will always be advised of the mission and have the right to accept or decline the assignment. *Registering with DHV is not an obligation to serve.*

Please note: Participation in the DHV Program as an individual is not an “active association” in that there are no regular meetings or obligations of those who are registered. As a DHV registrant you can expect to receive occasional communications about special trainings or opportunities. You would be contacted for a possible assignment only when an actual emergency occurs. If, however, you are interested in more active participation, you may also want to consider becoming a member of a local Medical Reserve Corps (MRC). For information about MRC, please go to p.12. MRC Units may have regular meetings, participate in training activities and/or participate in simulated disaster drills and exercises. MRC members registered on the DHV System may participate in emergency responses as a team. Contact an MRC Coordinator to learn about becoming an MRC member.

DHV's are organized by county. Each county in the state is considered a unit. Each unit has one or more individuals who are trained and designated as DHV "System Administrators." In addition to the county units, there are MRC units with their own MRC Coordinators who are System Administrators. During a local, state or national disaster, (e.g., an earthquake, severe weather event, or public health emergency), the DHV System will be accessed by county emergency medical/health officials or authorized medical/health officials at the state level. If a decision is made to request your service, you will be notified - using the contact information you enter on the DHV System.

Program Participation Requirements

By registering on EMSA's DHV website, you agree to be considered for service as a volunteer healthcare professional during a duly declared emergency or disaster. As part of the registration process, you will be required to voluntarily provide personal information that will be collected and maintained by EMSA on the secure DHV website.

Invite Your Colleagues to Register

Thank you for registering on the DHV System. We urge you to invite your healthcare colleagues to join you and register themselves in the DHV Program. Information about registration is found on p. 28. You can also visit the DHV website at <https://healthcarevolunteers.ca.gov/> for more information.

Registrant Terms of Service

When you register, you will need to agree to the terms of service and provide information specific to you and your skills for use by program administrators in establishing your Emergency Credential Level. You will be requested to provide contact information for use in the event of an emergency deployment. These conditions are designed to protect both you and the people you could be serving in a disaster. See the "Terms of Service" in Appendix G, p. 38.

Confidentiality and Security of the DHV System

The DHV Program software solution has been designed with several levels of security relating to data integrity to prevent abuse and to protect participants' privacy. Please review the "DHV Privacy Policy," Appendix A, p.29.

Background Checks

Local county emergency management or health department officials may elect to institute requirements for a background check on DHV's in your county. The requirements for background checks and the procedures for completing a background check vary by county. Your local officials will inform you about their requirements.

License Certification and Verification

The DHV System automatically checks and verifies licenses and certifications once every twenty-four hours to ensure the license status of healthcare volunteers who could be requested to deploy as a volunteer during an emergency. This important step was not possible before the development of the DHV Program.

Key DHV Assumptions

As the DHV System was being created in close collaboration between state and local emergency service officials it was important to reach agreement on key conditions that protect volunteers and the people they serve. They also set key principles of operation for both state and local emergency-service officials.

1. DHVs deployed through the DHV Program are not “first responders” and are not to be considered a rapid-reaction force. It is assumed that in emergencies and disasters, first responders will be appropriately deployed through their normal channels.
2. Volunteers listed in the DHV Program are not self-deploying or self-supporting - either as individuals or as units. Deployment of DHV resources will require organization, preparation, and significant effort on the part of the county Medical Health Operational Area Coordinator (MHOAC) program.
3. Volunteers enrolled in the DHV Program are indeed volunteers. This means that they have a right to be informed about the nature of the incident and what to expect about field conditions, housing, etc. It also means they are not paid for their service and, as volunteers, are not mandated to respond.

Expectations of Disaster Healthcare Volunteers

Volunteers are always expected to act in a manner consistent with their professional status and licensure. In agreeing to participate in the DHV Program as a volunteer, each individual acknowledges understanding the nature of the volunteer role, the process for verifying credentials, and affirms that all information they will give will be truthful.

Volunteers are expected to update their profiles regularly and as needed. Thus, if there is any change to one's licensure status, personal or professional information, it is expected that the volunteer will make appropriate changes. A Volunteer Code of Conduct is provided on p. 23 in this Handbook. This code does not preempt or preclude local MRCs or other units from establishing additional expectations or conduct codes for DHVs or MRC members.

Fees and Compensation

In California, volunteers cannot be compensated. When deployed for a declared emergency, all volunteers will be registered as Disaster Service Workers (DSW) under the Disaster Service Workers Volunteer Program as set forth by California law. The DSW program offers volunteers limited immunity from liability under law as well as worker's compensation coverage. The program does not provide malpractice coverage. More information on liability and legal protections can be found in the section of this Handbook, titled "Liability and Legal Protections," on p.24.

Inactive or Resignation

Temporary Inactivation: If a situation arises that causes you to elect to temporarily end your participation in the DHV Program or you are no longer able to participate, you can change your "Account Status" in the DHV System from "Active" to "Inactive" using the following steps:

1. Log into the DHV System with your Username and Password.
2. Click on the "My Profile" tab.
3. Click on the "Settings" tab.
4. Click the arrow button beside "Active" and, in the drop-down menu, click on "Inactive."
5. Click on the "Change" button and this makes your account Inactive.

Inactive member information will be available to authorized System Administrators, but you will NOT be considered for or contacted about potential emergency activations and deployments. You may receive non-emergency notifications related to the status of your account. You may change your account status to active at any later date if you elect to do so.

Resignation: If you want to have your account closed, you shall contact your County DHV System Administrator or MRC Unit Coordinator by sending them an email, or you can send a message via the DHV System as follows:

1. Log into the DHV System with your username and password.
2. Click on "Messages" and then click on the "Compose" Button.
3. Select "Add Recipients"
4. Click on the Administrator box and then click on the "Search" Button.
5. Select one or more recipients from the drop-down box and click "Add Administrators".
6. Type your message in the space for messages.
7. Click "send" and your message will go to the recipients you have designated.

You will receive no further communications from the DHV System. If, at a future date, you would like to re-open your account, email dhv@emsa.ca.gov

Removal

Individuals who act contrary to the Volunteer Code of Conduct p. 23 or the rules and procedures of the Disaster Healthcare Volunteers Program are subject to dismissal from membership. Disasters are traumatic events that impact people and their communities in many ways. It is critical that disaster responders are careful to not add to this trauma through any negative actions that impact the people being served. Any actions that serve to slow or impede effective delivery of services are just as harmful as actions that affect individuals. Dismissal of individuals will be recommended by the individual's direct supervisor and confirmed by a county level emergency services official or their designee.

