



Table of Contents

Table of Contents.....	1
Mission Statement	3
Ethics Statement	4
Code of Conduct	5
IEMA Personal Oath	7
Deployment Phases.....	8
General Organizational Chart	9
MEMBER RESPONSIBILITIES	10
Eligibility.....	10
General Requirements.....	11
Physical Fitness	11
Criminal Background Checks.....	11
IMERT Uniform.....	12
Employer Support Letter.....	11
Inactive Member Status	14
Termination of Membership	15
Resignation.....	15
Maintaining Current Contact Information.....	11
TRAINING REQUIREMENTS	17
Pre-Requisites	17
Orientation	18
Continual Annual Training and Competency Requirements	19
POSITION DESCRIPTIONS	21
Chief Nursing Officer	21
Medical Team Lead.....	21
Physician	21
Registered Nurse	23
Paramedic (EMT-P or EMT-I).....	24



policy and procedure manual

EMT-B	25
Mental Health Specialist	26
Logistics Specialist	27
Communications Specialist	28
Safety Specialist	29
Information Technologies Specialist	31
Vehicle Operator Specialist	32
DEPLOYMENT POLICIES AND PROCEDURES	33
General Team Deployment	33
Pre and Post Deployment Medical Evaluation & Procedure	34
Deployment Advisories and Warning Orders	35
Activation Protocol	36
Recommended Personal Cache	37
Work Cycle Guidelines and Shift Rotation	38
Injury/Illness on Duty	39
Convoy Travel	40
Reimbursement	43
Lodging	44
Narcotic Recording and Monitoring	45
Restraints and Seclusion	46



Mission Statement

IMERT is a nonprofit organization designated to provide interim medical care when an event overwhelms, paralyzes or destroys the existing health care infrastructure.

IMERT works to support Illinois by maintaining 24 hour operational readiness to lend medical assistance in times of disaster throughout the state.

This also involves enhancing awareness in our communities through education and training and collaborating with other preparedness agencies to enhance the overall capability of the state of Illinois to respond to emergencies.

IMERT is a recognized Mission Support Team of the Illinois Emergency Management Agency. IMERT operates using the National Incident Management System (NIMS) as outlined in Homeland Security Presidential Directive 5 and as adopted by the State of Illinois.

IMERT is supported by grants from the Illinois Department of Public Health.



Ethics Statement

When called into service IMERT members will conduct themselves in a manner befitting their profession and as representatives of the State of Illinois. IMERT members will strive at all times to conduct themselves with compassion and respect for the inherent dignity of our patients their families, and the community.



Code of Conduct

Recognizing that IMERT has an integral role in the emergency medical response capabilities of the State of Illinois, IMERT volunteers agree to adhere to this Code of Conduct in order to ensure that response operations are conducted in the most professional and comprehensive manner possible. When activated into service your conduct should always be professional and demonstrate respect for the community and people you are assisting. It is your responsibility to be familiar with and adhere to this Code of Conduct.

Violation of the Code of Conduct may result in removal from the disaster site and suspension or removal from IMERT. Any case of misconduct will be handled by the Medical Director and/or the Executive Director for IMERT.

- 1) Team members will conduct themselves with the character, spirit, appearance, and language of a professional at all times while activated with IMERT.
- 2) All information about a patient and/or team member should be considered confidential.
- 3) Team members will meet all training and education requirements specific to their position.
- 4) Failure to report for duty when and where you agreed without legitimate reason or attempt to contact designated personnel will be considered misconduct. Responding to a site as an IMERT team member when NOT officially activated is strictly prohibited.
- 5) Any unauthorized interaction with the media as a representative of IMERT or while on duty with IMERT is prohibited. This also includes social media use while on duty.
- 6) Any article written or public presentation by a member or any personal news release for publication regarding an official deployment or other IMERT activities must be approved by the Medical Director and/or the Executive Director of IMERT.
- 7) Any unauthorized audiovisual recordings and photos (either by cell phone or camera) of actual scene activity is prohibited.
- 8) The use of personal electronics (iPods, computers, etc.) and cell phones in a “controlled area” is not allowed.
- 9) Local government laws and ordinances will be adhered to. Being activated does not allow IMERT personnel to ignore local laws. Members are responsible for their own actions.
- 10) Entering into unauthorized contracts for goods or services in the name of IMERT is strictly prohibited.
- 11) Acting as an official IMERT representative to outside agencies, organizations, groups, or partners without express and ongoing permission of IMERT’s Director is prohibited.



