

To Join Contact: Steve Lyday
swlyday@morgancounty.in.gov
765-315-0495

MORGAN COUNTY HEALTH DEPARTMENT

Public Health Volunteer Orientation Handbook



Morgan County Health Department



Public Health
Prevent. Promote. Protect.

Introduction

Volunteers have made valuable contributions throughout this country's history. Volunteers provided and continue to provide, innumerable services such as rebuilding disaster torn communities, participating in mentoring and learning programs, delivering meals to the homebound, building homes, promoting community beautification programs, assisting those in need, and helping to care for the ill. Those are just a few of the valuable contributions that volunteers make every day.

Since 1995, disasters caused by terrorist and by nature have demonstrated how frail our way of life is and how quickly and deeply lives can be changed. However, the focus on improving communities has not been lost; nor has compassion to give to others. Volunteers remind us that good can come from bad and that the human spirit can prevail during difficult times.

The Military, Law Enforcement, and the Fire Service ALL have reserve programs. As a member of the Medical Reserve Corps **YOU ARE** the Health Department Reserves! In the event of a Public Health Emergency MRC member play an essential role in the response.

Welcome

Thank you, Volunteers, for your commitment in helping public health to provides essential services in the community. In exchange for your commitment, you will be provided with the necessary training to ensure that your volunteer experience is productive and personally rewarding. This handbook is the first step in this process. This format will provide some basic information as the foundation upon which training and experience can be built. Volunteering is a way for individuals to participate in public health and have a positive contribution in impacting the overall health of the community.

Mission

*To serve Morgan County residents by **promoting** healthy life styles, **preventing** the cause and spreading of diseases, and **protecting** those in the time of crisis.*

Promote, Prevent, and Protect!

MRC Contact Information

**Steven Wm. Lyday MRC Coordinator
Morgan County Health Department
Suite 252
180 S. Main St
Martinsville, IN 46151
765-342-6621
swlyday@morgancounty.in.gov**

What Roles is the MRC looking for?

The MRC is looking for citizens volunteers with the following **Medical and Non-Medical** skill sets:

| | | |
|----------------------------------|-------------------------|---------------------------------|
| Bi Lingual | Sign Language | Office/Clerical |
| Mental Health/ Counseling | Logistics/Supply | Information Technology |
| Pharmacy | EMT's | Dental Field |
| Educators | Nurses | Patient Care |
| Doctors | Food Services | Child/Special Needs Care |
| HAM Radio Operators | Chaplin's | Physician assistants |

History of the Medical Reserve Corp

After the life-altering events of 9/11, the volunteer physicians recognized the need for an organized group of medical volunteers who would be trained and prepared to provide supplemental medical and public health support in response to emergency operations in New York City. The group submitted a proposal to the city, requesting that a cadre of trained medical volunteers be established; the proposal was later expanded to suggest a nationwide group of volunteers be developed—a concept that eventually reached President George W. Bush and Congress.

A second impetus to the MRC's creation was the response to the anthrax letters in October and November 2001, which was limited mostly to Congressional staff and postal workers. The administration realized that, should large-scale mass dispensing/mass vaccination be required, the United States would need a group of organized volunteers ready to respond.

During President Bush's delivery of the 2002 State of the Union Address, he asked all Americans to volunteer in support of their country. Shortly after this speech, the MRC was formed as a partnership with Citizen Corps, a national network dedicated to ensuring hometown security.

The MRC receives Federal oversight through the Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC), headquartered within the Office of the Surgeon General.

A Look at Today's MRC

The events of 9/11 motivated public health, medical, and nonmedical professionals throughout the country to volunteer in their local communities. The OCVMRC establishes, implements, and sustains MRC units—with a ready force of public health, medical, and non-medical volunteers who are ready, willing, and able to support a variety of preparedness, emergency, and public health activities and initiatives.

As of August 2011, the MRC program covered more than 90 percent of the U.S. population through a force that exceeds 200,000 volunteers in more than 950 geographically based units nationwide.

These volunteers are actively engaged within their local communities and are committed to strengthening public health, emergency response, and community resiliency throughout the United States.