Specialty Organizations

CAL-MAT

California Medical Assistance Teams (CAL-MATs) are state-coordinated teams modeled after federal Disaster Medical Assistance Teams (DMATS) and designed to rapidly respond to support fire base camps, shelters, alternate care sites, mission support sites, other disaster medical events throughout the state. CAL-MAT medical professionals provide medical services, and non-medical professionals provide mission support services during disasters in California to close the gap between the local and federal responses during major disaster medical events. CAL-MATs are a group of trained medical and non-medical professionals organized, coordinated, and deployed by the CA Emergency Medical Services Authority for rapid field medical response during disasters. Members will typically deploy for 14 days and work up to 12 hours on an AM or PM shift during 24-hour operations. CAL-MAT members become paid temporary emergency hire (E-hire) state employees while activated to support disasters statewide in California. Medical and non-medical professionals statewide can join this program to ensure the constituents of California receive crucial patient care during disasters. For more information, email CAL.MAT@emsa.ca.gov



Los Angeles Surge Unit

This is the hospital-ready team, assigned primarily to hospitals and clinics following a disaster in Los Angeles County. These medical, health or mental health professionals must have a current unrestricted license, maintain an active practice and/or are staff of a local hospital or other healthcare facility located in Los Angeles County. Retired professionals with current licensure who have been employed in one of these medical settings in the past five years are also welcome to participate in the LA Surge Unit.

Medical Reserve Corps

The Medical Reserve Corps (MRC) began in 2002 when the President recommended that all Americans embrace the spirit of volunteerism. MRC units are community-based healthcare teams that are locally organized and utilize volunteers who want to donate their time and expertise to prepare for and respond to emergencies and promote healthy living throughout the year. MRC volunteers supplement existing emergency and public health resources. MRC volunteers include medical and public health professionals such as physicians, nurses, pharmacists, dentists, veterinarians and epidemiologists. Many communities non-medical volunteers join MRC Units to augment important ancillary roles, such as logisticians, HAM Radio Operators, administrative assistants, IT experts, legal advisors, chaplains, interpreters and others who fill key support rolls on the MRC teams. Nationally, the teams' average composition is 60% medical volunteers and 40% non-medical volunteers. Together these MRC Unit volunteers cover over 90% of the populated areas in the United States.



MRC units are provided specific areas to strengthen the public health infrastructure of their communities by the U.S. Surgeon General. These are outlined priorities for the health of individuals, and the nation, which also serve as a guide to the MRC. The overarching goals are to improve health literacy, to work towards increasing disease prevention, eliminating health disparities, and improving public health preparedness.

In California, the local MRC units have been given access to DHV to manage their volunteers. When first registering in DHV, the registrant can select an MRC Unit closest to where they reside. When the registrant is pending for the MRC, they shall receive information from their local MRC Coordinator indicating when and where the next MRC unit meeting will be held along with any other unit requirements. Once a volunteer fulfills the team requirements, they will be a member of that MRC unit. MRC units may have regular meetings, they may elect officers, and they are supervised and supported by a local sponsoring organization such as a public health department or fire agency. Members may participate in training classes and exercises or drills of their emergency response plans. MRC Units may be tasked by county officials to respond as a team or as individuals in support of a public health emergency or disaster response. EMSA proudly salutes the thousands of MRC members in California currently serving their communities. Please use the link below to find more MRC information



<https://experience.arcgis.com/experience/b6e7f63818804808beaad6de1afbd5>

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Operational Information

What Happens in an Emergency?

When a major disaster strikes in California, our public agencies and private medical providers immediately launch into action to mobilize all the equipment, supplies, facilities and professional healthcare personnel needed and requested through official channels to address the extraordinary medical and healthcare needs created by the disaster. The steps for this process are outlined below.

1. **Activation:** Activation of an emergency medical response is initiated at the local level by emergency management. Disaster officials will make requests for specific numbers of medical personnel and will request the needed professional classifications such as physicians, nurses, EMT's, etc. All requests and activations (called "Missions" on the Disaster Healthcare Volunteers (DHV) System) should follow the Standardized Emergency Management System (SEMS) protocols.
2. **Request for Volunteers:** When the activation occurs, emergency officials may issue a request for deployment of DHV. This first communication to you from your DHV System Administrator will inquire if you are "available" for the assignment. In a medical emergency, volunteers may be requested to deploy to a hospital, other healthcare facility, an alternate care site, or to any other location where your services are needed.

When seeking availability, System Administrators should communicate:

- Type of mission (i.e. vaccination clinic, hospital staffing relief, etc.).
- Location of mission (with enough specificity to suggest the kind of travel involved).
- Duration of mission.
- Anticipated field conditions (e.g., local school or clinic vs. austere conditions such as housing in tents at a mobile field hospital with Meals Ready to Eat and portable showers).
- Any requirements for special clothing and/or personal equipment.
- Any known risks or safety concerns (e.g. dust, aerosolized debris, social unrest, etc.)
- Any other conditions which would influence a volunteer's decision to participate.

Assignments may be local, within your county, or in another county. Mutual aid requests from other counties are made when resources are not available locally. Based on the expected working conditions and the volunteers'

expected duties, an honest assessment should be made by each volunteer of their personal health and fitness. System Administrators may also require each volunteer to complete a health and fitness assessment prior to deployment. This may be a self-assessment or a third-party assessment.

3. **Assignment:** If you reply that you are willing and available to deploy, you may then be assigned to a specific task, location and timeframe. You will receive a message stating that you have been “assigned” and you will receive specific information about time, dates and location of your assignment along with details of the mission that can enable you to determine if your personal health and fitness will enable you to accept the assignment.

After accepting the assignment, volunteers will be notified via email, phone or DHV System when and where to report and the name of the contact person or supervisor to whom they will report. Out-of-county travel arrangements are made by emergency officials and volunteers should never self-deploy to a disaster site.

4. **On Arrival:** Volunteers will be instructed to check in with their specific point of contact or supervisor. At check-in volunteers will be asked to present a government-issued photo I.D. such as a driver license, and your clinical license if you are a clinician. Volunteers may receive an *Orientation or Situation Briefing* and a *Safety Briefing*.

In addition to specific instructions for housing, meals, etc. (if deployed outside your local area), volunteers may receive *Just in Time Training* to prepare them to respond to the specific event.

5. **During Assignment:** Consistent with local plans and protocols, volunteers will be assigned to specific duties. Regardless of your job, all volunteers must:
 - **Sign-in** at the beginning of each shift and **sign-out** at the end of shift.
 - Remember that your wellness and safety are the highest priority.
 - Report any personal injuries or illness to your supervisor immediately.
 - Volunteers are expected to keep their home organization aware of their whereabouts as needed and communicate with their family.
 - Remember that the conduct of all volunteers on assignment will reflect on you, your home agency and the entire disaster response operation. Your conduct will impact the people we are serving and we all expect that conduct to be positive.
6. **Demobilization:** You will be “released from duty” when your assignment has been fulfilled. It is essential that you be sure to complete all necessary paperwork as part of the “Demobilization” process. If you are deployed outside your local region, instructions for transportation home may be given.

- 7. Post – Deployment:** Report your safe return home to your local DHV/MRC System Administrator. Be sure your own physical and emotional health is attended to as needed on your return. You can get help in finding mental or physical support if needed. Ask your local DHV or MRC System Administrator for referral information for mental or physical health services.