➞ policy and procedure manual

- 12) Acceptance of any bribe of money, goods, or services is prohibited.
- 13) The use of any illegal drug or abuse of any prescription medication at any time while on activation is strictly prohibited. IMERT policy is equivalent to the drug-free workplace guidance established by Congress.
- 14) Consumption of alcoholic beverages while on deployment is prohibited.
- 15) Firearms are prohibited at deployments and all other IMERT activities.
- 16) Harassment of any kind (sexual, hazing, intimidation, etc.) will not be tolerated.
- 17) IMERT uniforms shall only be worn at approved functions and deployments.
- 18) All equipment, ID badges and uniforms will be returned upon resignation or change in activity status from IMERT.

I ACCEPT. I have read and understand the above code of conduct and I agree to adhere to all items contained therein. I recognize that failure to do so may cause my membership with IMERT to be revoked.

Printed Name
Team Member

Signature

Date



**IEMA Personal Oath
Volunteer Capacity**

Pursuant to 20 ILCS 3305/20, Section 20 Emergency Management

I, _____, do solemnly swear (or affirm) that I will support and defend and bear true faith and allegiance to the constitution of the United States and the constitution of the State of Illinois, and the territory, institutions and facilities thereof, both public and private, against all enemies, foreign and domestic; that I take this obligation freely, without any mental reservations or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter. And I do further swear (or affirm) that I do not advocate, or am I not or have I been a member of any political party or organization that advocates the overthrow of the Government of the United States or of this State by force or violence; and that during such time that I am affiliated with the IL Emergency Management Agency or the Illinois Medical Emergency Response Team (IMERT), I will not advocate nor become a member of any political party or organization that advocates the overthrow of the Government of the United States or this State by force or violence.

Subscribed and sworn to before

me this _____ day of _____

20__ A.D.