MRC volunteers contribute a variety of public health-related activities to their communities, such as providing flu vaccinations, promoting obesity prevention, and assisting with emergency evacuations. They also responded to recent disasters and emergencies such as Hurricanes Katrina and Rita, the H1N1 pandemic, Midwest floods and tornadoes, and most recently Super Storm Sandy.

What is a Public Health Volunteer? (MRC Member)

A “public health volunteer” is anyone who, without compensation or expectation of compensation beyond reimbursement for actual expenses, performs a task at the direction of and on behalf of the Local Public Health Department. A “public health volunteer” must be officially accepted and enrolled by the public health agency prior to performance of the task.

Criteria for a Public Health Volunteer

- Be a United States Citizen
- Volunteers must be 18 or older. (16 under Adult Supervision)
- Submit to additional screening, e.g. background check, references A class “A” or” B” felony violation which include the offenses against the person; sexual offenses; robbery, arson, burglary, and related offenses would be cause for denial.
- Work in non-hazardous environment and comply with child labor laws
- May be asked to submit to a medical screening and/or may be asked to take vaccination/inoculation/medication if recommended and warranted
- Sign waiver to hold the local public health agency harmless
- Physical able to perform task assigned. (This can be tailored to ability in most cases.)
- Provides agency with list of specific types of work experience, (clerical, licensed medical professional) and works only within their scope of work as outlined by job description
- May be a medical or non-medical professional
- Agrees to attend at least 2 out of 4 quarterly meetings/trainings classes each year.
- Agrees to attend at least 1 of 2 training exercises per year.
- Morgan County Health Department reserves the right to deny an individual the opportunity to be a local public health volunteer if the volunteer is found to misrepresent him/herself during the application process

Non-discrimination

The public health volunteer program does not discriminate against any individual because of race, national origin, color, religion, sex, age, physical or mental handicap, sensory disabilities or veteran status. Likewise, volunteers will be held to the same standard of nondiscrimination while volunteering for the local health agency.

Guidelines and Procedures for Volunteers

Volunteers must comply with the guidelines and procedures outlines in the Volunteer Orientation Handbook. They must also abide by the same rules of conduct, ethical standards, and confidentiality that govern public health agency staff.

Benefits

Potential benefits volunteers experience from their service:

- Gaining work experience
- Developing new skills
- Exploring new careers
- Being involved with the community
- Using their professional skills
- Staying active after retirement
- Helping others and making new friends
- Understanding city/county government and positively influencing its effectiveness
- Having fun

Services to Volunteers

To serve prospective and current volunteers, the local public health agency:

- Conducts screening interviews
- Conducts orientation
- Offers Continuing education for volunteers
- Recognizes the contributions of volunteers

Recording Your Hours

It is extremely important that volunteers sign in and out each and every time they come to volunteer. Why are hours so important? Tracking volunteer hours helps the health department stay informed of the vast and varied contributions that volunteers make. Tracking of volunteer hours is particularly important during emergency response activities. During federally declared disasters, volunteer hours are included in calculations to demonstrate the community's financial contribution to response and recovery efforts. These calculations are used to leverage valuable federal dollars into the community's recovery activities. What's the bottom line? Tracking volunteer hours is crucial.

The MRC of Morgan County encourages all volunteers register for the Presidential Volunteer Service Award. This is also a useful tool to track you service hours.

Please go to <http://www.presidentialserviceawards.gov> for more information

Confidentiality

Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they have access while serving as a volunteer. This includes information concerning personnel matters, members of the community, or related to public health business. All volunteers will receive the same confidentiality training as staff, and sign the same confidentiality statement as staff.

Harassment

It is the intent of the local public health agency that all employees and volunteers work in an environment that is free from discrimination and harassment of any type. Volunteers are expected to maintain professionalism by responding to all with courtesy, helpfulness, and respect regardless of race, national origin, color, religion, sex, age, physical or mental handicap, sensory disabilities, or veteran status. Any reports of discrimination or harassment will be examined impartially and resolved promptly according to agency policy.

Local Public Health Agency property and/or City Property

Volunteers must safeguard agency property and not remove or use government property for any personal purpose. Communication systems including the telephones, e-mail, voice mail, faxes and Internet, are available to conduct public health business in a timely and efficient manner. All communications must be professional and appropriate. Personal use is limited to emergencies. All electronic data are the property of the public health agency and may be considered public record.