Managing and preventing stress



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration (SAMHSA)

Center for Mental Health Services

www.samhsa.gov

Tips for Survivors of a Disaster or Other Traumatic Event: MANAGING STRESS

If you were involved in a disaster such as a hurricane, flood, or even terrorism, or another traumatic event like a car crash, you may be affected personally regardless of whether you were hurt or lost a loved one. You can be affected just by witnessing a disaster or other traumatic event. It is common to show signs of stress after exposure to a disaster or other traumatic event, and it is important to monitor your physical and emotional health.

Talk with others who understand and accept how you feel. Reach out to a trusted friend, family member, or faith-based leader to explore what meaning the event may have for you. Connect with other survivors of the disaster or other traumatic events and share your experience.

Body movement helps to get rid of the buildup of extra stress hormones. Exercise once daily or in smaller amounts throughout the day. Be careful not to lift heavy weights. You can damage your muscles if you have too much adrenaline in your system. If you don't like exercise, do something simple, like taking a walk, gently stretching, or meditating.

Take deep breaths. Most people can benefit from taking several deep breaths often throughout the day. Deep breathing can move stress out of your body and help you to calm yourself. It can even help stop a panic attack.

Listen to music. Music is a way to help your body relax naturally. Play music timed to the breath or to your heartbeat. Create a relaxing playlist for yourself and listen to it often.

Pay attention to your physical self. Make sure to get enough sleep and rest each day. Don't leave resting for the weekend. Eat healthy meals and snacks and make sure to drink plenty of water. Avoid caffeine, tobacco, and alcohol, especially in large amounts. Their effects are multiplied under stress and can be harmful, just making things worse.

When Your Stress Is Getting the Best of You Know that distressing feelings about a disaster or traumatic event usually fade over time (2–4 weeks after the event) as you get back to routines—and especially if you have engaged in some ways to help yourself. Try to use some of these tips several times a week.

The above information is an excerpt. The full document can be found at:
<https://store.samhsa.gov/sites/default/files/sma13-4776.pdf>

For more disaster behavioral health resources, see
<https://www.samhsa.gov/dtac/disaster-behavioral-health-resources> .

Working Conditions in Disaster Response

What volunteers need to know about working conditions they can expect while on assignment

It is the responsibility of volunteers to assess their capacity to safely and effectively work in austere conditions. Austere conditions may include:

- Severe weather conditions
- Special, disaster-specific circumstances—such as potential exposure to health risks or hazardous agents—that a volunteer may encounter during deployment.
- Security, crime, and safety conditions
- Nature of food and water resources (e.g., whether DHVs will be consuming Meals Ready to Eat (MREs), etc.)
- Housing/sleeping conditions (staff shelter, tents, hotels, etc.)
- A need for volunteers to bring specialized equipment and supplies
- Special identification and security requirements
- Sparsely available resources (e.g., pharmacy, general merchandise stores)
- Accessibility of structures in which care is to be provided.

Fitness for Duty

Disaster conditions may present DHVs with living, sleeping, and working environments that would impose a strain on an individual volunteer. Each incident requires an assessment of conditions to determine its impact on fitness requirements for volunteers.

It is the responsibility of the sending unit to ensure that the volunteers being sent have a sufficient level of fitness to perform the duties asked of them. It is the responsibility of the individual volunteer to truthfully provide pertinent information regarding fitness and whether a particular assignment would pose a challenge.

If fitness problems occur while on assignment, then negative problems may arise both for the volunteer and for the disaster operation as resources would need to be diverted away from the operation to treat the fitness issues of the volunteer.

Emergency Credential Levels (ECL)

To make the most effective use of health professionals who may have varying levels of clinical competency, the ESAR-VHP program has developed a uniform process for classifying and assigning volunteers into one of four credential levels, based on the credentials provided and verified. So, what does this mean to health professional volunteers? The four credential levels are shown below:

ECL 1	ECL	Identifies volunteers who are clinically active in a hospital, either as an employee or by having hospital privileges.
ECL 2	ECL	Identifies volunteers who are clinically active in a wide variety of settings, such as clinics, nursing homes, and shelters.
ECL 3	ECL	Identifies volunteers who are licensed or certified to practice in the State of California.
ECL 4	ECL	Identifies volunteers who have healthcare experience or education that would be useful for assisting clinicians and providing basic healthcare not controlled by the scope of practice laws (may include health profession students or retired health professionals who no longer hold a license).

Assigning healthcare volunteers to these different levels is important because it:

- Allows volunteer personnel to be allocated according to need
- Permits volunteers to be used at their highest capacity
- Facilitates sharing of volunteer personnel

Employment Verification:

To place volunteers in the first two Emergency Credential Levels, current employment in the specified licensure or certification. EMSA staff may perform this employment verification.





Guidelines and Policies

Activation Policies

NO VOLUNTEER SHOULD SELF-DEPLOY.

Disaster response operations are complicated, and they are being carried out in a chaotic atmosphere. If volunteers self-deploy to a disaster site independently, they unnecessarily complicate response efforts. All requests and activations will follow the Standardized Emergency Management System (SEMS) protocols.

Local jurisdiction activation policies and procedures apply.

Safety

Providing a clean, safe and healthy work environment is a goal for DHVs. No job is considered so important or urgent that volunteers cannot take time to perform their job safely. During your Orientation and Safety Briefing, your supervisor will discuss all applicable safety and health rules with you. If you are unclear about any safety policies and procedures, ask your supervisor. As a DHV, you are responsible for your own safety and health. This includes using all safety devices. You are expected to immediately report all work-related accidents, injuries and illnesses to your supervisor.

Family Emergencies

Family health and safety is paramount for all DHVs. Volunteers should always make sure their families are safe and taken care of before deploying. DHVs should obtain contact information that families can use to communicate with deployed DHVs in case of an emergency.

Family Preparedness Guide

Volunteers should take reasonable steps to prepare themselves and their families to deal with the predictable impact of disasters on themselves or their property. Being prepared will enable volunteers to be better able to accept volunteer disaster deployments if they are requested. For information about family preparedness, please visit FEMA at: <https://www.fema.gov/blog/have-emergency-plan-your-family>

Grooming and Attire

Volunteers are representatives of your local community and need to present a positive image to the public. Image plays an important role in developing and maintaining trust and support. DHVs are expected to maintain a standard of attire and grooming that is consistent with the professional nature of your work and the demands of the work environment. Clothing and accessories should be

chosen with safety as a priority, volunteers who are inappropriately dressed may be asked to change or cover offending items.

Examples of inappropriate attire include, but are not limited to:

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

Equal Opportunity Policy

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

Sexual Harassment Policy

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

Ethics Policy

No volunteer shall solicit or accept anything of value that is of such a character as to manifest a substantial and improper influence upon the volunteer with respect to the person's duties.

Language

DHVs should use appropriate language that is culturally sensitive and politically correct – and avoid language that could be interpreted as offensive.

Smoking

Smoking or chewing tobacco products are not permitted while on duty.

Drug-free

The DHV Program is dedicated to a safe, healthy and drug-free work environment. All DHVs are expected to report to work free from drug and/or alcohol impairment and to remain at work in a condition that enables them to perform their duties in a safe, efficient, legal and professional manner. Volunteers who may have an alcohol and/or drug problem are encouraged to voluntarily seek evaluation and treatment that leads to successful rehabilitation.