Signature of IMERT Volunteer

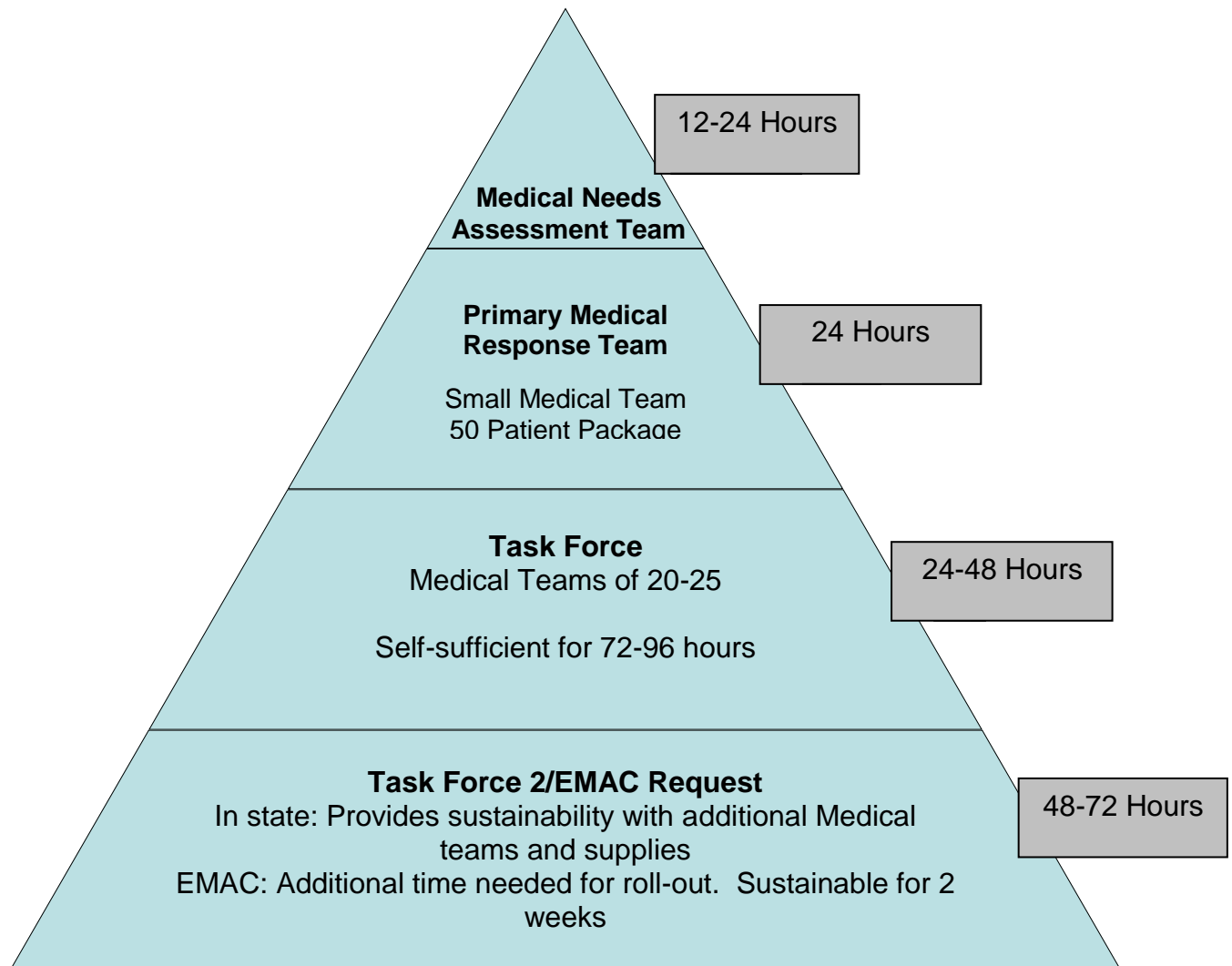
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Notary Public