Any and all MRC property issued to a volunteer MUST be returned to the MRC should volunteer terminate their service or have his or her service terminated by the MRC within 30 days of termination. Failure to do may result in legal actions.

Attire

Volunteers should wear attire appropriate for the work site location and activity. Maintain a professional image.

Safety and Injuries

Safety and injury prevention of staff and volunteers is very important. The Morgan County Health Dept. follows Occupational Safety and Health Administration (OSHA) guidelines for volunteer safety (per task). The MCHD makes every effort to assign tasks, which do not put volunteers and staff at peril. It is the volunteer's responsibility to immediately report any unsafe condition to their supervisory. If a volunteer has been assigned to complete a task that they feel exceeds their physical capabilities and/or puts them at risk of injury, the volunteer should immediately notify their supervisor so that they can be re-assigned. It is also the volunteer's responsibility to inform their supervisor immediately about any accident or mishap you sustain while volunteering, no matter how minor.

Personal Protection (PPE)

Personal protection equipment such as (but not limited to) gloves, face mask, eye protection, and protective clothing MUST be worn as the situation dictates or as instructed.

Orientation and Training

Volunteers will be provided the orientation, training, and supervision necessary to complete the assigned tasks.

MRC Training Curriculum

The Indiana Serve - IN & MRC training curriculum the national Division of the Civilian Volunteer Medical Reserve Corps and maintains the flexibility to reflect the Core Competencies Matrix developed by specific needs of our communities. The goal is to develop a core group of volunteers with a common level of basic training and allow MRC units within the state to develop training specific to their resources and responses. Implementation of the curriculum requirements will begin 1/1/2012. The curriculum is a multi-tiered structure with different training levels:

- **Tier I** identifies five basic trainings which are appropriate for all volunteers and completion of training is required within one year or within the first year of joining the MRC unit.
- **Tier II** identifies training which is desirable for all volunteers but not required. Specific agencies may require a Tier II course for deployment.
- **Tier III** is agency or deployment specific training, allowing each community to tailor training to their unique needs.
- **Tier IV** includes disaster preparedness education which may be professional discipline specific and other courses that enhance the knowledge of disasters.

| Course Title | Description | Medical | Non-Medical | TRAIN Course # | Web Links |
|--|---|---------|-------------|----------------|---|
| TIER I | | | | | |
| MRC Orientation | Orientation provided by local MRC units. | M | M | 1009215 | www.mrc.train.org |
| FEMA IS-100 Incident Command System | Describes the history, features and principles, and organizational structure of the Incident Command System. | M | M | | http://training.fema.gov/EMIWeb/IS/IS100b.asp |
| FEMA IS-700 National Incident Management System (NIMS) | Introduces and overviews the National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private-sector, and | M | M | | http://training.fema.gov/EMIWeb/IS/IS700a.asp |

| | | | | | |
|---|--|---|---|---------|---|
| | nongovernmental organizations to work together during domestic incidents. | | | | |
| MRC Family Disaster Planning Module -or- FEMA IS-22: Are You Ready? An In-Depth Guide to Citizen Preparedness | This module describes the procedure and steps necessary for the MRC member to protect health, safety, and overall wellbeing of themselves, their families, the team and the community. The focus of the content is on how to develop, practice, and maintain emergency plans that reflect what must be done before, during, and after a disaster to protect people and their property. | M | M | 1009110 | www.mrc.train.org http://www.trainimg.fema.gov/emiweb/is/is22.asp |
| Psychological First Aid | PFA is an evidence-informed modular approach for assisting people in the immediate aftermath of disaster and terrorism: to reduce initial distress, and to foster short and long-term adaptive functioning. Classroom session: http://www.redcross-indy.org/Classes/ | M | M | | http://www.jhsph.edu/preparedness/training/online/dis_mtl_hlth_comp.html |
| TIER II | | | | | |
| Working in a Point of Dispensing (POD) | This course provides you with an understanding of what a POD is, how it operates, and what functional roles you may be assigned as a volunteer serving in a POD. | R | R | | http://www.ualbanycphp.org/learning/registration/tab.cfm?course=pod&s=Overview |
| Terrorism, Preparedness and Public Health: An Introduction | This interactive, web-based Terrorism, Preparedness and Public Health introductory course describes the threats of terrorism and the concept of global biological security. The course covers the interests, motivations, and targets of potential terrorists and weapons that could be used by terrorists. It also explains the threats of emerging infectious diseases as well as threats to food and water supplies. | R | R | | http://www.ualbanycphp.org/learning/registration/tab.cfm?course=terrorism&s=Overview# |
| Basic Disaster Life Support (BDLS) | The BDLS course is a review of the all-hazards topics including natural and accidental man made events, traumatic and explosive events, nuclear and radiological events, biological events, and chemical events. Also included is information on the health care professional's role in the public health and incident management systems, community mental health, and special needs of underserved and vulnerable populations. | R | R | | Not an online course and there is a cost associated. In-person 8 hour course. |
| IS-200 ICS | ICS 200 is designed to enable personnel to operate efficiently during an incident or event within the Incident Command System (ICS). ICS-200 provides training on and resources for personnel who are likely to assume a supervisory position within the ICS. | R | R | | http://training.fema.gov/EMITWeb/IS/IS200a.asp |
| TIER III | | | | | |