Media Protocols

Never talk to the media while deployed unless authorized by the Incident Commander or the Public Information Officer. When authorized to speak to anyone, be accurate, timely and credible. Take time to communicate calmly, clearly and completely. Never say “No Comment.” Instead, say, “How can I get back to you with that information?” Be aware that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules prohibit giving medical and personal data concerning the people you are helping.

Electronic Communications

On-site electronic communication systems, including telephones, email, voice mail, faxes and the internet may or may not be available to conduct professional business and emergency operations. Personal communication devices may be used when not on duty if service is available and the service is not restricted to emergency functions.

Social Media

Facebook, Twitter, YouTube and many other social media sites have grown to become valuable communications tools in our modern digital age. While these communication tools serve valuable roles in disaster, volunteers are cautioned to be very careful in their use of social media. First, Public Information Officers are responsible for all media releases, and this would include social media. Volunteers are also reminded that HIPAA privacy and security rules are intended to protect the health and privacy of the people volunteers will be serving during disaster responses. It is important that we honor and respect individual privacy during disaster response and recovery.

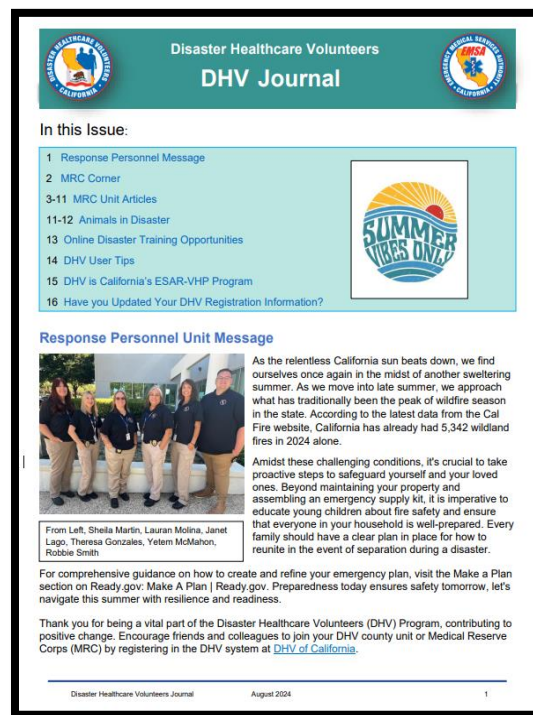
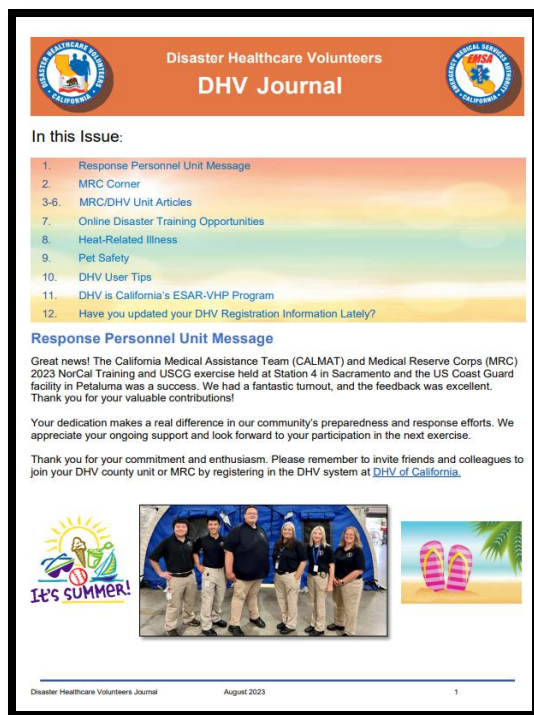
Photography and Video

Photos and videos may be taken during training classes, exercises and other events involving DHVs for documentation, exhibits, promotion, recruiting and/or training. Photographs and videos may be used in print and/or electronic media such as newsletters, newspapers, websites and other publications that may be kept in files and released to the public. DHVs will not be compensated for the

appearance of their image in these photographs and videos. If you do not wish to appear in these photographs and videos, it is your obligation to remove yourself from the vicinity where these photographs and videos are being produced.

DHV Journal

EMSA regularly publishes a newsletter for DHV's in California, titled "DHV Journal." These newsletters offer information about activities and planning for the DHV System, highlights of local DHV and MRC Unit activities, helpful pointers about using the DHV System for updating your personal profile. Current information about Drills, Exercises and/or Real Events in which DHV or MRC volunteers are participating in. DHV Journals are archived at: <https://emsa.ca.gov/disaster-healthcare-volunteers-journal-page/>



DHV Mission Statement:

The Disaster Healthcare Volunteers Program is a statewide program which operates in coordination with county Operational Areas to recruit, register, credential, track, identify, deploy, and maintain currently licensed volunteer healthcare professionals for response to emergencies, disasters and terrorist incidents in California and throughout the nation.



Volunteer Rights and Responsibilities

Rights

Registering as a Disaster Healthcare Volunteer (DHV) is not an obligation to serve. It is always at the individual's discretion. Volunteers may be asked to deploy locally or to other counties within the state. Volunteer periods may extend from a few hours to several days. As a volunteer, you will always be advised of the mission and have the right to accept or decline the assignment. Volunteers also have the right to refuse a medical order that is beyond the volunteer's scope of practice.

Responsibilities

Volunteers are always expected to act in a manner consistent with their professional status and licensure. In agreeing to participate in the DHV Program as a volunteer, each individual acknowledges their understanding of the nature of the volunteer role, the process for verifying credentials, and affirms that all information they give the system will be truthful.

Expectations regarding the nature of the DHVs enrolled in the program have been articulated in the DHV Principles of Operations, the federal ESAR-VHP guidance, and elsewhere. Some of the key expectations and assumptions are listed below:

1. DHVs deployed through the DHV Program are not "first responders." It is assumed that in emergencies and disasters first responders will be appropriately deployed.
2. DHVs are not self-deploying or self-supporting—either as individuals or as units. Thus, deployment of these resources will require organization, preparation, and significant effort on the part of MHOAC programs.
3. Volunteers enrolled in the program are indeed "volunteers." This means that they have a right to be informed about the nature of the incident and what to expect about field conditions, housing, etc. It also means they are not paid for their service and, as volunteers, are not mandated to respond.
4. DHVs are not "assets." Thus, unlike medical supplies, the number and type of volunteers available for a given incident will vary based on individual availability and interest in deploying.



Volunteer Code of Conduct

The purpose of the Disaster Healthcare Volunteer (DHV) Program is to ensure the deployment of competent credentialed healthcare professionals in times of emergency. DHV participants agree to meet the following standards of conduct:

Professional:

- Maintain and abide by the standards of my profession, including licensure, certification and training requirements.
- Treat all individuals with a sense of dignity, respect, and worth.
- Accept assignments appropriate to the level of my skill.
- Be professionally dependable, recognizing the commitment and responsibility in accepting an assignment.
- Act only in the capacity in which I am assigned as a volunteer and refrain from self-deploying, (i.e., going to a disaster area without having been requested by a government agency).
- Comply with all legal requirements associated with my professional status including confidentiality of personal information and reporting of suspected child abuse, or adult abuse and neglect.
- Accept feedback from my supervisor to do the best job possible.

