Managing the Risks of Incorporating Volunteers Into Public Health Emergency Response: The Other Side of the Liability Issue

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The Medical Reserve Corps (MRC), a national network of locally based volunteer groups, engages medical, public health, and other volunteers to strengthen public health, emergency response, and community resiliency within their neighborhoods, towns, and cities. As the MRC program has developed since 2002, several common themes have appeared in conversations with leaders at all levels. One of the most common concerns is that of liability protection for MRC volunteers. Issues related to legal liability are frequently cited as a strong concern by health care providers when discussing the potential of volunteering during public health emergencies and the integration of volunteers into response is often affected by concerns related to liability.

When MRC unit leaders were queried about plans to activate volunteers in response to the 2009 H1N1 influenza outbreak, 19% of respondents cited liability concerns as a barrier to volunteer involvement. This concern persisted despite the declaration by the Secretary of Health and Human Services under the Public Readiness and Emergency Preparedness Act (PREP Act), which provided immunity to those who dispensed the H1N1 vaccines. This exemplifies the confusion surrounding liability issues. Liability concerns may continue to hinder the integration of volunteers during a response and serve as a deterrent to potential volunteers who have concerns about personal liability.

Much has been written about liability protection and sources of immunity that are available to volunteers.^{3,4} Although comprehensive immunity provisions for emergency responders could certainly improve the effectiveness of response efforts, there is danger in focusing solely on the legal liability issues. First, protecting volunteers from liability does not prevent harm. The priority of any volunteer organization should be to protect from harm the volunteers and those they serve. Second, although volunteers and the organizations that work with them may be protected against claims, the laws cannot protect the organizations' reputation, funding, partnerships, or ability to recruit volunteers. Third, although most immunity provisions protect volunteers who are acting within the scope of their duty, none protect volunteers who engage in willful or wanton misconduct. Organizations are therefore not protected from liability for the actions of volunteers who engage in such conduct.

Risk management activities can help to protect the organization and its volunteers while providing a safe, supportive working environment for volunteers as they seek to serve the program's mission. This article explores the incorporation of risk management strategies into the volunteer management of MRC units and other organizations that integrate volunteers into preparedness, response, and ongoing public health activities. In addition to outlining risk management strategies for volunteer organizations, this article also seeks to inform potential volunteers about what to look for when considering volunteer opportunities.

RISK MANAGEMENT

Risk management is the process of identifying the potential risks faced by an organization and seeking ways to remove or mitigate those risks. Every activity involves risk. The activities undertaken by MRC and other emergency response volunteers, by their very nature, involve specific risks. Although an organization cannot eliminate all risk and still accomplish its mission, it can take steps to reduce the risk involved while protecting the organization, its volunteers, and the people it serves.⁵

The basic purpose of any volunteer program's risk management plan is 3-fold:

- To reduce the risk of harm (intended or unintended) to the individuals who are served by the volunteers and to the volunteers themselves
- To reduce the risk of financial loss to the volunteers and the agency for which they volunteer
- To reduce the potential for damage to the agency's intangible assets such as its reputation, its partnerships, and its ability to recruit volunteers and raise funds

Every organization will implement risk management techniques differently based upon the context in which it operates. Both the Public Entity Risk Institute and the Nonprofit Risk Management Center provide information and tools to help organizations identify and manage risk.⁶

General Principles of Risk Management in Volunteer Programs

Selecting Volunteers

The process of recruiting and screening volunteers ensures that they are a good match for their roles. Clear recruiting messages manage risk by helping potential volunteers to determine whether the volunteer opportunity is "a good fit." Risk management practices should be considered during volunteer selection activities, including recruiting, application processing, screening, and credentialing of licensed volunteers.⁷

Medical Reserve Corps units and other organizations generally use some or all of the following screening tools: interviews, reference checks, felon and sex offender database checks, and criminal background checks. Before performing reference or background checks on volunteers, the agency should determine how this information will be used and what information will disqualify a potential volunteer. Transparency in the screening process is crucial, not only for building volunteers' trust of the organization but also because it gives volunteers the opportunity to self-select (ie, if a volunteer is aware that he or she does not meet the screening criteria). Because criminal background check systems are not infallible, an appeals process should also be implemented in the event that a potential volunteer wishes to challenge a screening decision. Although not every organization can afford to pay the full price for criminal background checks through private providers, organizations may be able to work with community partners to obtain records for low or no cost. For example, MRC units in Kentucky have worked out an agreement with the Administrative Office of the Courts to provide criminal background checks, and many use the same written criteria for selecting volunteers. When developing screening criteria, it may be helpful to share criteria between organizations. In planning for joint response activities, such as colocated Red Cross and medical/special needs shelters, knowing in advance that all of the volunteers are screened the same way can increase the comfort level of both partners.

For medical professionals who wish to volunteer in emergency-response situations, the verification of professional credentials is another step in the screening process. Volunteer organizations have taken a variety of approaches to the credentialing process, from verification through online databases to partnering with hospital systems to provide in-depth credential verification, including verification of employment and education. Each state is charged with developing a database of credentialed health and medical volunteers through the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP). ESAR-VHP provides national standards for the credentialing of health and medical volunteers. Many MRC units participate in their individual state's ESAR-VHP systems and rely on these databases for credentialing their volunteers.