| | | | | | |
|---------------------------------------|---|---|---|--|---|
| ICS-300 | This course covers organization and staffing, organizing for incidents and events, resource management, and air operation. *Pre-reqs: ICS 100 and ICS 200 | O | O | | **In-person 2-3 day course** *See additional info below |
| ICS-400 | The target audience for this course is senior personnel who are expected to perform in a management capacity in an Area Command or Multi-agency Coordination Entity. This course provides training on and resources for personnel who require advanced application of the Incident Command System (ICS). This course expands upon information covered in ICS-100 through ICS-300 courses. | O | O | | **In-person 2-3 day course** Check with your local health dept or EMA for more info. Also check IDHS training website: https://myoracle.in.gov/hs/training/public/calendar.do Click on NIMS/ICS |
| Advanced Disaster Life Support (ADLS) | ADLS is an advanced practicum course for the trained BDLS® provider. It is an intensive, 2-day course that allows students to demonstrate competencies in casualty decontamination, specified essential skills, and mass casualty incident information systems/technology applications. Training is focused on the development of hands-on skills to allow participants to apply the knowledge learned in BDLS. | O | O | | *Not an online course and there is a cost associated. In-person 16 hour course. |
| IS-800 National Response Plan | The course introduces participants to the concepts and principles of the National Response Framework. | O | O | | http://training.fema.gov/EMIWeb/IS/IS800b.asp |
| TIER IV | | | | | |
| PH-467 Risk Communications | This course will teach students to be proficient in applying risk communication principles and tools to public health emergencies, including bioterrorism events and threats. | R | R | | *Course no longer available online, link below provides course materials. http://www.midamericacph.com/?page_id=189 |
| UNC 462a Bioterrorism Agents | This training course offered by the Center for Public Health Preparedness at the University of North Carolina (UNC) at Chapel Hill provides an Introduction to Bioterrorist Agents. The format for the course is video. A certificate of completion is provided by UNC. | R | R | | http://www.cdphlms.com/Public/Catalog/Description.aspx?u=KM6WWOgCRpm4LoizA7ytFszT0heEjbd8jKJbPvH82bukX1jsYeiA%2B2oBaAYylogkiNLArvyP7k%3D |
| Cultural Competency | Cultural and language differences may engender misunderstanding, lack of compliance, or other factors that negatively influence clinical situations. Participants in this course will learn how staff members should be trained and educated in cultural competency. | R | R | | https://cccm.thinkculturalhealth.hhs.gov/ *Must register* |

| | | | | | |
|------------------------------|--|---|---|--|--|
| Functional Needs Populations | This course will provide representatives of the functional needs service and support system with the basic information and tools to develop their own emergency plans. This course is designed for people who work with the elderly and people with disabilities, and will teach how to partner with local Emergency Management and better prepare for all phases of an emergency. | O | O | | http://training.fema.gov/EMIWeb/pu/register.asp Select: EMI - G197 Emergency Planning and Special Needs Populations |
|------------------------------|--|---|---|--|--|

Personal Information

Please notify the local public health agency of any changes in name, address, phone number or e-mail address. The health department wants to stay in touch and be able to successfully reach volunteers for placement.