Ethical Conduct:

- Avoid situations that could be interpreted as a conflict of interest and refrain from actions that may be perceived as such.
- Not persuade or pressure anyone to accept my political, cultural, or religious beliefs.
- Not accept tips, request meals to be paid for, or otherwise accept payment for my volunteer work or seek to gain financial benefit from association with the DHV Program.
- Address ethical concerns by speaking directly with the colleague/volunteer with whom I have the concern and, when necessary, report such to my team leader or proper authority in the chain of command.
- Abstain from the use of equipment or resources for personal use.
- Refrain from commenting, answering questions, or divulging any information to the media.
- Refrain from taking pictures or videos, and from posting videos or pictures to the Internet (including sites such as You Tube, Facebook, Twitter), without first receiving authorization from my supervisor or the Public Information Officer.

Safety:

- Follow the directions of my immediate supervisor, team leader, safety officer, incident commander or other appropriate authority.
- Follow safe workplace practices, including participation in applicable education sessions, using appropriate personal safety equipment and reporting accidents, injuries, and unsafe situations.
- Report any suspicious activity to my supervisor.
- Abstain from all illegal activity.
- Abstain from bringing any weapon to a deployment.
- Abstain from bringing children, friends, and pets to a deployment.
- Abstain from the transport, storage, or consumption of alcoholic beverages and/or illegal substances while on deployment.
- Avoid profane and abusive language and disruptive behavior, including behavior that is dangerous to me and others, (including acts of violence, physical abuse, sexual abuse, harassment or horseplay).
- Provide all pertinent and truthful information about my fitness and ability to carry out a particular assignment.
- Ensure that my supervisor, team leader, incident commander or other appropriate authority is aware of my whereabouts and is able to contact me if necessary.
- Wear required identification and clothing if requested to do so. All items of clothing must be suitable for the work environment and should not contain offensive or objectionable material (e.g., slogans or graphics).
- Recognize my responsibility to adhere to the rules and procedures of the DHV Program. Failure to satisfactorily perform my assigned duties, or engaging in illegal activity, or gross misconduct, will cause me to be subject for dismissal from the DHV Program.

Liability and Legal Protections**Disaster Service Workers (DSW) Volunteer Program**

The Disaster Service Worker Volunteer Program (DSWVP) was created as the result of legislation to provide workers' compensation benefits to registered Disaster Service Worker (DSW) volunteers who are injured while participating in authorized disaster-related activities, including pre-approved training. Disaster service, as defined for the Program, is designed to aid in the response and recovery phases in a disaster or emergency. It does not include the day-to-day emergency response activities typically associated with, for example, law enforcement, fire services or emergency medical services. The Program also provides limited immunity from liability.



Enrolling in the DHV Program does NOT register a volunteer as a DSW. To be registered as a DSW, a volunteer must complete a registration form and swear to or affirm a loyalty oath. It is the policy of the DHV Program that all volunteers will be registered as DSWs before being deployed. However, many will enroll in the system before being properly registered as DSWs.

All volunteers must be formally sworn in as Disaster Service Workers prior to initiating any disaster assignments. The volunteer needs to be sworn in by an officially authorized representative in their designated county. Volunteers may also be sworn in by an officially authorized representative of the county to which they have been assigned. Alternatively, an officially authorized state agency representative may perform the swearing in process. Volunteers must be sure to sign the affirmation of oath document. Failure to sign the loyalty oath affirmation voids Disaster Service Worker status.

Some laws and guidelines that apply to volunteering in disasters include the following:

- Disaster Service Worker Volunteer Program Regulations, California Code of Regulations [Title 19, §§ 2570–2733.3](#)
- Disaster Service Worker Volunteer Program Guidance, California Governor's Office of Emergency Services, 2016
- Good Samaritan Act, California [Health and Safety Code § 1799.102](#)
- Volunteer and Donations Management Support Annex, National Response Framework
- Volunteer Protection Act of 1997, [U.S. Public Law 105–19](#)

California Health & Safety Code Division 2.5 Article 4. [Medical Disasters 1797.150-153](#)

Workers Compensation

If you are ill or injured during your assignment, seek immediate medical attention as needed and immediately report the injury or illness to your supervisor. Follow your supervisor's instructions for filing a Worker's Compensation Claim.

Confidentiality and HIPAA Regulations

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



unattended until secured. If you have questions or need clarification during your assignment, you should seek guidance from your direct supervisor.

Training Opportunities

Now that you have registered on the DHV website for possible service during a disaster response, it is important that we alert you to key training opportunities that can give you the basic information you will need to successfully participate as part of a disaster response team. While this training is not “required” we strongly urge you to complete the training as preparation for participation in a future disaster response effort.

This free, on-line training will introduce you to the **Incident Command System (ICS)** used by all California disaster response organizations to manage disaster operations. As you complete any of the disaster training courses, please be sure to inform your local DHV or MRC system administrator so they may be aware of the full range of your training and skill sets. You are also encouraged to log into your profile on the DHV System and record your completion of training in your DHV profile.

The basic training includes:

- IS-100.C: Introduction to the Incident Command System, ICS 100**
- IS-200.C: Basic Incident Command System for Initial Response, ICS-200**
- IS-700.B: An Introduction to the National Incident Management System**
- IS-800.D: National Response Framework, An Introduction**

IS-100.C and IS-200.C are interactive web-based training classes that are important for every person who may serve in a disaster incident.

IS-100.C can be found at:

<https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c&lang=en>

IS-200.C can be found at:

<https://training.fema.gov/is/courseoverview.aspx?code=IS-200.c&lang=en>

National Incident Management System (NIMS) classes start with IS-700.B and IS-800.D. These are also self-paced, web-based interactive classes.

IS-700.B can be found at:

<https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b&lang=en> ;

IS-800.D can be found at:

<https://training.fema.gov/is/courseoverview.aspx?code=IS-800.d&lang=en>

Additional training is available for many of the health and disaster disciplines. <https://training.fema.gov/emi.aspx> is the website for FEMA's Emergency Management Institute (EMI) and is an excellent source for training information. In-person training may also be offered in your local community. To express your interest, please contact your DHV System Administrator.

Emergency Preparedness Resources

Disaster Healthcare Volunteers: www.healthcarevolunteers.ca.gov

Emergency Medical Services Authority: <https://emsa.ca.gov/>

Federal Medical Reserve Corps: <https://aspr.hhs.gov/MRC>

ESAR-VHP: www.phe.gov/esarvhp

DHV Journal and Brochure: <https://emsa.ca.gov/disaster-healthcare-volunteers/>

California Governor's Office of Emergency Services: <https://www.caloes.ca.gov/>

Federal Emergency Management Agency: www.fema.gov

Orientation at Disaster Operations

You will receive an orientation from local disaster officials when you report for assignments. These orientations are intended to provide information about the incident, the assignment, local community conditions and information about specific hazards or concerns. Your safety is always our highest priority.