Because both the volunteer screening process and the credentialing process involve sensitive information, protecting the privacy of volunteers' information is also an aspect of risk management for volunteer organizations. Collecting and storing personal information about volunteers brings with it a responsibility to collect only information that is absolutely necessary and to protect that information from unauthorized use. Failure to protect this information opens up the organization to liability. Organizations can develop policies for the collection, storage, and disposal of personal information and limit access to volunteers' information. If private vendors are used for background checks or credentialing, then the vendors' privacy policies should also be reviewed. ¹⁰

Preparing Volunteers

The better prepared a volunteer is to fill his or her role, the smaller the chance of unintended harm. Volunteers need to know not only what they should do but also what they should not do. As part of this strategy, organizations should make available volunteer position descriptions, a code of conduct, and appropriate training courses and exercises. 11 Volunteers who are unwilling or unable to fulfill their duties or abide by the organization's regulations can be reassigned or their volunteer service terminated. One of the ways in which organizations can prepare their volunteers to participate in a response is to make sure that they have at least a basic understanding of the Incident Command System (ICS). The ICS is the standard for management of emergencies (and nonemergency events) of any size. Having knowledge of the ICS allows volunteers to integrate into an organizational structure with other response partners and understand crucial concepts such as chain of command.

An understanding of ICS and the National Incident Management System is one of the MRC core competencies. ¹² Medical Reserve Corps units across the country use the MRC core competencies as the basis for their training plans, and they participate in exercises such as the Empire '09 exercise in Albany, New York, or the annual off-shore rescue operations drill in Santa Barbara, California.

Activating Volunteers

A clear and practiced activation plan can help ensure that volunteers understand their mission and the policies that provide for their physical and emotional well-being. Volunteer organizations and their response partners must develop an activation plan that details who has the authority to activate the volunteers and how the volunteers will be notified of the activation. Volunteers need to have a clear understanding of when and how they will be notified and how they are to respond. Failure to develop and practice an activation plan in conjunction with local response partners can lead to confusion about when and where volunteers will be used. This can cause underutilization of volunteers if response partners are unclear about how volunteers can be activated. The worst-case scenario is that volunteers "self-deploy" in a response, which can harm the organization's reputation with its response partners, hindering participation in future response efforts.

Volunteers should also have in place family and workplace preparedness plans. The Office of the Civilian Volunteer Medical Reserve Corps is building these practices into its plans for federal deployment of MRC volunteers. At the local level, the Allegheny County, Pennsylvania, MRC provides its volunteers with training to prepare them for deployment. Several MRC units also provide preparedness plan templates and even starter preparedness kits to volunteers to assist them in developing family preparedness plans.

Supervising Volunteers

When planning for supervision, organizations should consider the level of screening of the volunteer completed, the amount of training completed by the volunteer, the context of the vol-

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unteer's service, and the vulnerability of the individuals served. Not every organization has the resources to perform criminal background checks on every volunteer. In some states, volunteers who have not undergone a criminal background check will not be allowed to work with vulnerable populations in settings such as shelters. Even in states where this is not the case, particular care must be taken to provide additional supervision when volunteers are working with vulnerable populations. This is another area in which an understanding of the ICS is valuable. Establishing an organizational structure in which there is the proper span of control allows for effective supervision and communication. In the ICS, a single person's span of control should not exceed 3 to 7 resources. This ensures that no one person has too many individuals reporting to him or her. 14

Protecting Volunteers

Volunteers should be provided with the personal protective equipment they need to fill their roles safely and be trained in how to use the protective equipment. This may include training in bloodborne pathogens, safe patient handling, or the correct use of surgical masks and respirators, depending on the setting in which the volunteer will be working. The areas in which volunteers work need to be safe and organizations must work hard to protect the physical and emotional well-being of the volunteers. This may mean that there will be activities in which volunteers will not participate because of unsafe work environments or the lack of protective equipment. Many agencies will already have policies in place for the protection of employee well-being, which can be applied to volunteers as well. For additional information on emergency response, organizations can turn to agencies, such as the National Institute for Occupational Safety and Health, that provide guidance on a variety of topics related to the health and safety of emergency responders. 15 Local MRC units are encouraged to develop policies for ensuring the well-being of their volunteers. The Indian River MRC in Vero Beach, Florida, provides personal protective equipment training to its volunteers. Many MRC units also provide training in psychological first aid, which prepares volunteers not only to assist others but also to care for their own emotional well-being. Although more jurisdictions are developing liability protections for volunteers in disaster response, many still neglect the issue of compensation for volunteers who become ill or injured in the course of their volunteer activities. Few states incorporate disaster volunteers into their workers' compensation plans. Potential volunteers should be made aware of what protections are and are not available so that they can make informed decisions about their volunteer service.

CONCLUSIONS

It is important for MRC volunteers to have legal protections, but liability is only 1 of the hazards faced by volunteer programs. Careful management of the risks inherent in providing public health and medical services during an emergency and throughout the year is crucial to protecting the health and safety of the volunteers and the people they serve. As states and local jurisdictions move forward in implementing legal protec-

tion for volunteers, volunteer organizations should also move forward in ensuring that appropriate risk management strategies are in place.

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