Emergency Contact Information

Please supply the local public health agency with at least two emergency contact names and phone numbers.

Performance Evaluation

Volunteers who are used on a regular basis will be able to attend an evaluation process, similar to the employee evaluation process used by the local public health agency. The evaluation will be placed in the volunteer’s file, which is maintained according to agency policies regarding personnel records.

Resigning or Taking a Leave

Volunteer assignments may end, when the project is complete, when they have completed their specific time commitment, or when they must, for any reason, end their service. If a leave of absence is needed, the volunteer should notify their supervisor as soon as possible, confirm that all volunteer hours are recorded and return any identification badge to the supervisor. The volunteer should ask the supervisor for an exit interview so that the volunteer program can learn and grow from each volunteer experience.

Termination

Volunteers who do not adhere to the guidelines and procedures outlined in this Handbook or who fail to satisfactorily perform their volunteer assignment are subject to dismissal.

Bill of Rights for Volunteers

Every volunteer has:

- 1. The right to be treated as a coworker and not just free help**
- 2. The right to a suitable assignment with consideration for personal preference, temperament, life experience, education and volunteer/employment background**
- 3. The right to know as much about the organization as possible**
 - Its policies
 - Its people
 - Its programs
- 4. The right to training for the job**
 - Thoughtfully planned
 - Effectively presented
- 5. The right to continuing education on the job**
 - Follow-up to initial training
 - Information about new developments
 - Training about new responsibilities
- 6. The right to sound guidance and direction**
 - By someone who is experienced, well-informed, patient and thoughtful
 - someone who has the time to invest in giving guidance
- 7. The right to a place to work**
 - An orderly, designated place
 - place conducive to work
 - place appropriate to the job
- 8. The right to promotions and a variety of experiences**
 - Through advancement to assignments with more responsibility
 - Through transfer from one job to another
- 9. The right to be heard**
 - To have a part in planning
 - To feel free to make suggestions
 - To have respect shown for an honest opinion
- 10. The right to recognition**

By

A

A

Public Health has ten essential services that comprise its three core functions:

- Monitor health status and understand health issues facing the community
- Protect people from health problems and health hazards
- Give people information they need to make healthy choices
- Engage the community to identify and solve health problems
- Enforce public health laws and regulations
- Help people receive health services
- Maintain a competent public health workforce
- Evaluate and improve programs and interventions
- Contribute to and apply the evidence base of public health

Public Health Daily activities

- Prevent heart disease, diabetes, birth defects and substance abuse through early screening, treatment, counseling and education.
- Ensure restaurants and public swimming pools are safe.
- Monitor for West Nile Virus and educate the public on how to avoid contracting it.
- Provide prenatal care for pregnant women and services for children with special needs.
- Immunize children and adults.
- Promote good nutrition and physical fitness.
- Educate and motivate people to adopt healthier lifestyles.
- Educate the public on seat belt, car seat, and pedestrian safety.
- Provide special health care services to refugees, at-risk pregnant women and people with HIV/AIDS.

Emergencies

What is an emergency?

An emergency or disaster can be natural, accidental, or man-made. Natural disasters range from floods, tornadoes, earthquakes, heat waves, to winter storms to name a few. Accidental disasters include things like train wrecks, chemical spills, unintentional explosions and/or fires, and structural collapses. Intentional man-made disasters are terrorist events. These include the intentional exposure and/or release of harmful agents such as toxins, radiological agents, infectious diseases, and bombs.

How does Local and State Government Respond to Emergencies?

All emergencies start at the local level. The level of response expands as resources are exhausted. Some emergencies never expand beyond the local level. For example, a short 5-hour power outage due to a recent storm has affected part of the city. Restoration of power can be done with existing

city resources. So, a request for additional resources from the county, state or federal level is never made. However, a countywide power outage due to a winter ice storm may stretch the city and county governments' abilities to quickly restore power. In this situation, a request would be made for additional resources from the state. Widespread disasters, such as the massive flooding in 1993, require response from all levels of government. Below is a brief description of how each level of government responds to emergencies.

City – The local city government responds to the emergency, supplemented by neighboring communities and volunteer agencies. If the city needs assistance beyond what it is able to provide, its governing body or designated individual may declare a local emergency and request assistance from the county.

