***Revised February 2023***

**PREPARING FOR**

**HEALTH EMERGENCIES**

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**A GUIDE**

**FOR VOLUNTEERS**

**Provided by the**

**Your POD Name Points of Dispensing (POD) Planning Committee**

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**Planning for**

**Health Emergencies**

In the event of an outbreak of a contagious disease or a bio-terror attack, the Your POD Name POD Planning Committee has an emergency plan for protecting you. Depending on the situation, we may need to immunize or give antibiotics to a large number of people in order to prevent a disease outbreak. Planning has been done in preparation for "Mass Clinics” to treat a large number of people within a 2-3 day period. Since it will take a large number of volunteers to operate these clinics, volunteer groups may be called on to help.

This booklet will provide community volunteers with the basic information they will need if called upon to help with clinic operations.

**Bio-terrorism and**

**Other Disease Threats**

The Center for Disease Control and Prevention (CDC) has identified several diseases which may cause a health emergency, including smallpox, anthrax, plague, tularemia, botulism, and viral hemorrhagic fevers. These diseases are dangerous because they are easily spread person to person or can be made into weapons. They can have a high death rate if not treated. In addition, there is always some risk of an outbreak of a particularly serious strain of influenza.

Whether a health emergency is a result of bio-terrorism or of a natural outbreak, prompt action can limit the spread of these diseases, save lives, and prevent local hospitals from being overwhelmed with seriously ill people.

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**For information about volunteering and training programs, contact:**

Name:

Contact Information:

**You can register to volunteer at a Mass Clinic by visiting our website at** [**https://volunteers.sd.gov**](https://volunteers.sd.gov)

**Event related Information:** during a public health emergency you will be able to access information through the following

* South Dakota Website at <http://sd.gov/>
* South Dakota Department of Health Website at <http://doh.sd.gov/>
* Media broadcasts from local television and radio stations

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**Our Commitment to Volunteers:**

**Notification:** If a major health emergency occurs, you will be contacted by your volunteer organization and given specific instructions. Volunteers will be asked to report to a "staging area" where they will receive information, preventive treatment, and job-specific training before starting to work at a clinic.

**Preventive Treatment:** For the safety and peace of mind of volunteers, preventive treatment will be provided to all volunteers for whom the treatment is recommended before they begin working in Mass Clinics. Families of volunteers for whom the treatment is recommended will also be given priority treatment.

We recommend that volunteers have basic medical information at hand for themselves and all family members, to expedite treatment in an emergency situation.

*This is the information needed in order to dispense preventive medications:*

* **Medications**: What medications are you taking? Are you allergic to any antibiotics or other drugs?
* **Medical Conditions**: Do you or any family members have kidney or liver disease? Are any female family members pregnant?
* **Children**: If your children are under age 9, please provide the child's weight.

**Training:** As a Volunteer, you will receive training on disease agents, how to protect yourself and your family, and mass clinic operations. Training will be done in advance or at the time of the event, so that volunteers are prepared to assume their responsibilities in an emergency.

**Work Specific Information:** Exact starting times will be determined shortly after the activation of the emergency plan. Shifts will be 12-hours in length with a ½ hour overlap at the beginning and end for a total time of 13-hours. Positions will be rotated and breaks will be provided to help avoid fatigue. Volunteers will be directed to bring a sack lunch if meals are not provided.

**Preparedness:** We hope we never have to activate our Health Emergency Plan, but if that ever becomes necessary, trained volunteers will know how to protect themselves and their families.

The more people who are prepared, the safer our community will be!

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**Health Emergencies**

**and Public Health Actions**

The chart below is a summary of the diseases the Center for Disease Control considers most serious and the actions which would be taken if these diseases occurred in our area.

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| --- | --- | --- |
| **Disease** | **Description/Risks** | **Public Health Actions** |
| **Smallpox** | Viral infection which causes skin lesions similar to chicken pox. Contagious. High death rate among unvaccinated people. | Vaccination Clinics |
| **Anthrax** (Inhaled) | Not contagious; spread by spores, which can be weaponized. High death rate if not treated early. | Antibiotic Dispensing Clinics |
| **Plague** | Bubonic: spread by bites from infected fleas. Lymph nodes become swollen/inflamed.Pneumonic: Severe respiratory infection. High death rate if not treated early. | Antibiotic Dispensing Clinics |
| **Tularemia** | Occurs naturally in animals, but not spread human-to-human. In natural form, can cause sores. In weaponized form, can cause severe respiratory infection. | Antibiotic Dispensing Clinics |
| **Botulism** | Not contagious. Bacteria, which occurs naturally, produces a toxin which causes paralysis. | Remove source of bacteria |
| **Viral Hemorrhagic Fevers** | Not native to US; occurs in Africa and South America. Carried by "vector" animals, but may be transmitted human-to-human. | Isolation/quarantine.(No vaccine available. Does not respond to antibiotics) |
| **SARS** | Severe respiratory infection caused by virus. Very contagious. | Isolation/quarantine.(No vaccine available. Does not respond to antibiotics) |
| **Influenza Outbreak** | Caused by viruses and very contagious. Capable of mutating into new and more deadly strains. | Influenza immunization clinics. |

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**Mass Clinic Operations**

Some of these disease threats require operating Mass Clinics to immunize or give preventive medications to the general public *before* they become ill. In this type of emergency, the community will open clinics to serve the needs of the public.

Below is a diagram of the work stations which would be set up in a mass clinic and the order in which patients would move through the stations.

Volunteer information sheets will be made available to explain your roles and responsibilities for clinic operations.

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**Volunteer Roles**

Volunteers from within the community will work to give preventive treatment to a large number of people quickly. Some of the volunteer assignments must be done by doctors, nurses, or other health professionals. Other assignments can be done by volunteers with no medical training.

**1. Greeting and Screening**: Volunteers will greet people and ask specific questions to verify that people who enter the clinic do not have symptoms of the disease. If so, they will be directed to a separate area where they can be treated without exposing other people.

**2. Forms Distribution:** Volunteers will give medical history forms to patients. This information will be used by medical workers to decide on the best course of treatment.

**3. Patient Education and Forms Completion:** At this station, volunteers will give patients information about the disease and the preventive treatment which will be given, either in video or handout form. Patients may need help filling out their forms.

**4. Forms Review:** A volunteer will review the medical history forms for conditions which may need special attention. Patients will either be referred to Medical Advice or to Treatment.

At **Medical Advice**, patients will talk to a licensed health professional one-on-one about any medical conditions which may require special consideration before they are treated.

**5. Treatment:** At this station, patients will receive preventive treatment. For smallpox or influenza, patients will be immunized by a health care professional. For diseases such as anthrax or plague, patients will be given a supply of antibiotics which will prevent the disease.

**6. Exit Education**: As patients leave, volunteers will give them information about follow-up care. People who have been vaccinated for smallpox will receive an information sheet on caring for the vaccination site. People who have been given antibiotics will receive an information sheet on the medication they received.

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