Just-In-Time Training

This training may be provided as necessary at the mobilization center or deployment site.

Safety Briefings

A safety briefing will be provided at each assignment. Please take it seriously and follow all guidance to help prevent injury or illness. Disaster response often takes place in challenging environments with potential hazards—such as damaged facilities, temporary wiring, altered traffic patterns, or severe weather. Stay alert, protect yourself and your team, and report any hazards to your supervisor or the Safety Officer.

Participation in Non-emergency Events

You may have opportunities to participate in trainings, exercises, and local projects within your county. Your involvement in these activities is encouraged, as they help strengthen your skills and enhance your readiness to respond during emergencies.

Recruitment Message

You have chosen to make a difference when disaster strikes. Do you know of colleagues who share your dedication? Please share the following message with them to join you as a Disaster Healthcare Volunteer!

California is a great place to live, but it's not immune to major disasters. Time and again, Californians step up when help is needed. After 9/11, thousands of healthcare professionals rushed to assist—but without a way to verify credentials, many couldn't be put to work.

To prevent this from happening again, California developed a secure, internet-based system to pre-register healthcare professionals and verify licenses daily. This ensures volunteers can be alerted and deployed quickly during emergencies.

Join the thousands already registered with the **Disaster Healthcare Volunteers (DHV) Program**. It's fast, easy, and essential. We can't wait until lives are at risk to start identifying qualified professionals.

By registering, your credentials are securely verified in advance, so you're ready when disaster strikes. Participation is always voluntary—you decide when and how to respond.

Visit our website to register, learn more, and get answers to common questions. California needs you—be ready to answer the call.

How to Register for Disaster Healthcare Volunteers:

1. Visit <https://healthcarevolunteers.ca.gov/>
2. Click **"REGISTER NOW"** at the bottom of the page.
3. Complete the easy online registration, which includes:
 - License information (if applicable)
 - Contact details
 - Relevant background information

Once registered, your credentials will be pre-validated so you can be deployed quickly and efficiently when needed.

Once I'm registered, what happens next?

1. In a major disaster (earthquake, wildfire, severe storm, or public health emergency), authorized state or county healthcare officials will access the DHV System.
2. If your help is needed, you'll be contacted. If you're available and choose to assist, your info will be shared with emergency officials for coordination.



Appendix A: DHV Privacy Policy

Overview

The State of California Emergency Medical Services Authority (EMSA) is strongly committed to protecting the privacy of registrants of the Disaster Healthcare Volunteers Site (Site) to the extent allowable under applicable California law. EMSA wants to contribute to providing a safe and secure environment for our users.

The purpose of this Privacy Policy is to inform you, as a user of the Site or as a user of any Site content, what kinds of information EMSA will gather about you when you visit the Site, how EMSA may use that information, whether it can be disclosed to anyone, and the choices you have regarding EMSA's use of, and your ability to revise or update, that information. This Privacy Policy applies to the Site and any information collected through this Site. This policy applies only to the Site and any information collected through this Site and not to any other companies' or organizations' Web sites to which this Site links.

Information About All Site Visitors

In general, this Site automatically gathers certain usage information, such as the number and frequency of visitors to the Site. EMSA only uses such data in the aggregate. This aggregate data helps EMSA determine how much certain parts of the Site are used so that EMSA can improve the Site and assure that it is as appealing as it can be for as many users as possible. The Site uses a technology called "cookies" that tells EMSA how and when pages in the Site are visited and by how many users. EMSA may partner with other organizations (such as professional associations) to recruit volunteers through those organization's websites. In such cases, EMSA may provide aggregate statistical information to those partnering organizations to indicate how many volunteers were recruited via partner websites. This reporting is entirely statistical (e.g., how many volunteers were recruited), not lists of names of specific volunteers solicited at a given partner's site. Most browsers are initially set up to accept "cookies." You can reset your browser to refuse all "cookies" or to indicate when a "cookie" is being sent.

Disclosure of Personal Information

When registering on the Site as a volunteer health professional in the Disaster Healthcare Volunteers System, volunteer registrants agree to provide certain personal identifying information and professional credentialing information (collectively, Registration Information). EMSA collects, uses and maintains this Registration Information in implementing the Disaster Healthcare Volunteers System. EMSA does not use the Registration Information provided by volunteer

registrants to the Site except to the extent described in the Site's Terms of Service. EMSA does not disclose any Registration Information provided by volunteer registrants to the Site except to the extent that such disclosure is required pursuant to a California Public Records Act request (Government Code sections 6250, et seq.) Disclosure of highly sensitive personal information will only be done in accordance with the California Information Practices Act (Civil Code 1798.24), and any other relevant state or federal laws. Additionally, as described above, EMSA may share aggregated statistical "ratings" information about the use of this Site with Web site partners.

Site Privacy Policy Changes

If changes are made to this Privacy Policy, EMSA will post those changes online so that users will be informed as to what information is collected, how it is used and whether such information is disclosable.



Appendix B: Frequently Asked Questions

What is California Disaster Healthcare Volunteers? California's initiative to pre-register, manage, and mobilize healthcare professionals to volunteer and help in responding to all types of disasters. The system is part of a nation-wide effort, the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) to make sure that volunteer healthcare professionals can be quickly identified and their credentials checked so that they can be properly utilized in response to disaster.

Who can register with Disaster Healthcare Volunteers? You must be 18 years or older to register.

I am a retired health professional. Can I volunteer? Yes.

I do other volunteering....will this interfere with that? You'll be asked to provide information about any prior commitments so they can be taken into consideration during the deployment planning process. These commitments will be factored into deployment decisions.

What is my responsibility to my current employer? You are responsible for coordinating time off with your employer to volunteer. The system recognizes that your employer may have obligations, including those related to the disaster, and it is up to you to determine how to address those needs. The terms under which time off is granted are strictly between you and your employer. The Disaster Healthcare Volunteers Program does not provide employment protection.

How do I register? Registering is easy—just visit the website at <https://healthcarevolunteers.ca.gov/> and click "Register Now." Have your license details and contact information ready to complete the registration. You can start and stop the process at any time. Simply log in with your username and password to pick up where you left off and finish your registration.

Do I have to have any special training or expertise to volunteer? No. The system is open to any licensed healthcare personnel. There will be no requirement for any specific post-enrollment training. (Specific local units, e.g. Medical Reserve Corps Units, may require orientation and training.) When a volunteer is being deployed, operational area commanders or clinical managers in receiving institutions will try to make assignments based on the evidence of competence and/or experience that is in the system.

Can I get training to be a more effective volunteer? All volunteers are encouraged to seek training opportunities that will make them more effective if deployed to an emergency. (See p. 26.)

How can I ensure that my talents/training/expertise will be utilized? When you register, you will have the opportunity to enter information about your skills, expertise, certifications, etc. At the time of deployment, this information will be considered by those doing the deployment. Efforts will be made to match knowledge, skills, and abilities with needs. You can help ensure the proper match by keeping the information about your own competencies and certifications up to date in the system.