County – The county government responds to the emergency, also supplemented by neighboring communities and volunteer agencies. If the event requires assistance beyond what the county is able to provide, it's governing body or designated individual may declare a local emergency and request that the governor do the same and release state assistance.

State – The State Emergency Management Agency (SEMA) responds to the emergency with resources such as the National Guard, assistance from state agencies and financial resources. The governor has the authority to declare a state of emergency in all or any part of the state, and to request federal assistance.

Federal – The Federal Emergency Management Agency (FEMA) evaluates the request for federal assistance and recommends action to the White House based on the emergency or disaster, the local community and the state's ability to recover. The President may declare that a major disaster or emergency exists, thus activating an array of federal programs to assist in the response and recovery effort. Funding comes from the President's Disaster Relief Fund and disaster aid programs of other participating federal agencies.

What is a Public Health Emergency?

A public health emergency is not defined in Indiana laws or administrative regulations.

Across the nation, there is no one definition of a public health emergency. States that do define public health emergencies include some of the following criteria in their definition:

An occurrence of imminent threat of an illness or health condition that

- Is believed to be caused by any of the following
 - Bioterrorism
 - The appearance of a novel or previously controlled or eradicated infectious agent or biological toxin
 - A natural disaster
 - A chemical attack or accidental release
 - A nuclear attack or accident

- Poses a high probability of any of the following harms
 - A large number of deaths in the affected populations
 - A large number of serious or long-term disabilities in the affected population
 - Widespread exposure to an infectious or toxic agent that poses a significant risk of substantial future harm to a large number of people in the affected population

For more information, go to the US Health and Human Services Health Resources Services Administration's webpage: www.hrsa.gov/esarvhp/legregissues/appendix_A.htm

What Activities Might Public Health Do During an Emergency?

Many public health actions during emergencies are an extension of public health's normal activities. However, during an emergency, more public health resources may be focused on:

- Communicating public health information to government officials, health care partners, and the public to keep them informed about health conditions, warnings, and advisories
- Identifying and controlling communicable diseases through surveillance
- Identifying health hazards in the community
- Vaccinating and mass prophylaxis of the public, if warranted
- Collecting and testing specimens such as testing of well water and inspection of donated food and donated water
- Ensuring compliance with emergency sanitation standards for disposal of garbage, sewage, and debris such as inspection of septic systems and advising the public on how to collect household hazardous waste
- Coordinating health and sanitation services at mass care facilities
- Working with other public and private health agencies to coordinate continuous delivery of health care services during and after the disaster
- Ensuring that essential public health services will be able to function during and after the emergency, including maintenance of birth and death records.

Incident Command System (ICS)