What can I anticipate that I will be asked to do as part of California Disaster Healthcare Volunteers? Assignments will be made by local Medical Health Operational Area Coordinator (MHOAC) program staff and clinical managers at receiving facilities. When making assignments, factors such as licensure, training, experience, competencies, and certifications will be considered. You can expect to be assigned tasks that align with your licensure level, but in some cases, you may be asked to assist with less complex activities. We ask that you approach these tasks with a spirit of volunteerism. However, you should not perform duties outside your professional scope of practice.

Are there any specific health concerns—e.g., vaccinations—that are required for me to participate in California Disaster Healthcare Volunteers? No prior vaccinations are required for volunteers. However, in the event of certain emergencies (e.g., pandemic influenza, bioterrorism), in which a vaccine-preventable infectious agent is involved it is expected that all volunteers will have access to vaccinations prior to being deployed to assist the public.

How will I be notified that my services are requested? When you register you will enter information on the best way to contact you. If a deployment is requested, this is the information that the system will use to contact you. Therefore, please be sure that the information you give is accurate and up to date.

How far would I have to travel? When you register, you will have the opportunity to indicate your willingness to travel. You will be asked if you are willing to volunteer locally, within the state, or even outside the state. These preferences will be considered when deployment decisions are being reached.

Can I specify that I want to volunteer in my own community? Yes. You can indicate that you are only willing to volunteer in your local area.

How long would I have to be gone? During registration, you can indicate your willingness to serve and specify your availability, ranging from two weeks or less

to more than four weeks. Your preferences will be considered when making deployment decisions.

Once I've registered, how should I prepare for deployment? What should I bring with me? You may receive an e-mail about deployment preparation and, of course, you can always check back on the web site for more up to date information. Please see Appendix C for items to bring with you.

Is there any compensation as a Disaster Healthcare Volunteer? Volunteers will not be compensated for their service under the California Disaster Healthcare Volunteers Program. Any person registered in the system as an employee of an entity that will respond to emergencies will be compensated according to the arrangement they have with that entity.

Will I be covered for malpractice? The program does not provide malpractice coverage. All volunteers will be registered as Disaster Service Workers (DSW) as set forth by California law. Under the DSW program, volunteers are given limited immunity from liability. (Registration on the DHV System does not confer Disaster Service Worker Volunteer status. That requires a separate process.)

What happens if I am injured while volunteering? Volunteers shall be registered as Disaster Service Workers. As such, they are eligible for Workers' Compensation benefits as provided for by the State Legislature for injuries incurred while volunteering in an emergency or approved training.

How much personal information do I have to share with California Disaster Healthcare Volunteers? You will be asked to provide your clinical license number, contact information, and some general questions about your health status to assess any limitations to your ability to be deployed.

How safe is the information I share with California Disaster Healthcare Volunteers? The information that is collected as part of enrollment and registration is stored on a highly secured system. Your information will not be sold, shared, or disclosed to any outside parties.

Who will have access to the information in the system? Only officials responsible for maintaining the system or coordinating volunteer deployments will have access to the information you provide. Your information will not be sold, shared, or disclosed to any outside parties.

How often should I update my information? It is requested that you update your information any time there is a change. Also, it is recommended that you check on the information and update as needed every 6 months.



Appendix C: Suggested Items for Deployment

This is a general example of things volunteers may need for a short-term deployment. Items may be added/deleted based on the mission, and adapted to special environmental considerations, weather at the disaster area and personal needs. Pack smart, as you will need to carry your own gear and be aware that firearms of any sort are strictly prohibited.

Identification/Credentials

- Photo ID (Gov't-issued such as a driver license.)
- Clinical License/Certificate

Clothing

- Clinic appropriate clothing (ex. scrubs)
- T-shirts /underwear/socks
- Long pants
- Sweatshirt/Sweater
- Light rain jacket/gear
- Warm coat/jacket
- Closed toe shoes (comfortable/protective)
- Hat w/ a brim
- Pajamas
- Shower shoes (ex. flip-flops)

Hygiene items

- Shampoo/Soap
- Toothbrush/Toothpaste
- Hand sanitizer
- Contact lenses/eyeglasses
- Laundry powder/camp soap
- Sunscreen

Equipment

- Exam kit (stethoscope, thermometer, tongue blades, otoscope, BP cuff, gloves), if indicated
- Penlight
- Ear plugs/eye covers
- Towel/washcloth
- Fanny Pack/Small backpack

Sleeping Gear (may not be needed)

- Sleeping bag/sleeping pad/pillow

Food/Water

- Snacks (such as power bars, granola bars, trail mix)
- Water bottle

Personal Medications

- Personal medications (prescriptions, NSAIDS, vitamins, etc.) Volunteers with legally prescribed medications should plan to bring an adequate supply of those medications as they may not have access to a pharmacy during their deployment.

Miscellaneous

- Cell phone and charger
- Leatherman/other multipurpose tool
- Insect repellent
- Sunglasses
- Cash/ATM/credit card
- Small flashlight or headlight with extra batteries if needed
- Work gloves
- Lock and cable to secure your personal belongings (pack your items in a bag that can accommodate a lock and cable)
- Small Ziploc bags
- Pens/paper
- Leisure(books, playing cards, etc.)



Appendix D: HICS Form 253

Volunteers should be aware of the importance of signing in and signing out at the beginning and end of each shift and at the beginning and end of their deployment. The below form is a modified sample of a HICS Form 253 for an example. The volunteer registration forms may vary at each location but it will always be important to register in and out so the locations of all deployed personnel are accounted for.

HICS 253 - VOLUNTEER REGISTRATION

1. Incident Name				2. Operational Period (#)				
				DATE: FROM: _____ TO: _____				
				TIME: FROM: _____ TO: _____				
3. Registration Information								
NAME <small>(LAST NAME, FIRST NAME)</small>	CERTIFICATION / LICENSE AND NUMBER	ID NUMBER <small>(DRIVERS LICENSE OR SSN)</small>	ADDRESS <small>(CITY, STATE, ZIP)</small>	CONTACT INFO <small>(PHONE, CELL)</small>	BADGE ISSUED	BADGE RETURNED	TIME IN / OUT	SIGNATURE
4. Prepared by								
			PRINT NAME: _____			SIGNATURE: _____		
			DATE/TIME: _____			FACILITY: _____		



Purpose: To document volunteer information for each operational period
 Origination: Labor Pool and Credentialing Unit Leader
 Copies to: Time Unit Leader, Personnel Tracking Manager, and Documentation Unit Leader



Appendix E: Healthcare Occupations

The licenses and certifications of the healthcare occupations listed below are verified daily by the DHV System.