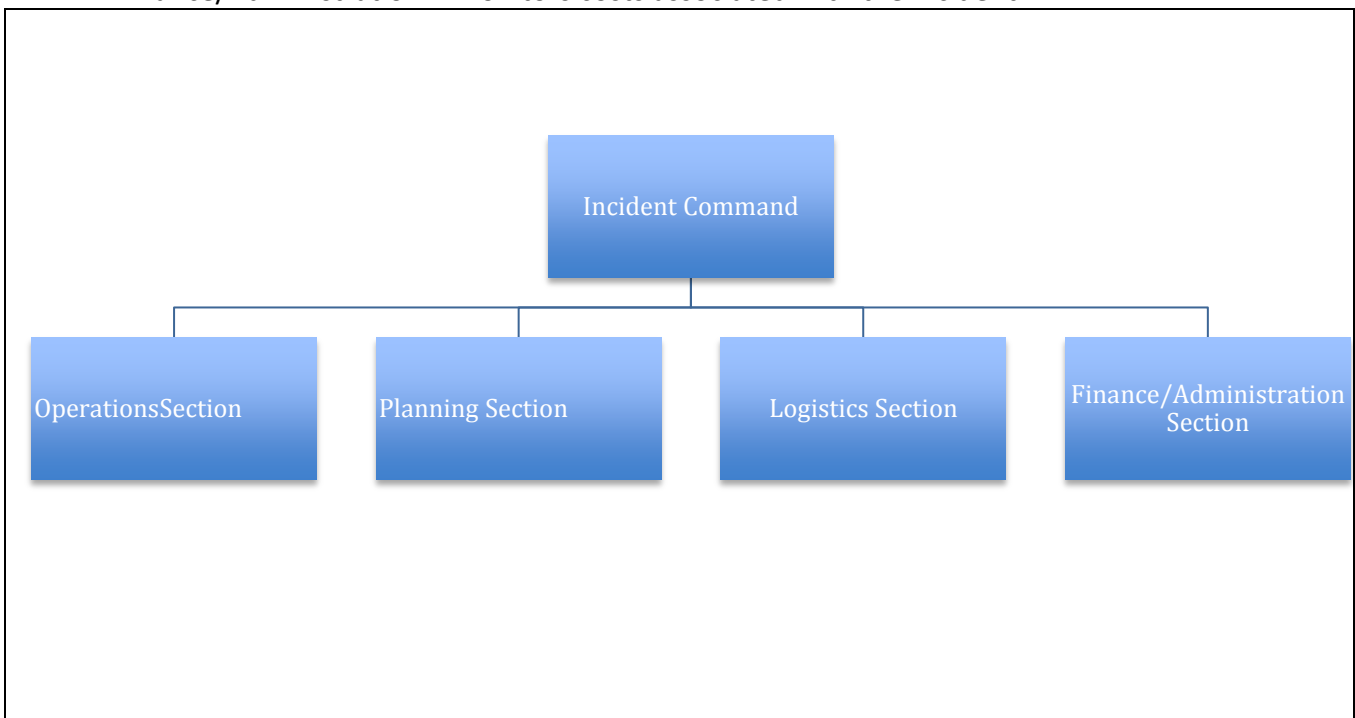
During emergency response, staff and volunteers will be asked to perform tasks that may not be part of their daily activities. Staff and volunteers may report to a different supervisor. They will be asked to operate within the Incident Command System (ICS).

ICS is a standardized, on-scene, all-hazard incident management concept that allows for one coordinated response even when involving partners from different agencies and jurisdictions. ICS does this through a flexible system that allows response workers to adopt an organizational structure according to the complexities of the emergency. ICS has a pre-designed management structure with a clear chain of command and supervision that allows and encourages an efficient system of communication.

Incident Command System

The Incident Commander is in charge of the incident. There are five major management functions in the ICS structure.

- Incident Command – has overall responsibility at the incident site and sets the incident objectives, strategies, and priorities.
- Operations – Develops tactical objectives, directs all tactical resources, and conducts all tactical operations necessary to carry out the plan.
- Planning-Prepares the incident action plan to accomplish the incident objectives. Planning collects information and maintains documentation for the incident.
- Logistics – Provides support, resources, and all services needed to meet the operational objectives.
- Finance/Administration – Monitors costs associated with the incident.



Media Contact

The local public health agency has protocols in place and designated staff trained to handle any situation involving the media. Volunteers should never offer any information or comments to media sources unless otherwise directed by the local public health agency. Always refer the media to the supervisor or the Public Information Officer for the agency.

Are YOU Prepared?

Volunteering is very much like being employed. Volunteers report in, get their assignments for the day, complete their tasks, clock out, and go home. Volunteering during a disaster is very different. If called to volunteer services during a disaster, how quickly could the volunteer respond? Would it be within an hour, 2 hours, 12 hours, 24 hours? What would the volunteer bring and what preparations have been made should the volunteer be away from home for an extended period of time if circumstances prevented them from returning home? Are plans in place for the volunteer's family? These are just a few things to consider when preparing to volunteer for emergencies.

For Family emergency Preparedness Plan forms go to:

<http://www.in.gov/dhs/2779.htm>

Go Kits

Emergencies require a rapid response. The goal of the response is to focus response efforts on the incident. It may be challenging, during the first 72 hours, to bring in basic supplies not only for the community affected but for the responders. Therefore, volunteers and volunteer organizations are encouraged to be self-sustaining for the first 72 hours of the disaster response.

Every volunteer is encouraged to create a "go kit." Go kits contain 3-day worth of basic supplies.

These basic supplies include water, food, battery-powered radio, extra batteries, flashlight, prescription medication, first-aid kit, identification, extra money, and change of clothes. Please go to Ready.gov to obtain a list of items for your go kit.