Acupuncturist	Occupational Therapist
Audiologist	Occupational Therapist Assistant
Audiologist Assistant	Optometrist
Certified Nurse Assistant	Pharmacist
Chiropractor	Pharmacy Technician
Clinical Laboratory Scientist	Phlebotomist
Clinical Nurse Specialist	Physical Therapist
Dental Assistant	Physical Therapist Assistant
Dental Hygienist	Physician
Dentist	Physician-Naturopathic
Diagnostic Radiologic Technician	Physician Assistant
EMT	Podiatrist
EMT, Advanced	Psychiatric Technician
EMT, Paramedic	Psychiatric/Mental Health Nurse
Hemodialysis Technician	Psychologist
Home Health Aide	Psychologist, Licensed Educational
Licensed Vocational Nurse	Public Health Nurse
Marriage & Family Therapist	Registered Nurse
Medical and Clinical Lab Technician	Registered Veterinary Technician
Medical and Clinical Lab Technologist	Respiratory Therapist
Midwife	Social Worker, Associate Clinical
Nurse Anesthetist	Social Worker, Licensed Clinical
Nurse Midwife	Speech Language Pathologist
Nurse Practitioner	Speech Language Pathologist Assistant
Nursing Home Administrator	Veterinarian



Appendix F: Acronyms

ACLS	Advanced Cardiac Life Support
ACS	Alternate Care Site
ADA	Americans with Disability Act
Cal OES	The California Governor's Office of Emergency Services
CDPH	California Department of Public Health
CPR	Cardiopulmonary Resuscitation
DHV	Disaster Healthcare Volunteers
DO	Duty Officer
DOC	Department Operations Center
DOM	Deployment Operations Manual
DSW	Disaster Service Worker
DSWVP	Disaster Service Worker Volunteer Program
ECL	Emergency Credential Level
EMAC	Emergency Mutual Assistance Compact
EMSA	Emergency Medical Services Authority
EOC	Emergency Operations Center
EOM	California Public Health and Medical Emergency Operation Manual
ESAR-VHP	Emergency System for Advance Registration of Volunteer Health Professionals
FEMA	Federal Emergency Management Agency
HICS	Hospital Incident Command System
ICS	Incident Command System
MHCC	Medical Health Coordination Center
MHOAC	Medical Health Operational Area Coordinator
MMAA	Master Mutual Aid Agreement
MRC	Medical Reserve Corps
MRE	Meal, Ready to Eat
MST	Mission Support Team
NIMS	National Incident Management System
OA	Operational Area
PALS	Pediatric Advanced Life Support
PPE	Personal Protective Equipment
RDMHC/S	Regional Disaster Medical Health Coordinator/Specialist
RIMS	Response Information Management System
SCIF	State Compensation Insurance Fund
SEMS	Standardized Emergency Management System
SEP	State Emergency Plan
SNF	Skilled Nursing Facility
SUV	Spontaneous Unaffiliated Volunteer
VHP	Volunteer Healthcare Professional



Appendix G: Terms of Service

Registration

By registering on the California Emergency Medical Services Authority's (EMSA) Disaster Healthcare Volunteers Site for health professional volunteers, I agree to be considered for service as a volunteer health professional during a duly declared emergency or disaster. As part of the registration process, I agree to voluntarily provide personal information that will be collected, used and maintained by EMSA in implementing the Disaster Healthcare Volunteers System.

Consent to Use and Disclosure of Personal Information

I understand that the information I provide will be used by EMSA to determine the status of my credential(s), including confirming that my license is current, valid, and free of any restrictions. By registering and agreeing to these Terms of Service, I agree to have the status of my credential(s) verified by federal or California licensing/credentialing authorities. I also understand that the information I provide will be used by EMSA to assign me an emergency credentialing level in accord with applicable emergency credentialing standards. I understand that the assignment of an emergency credentialing level neither designates clinical privileges nor authorizes me to provide health services without proper authorization and supervision. I further understand that, during an emergency or disaster, the information I provide will be used by authorized Disaster Healthcare Volunteers Site administrators and local (county) emergency/disaster managers to assign me to activities for which I am adequately credentialed and by on-site emergency/disaster operational area officials to identify me once I am deployed to the emergency/disaster locale. I understand that if I am a member of a Medical Reserve Corp, the information I provide may be used by the MRC for assignment and deployment purposes. I understand that, if I agree to deploy to a specific emergency/disaster, the information I provide to this Site will be forwarded to operational area officials, and that EMSA can provide no assurances regarding the security and privacy of that information once forwarded to the emergency/disaster operational area. I also acknowledge that the information I submit may be subject to disclosure pursuant to a request under the California Public Records Act (Government Code sections 6250, et seq.) or legal process, such as a court order or subpoena. Disclosure of highly sensitive personal information will only be done in accordance with the California Information Practices Act (Civil Code 1798.24), and any other relevant state or federal laws. I hereby voluntarily consent to the collection, use, and maintenance of my personal information as described herein.

Health Professional Volunteer Selection Process

I understand that the process of being selected for service as a professional health volunteer for a specific emergency/disaster is a process in which the

information I enter at this Site will be evaluated to match mission requirements. I understand that, if selected, I will be contacted by Disaster Healthcare Volunteers Site administrators and/or local (county) emergency/disaster managers, and I will then be given the choice of whether or not I wish to volunteer my services for that specific emergency/disaster. I understand that if I volunteer for service for a specific emergency/disaster, my personal information will be forwarded to the requesting agency in the emergency/disaster operational area. I understand and agree that registering at this Site provides no guarantee or assurance that I will be requested for a specific mission or emergency/disaster deployment. Similarly, I understand and agree that registering at this Site in no way obligates me to participate or deploy for a specific emergency/disaster and that I may decline to participate or deploy for whatever reason I choose.

Statement of Physical and Mental Competence and Assumption of the Risk

I acknowledge that by registering at this Site I am representing that I am of sound physical and mental capacity, and capable of performing in an emergency/disaster setting. I acknowledge that emergency/disaster settings can pose significant psychological and physical hardships and risks to those volunteering their services and that emergency/disaster settings often lack the normal amenities of daily life and accommodations for persons with disabilities. In agreeing to volunteer my services, I agree to accept such conditions and risks voluntarily.

Consent to Volunteer Service and Acceptance of Liability

By registering at this Site, I agree to participate as a volunteer, without compensation or payment for my services. I agree to hold EMSA and the State of California and any of its entities or subdivisions harmless from any claims of civil liability, including but not limited to claims of malpractice or negligence, injury, or death.

Agreement to Non-Commercial Use of Site

By registering and using this site, I am accepting the current Terms of Service. I understand that this registration site is a non-commercial venue which will assist in emergency response services. I agree to not copy, sell, or exploit any portion of this Site for any commercial purpose.

Pledge to Provide Accurate Information

By registering and agreeing to these Terms of Service, I agree that the information I provide and the representations I make at this Site will be truthful, complete, accurate, and free of any attempt to mislead. I understand that I may return to this Site and modify my personal information at any time, and I agree to keep such information updated and current. I agree to protect the confidentiality of the password I have chosen that provides access to my information on this Site, and I agree to abide by all security provisions of this Site.



Appendix H: Distribution of Disaster Healthcare





Appendix I: How to Reach us

US Mail:

California Emergency Medical Services Authority
11120 International Drive, 2nd Floor
Rancho Cordova, CA 95670

Telephone:

Office: 916-322-4336

Email: dhv@emsa.ca.gov

Websites:

The EMSA website is: www.emsa.ca.gov
The Disaster Healthcare Volunteers website is:
<https://healthcarevolunteers.ca.gov/>



Join the Team ... Volunteer!



California Emergency Medical Services Authority