City State



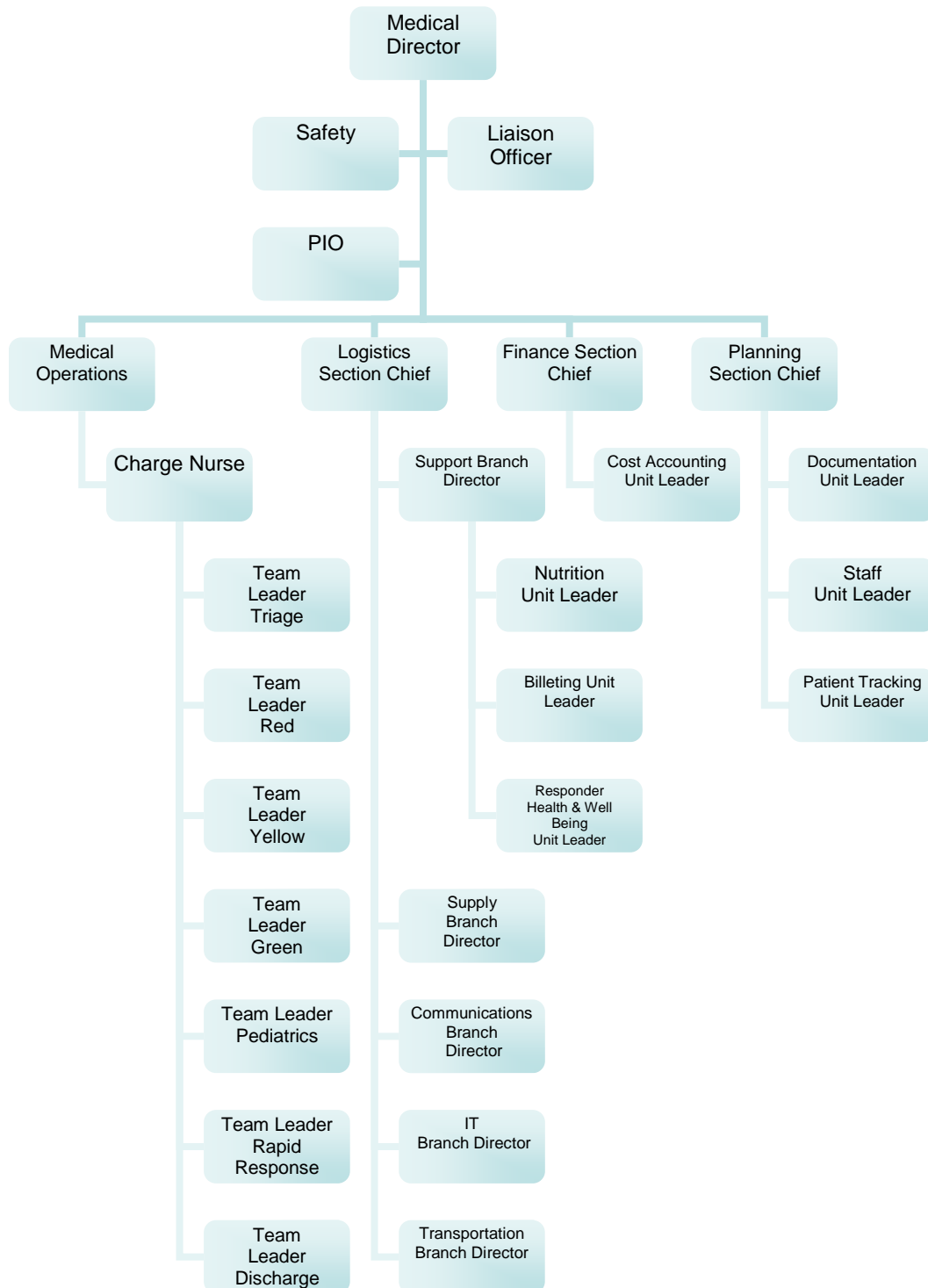
Deployment Phases





General Organizational Chart

Actual organizational setup is mission dependent. Not every position may be needed or filled on each deployment or training. Some individuals may also take on multiple roles.





MEMBER RESPONSIBILITIES

Eligibility

IMERT

Medical Team: physicians, nurses, and emergency medical technicians, and allied health personnel with an unencumbered current license to practice in that capacity in the State of Illinois.

Mental Health: individuals with professional experience/expertise in behavioral health and crisis intervention who complete the prescribed pre-requisites.

Support Team: individuals with backgrounds/expertise in logistics, communications, safety, information technologies, carpentry, and mechanical maintenance.



General Requirements

The following are general requirements that all IMERT members should meet in order to comply with mobilization standards and performance requirements.

- Must be at least 18 years of age.
- Must be a citizen or permanent resident of the U.S.
- Must maintain a current and unrestricted license, certification, or registration where required by the Team position.
- Must be physically fit to handle the rigors of disaster event environments. There can be no physical or mental handicaps, limitations or conditions that would preclude the safe performance of essential job duties.
- Must maintain a text messaging device to receive communication in the event of deployment.
- Must meet all individual Team qualifications for the appropriate position.
- Must sign and adhere to the Code of Conduct.
- Must sign and adhere to the IEMA oath.

Physical Fitness

Moderate physical fitness requirement – The duties require occasional fieldwork performed by individuals with average endurance and physical conditioning. Disasters demand strenuous activity over long periods of time often in an austere environment. Activities include standing for long periods, walking, stooping, and moderate lifting. Long hours of work may be necessary; 12 hour shifts are typical on deployment.

Volunteers should be physically able to carry their personal bag and supplies 1 mile within 25 minutes.

Criminal Background Checks

All IMERT team members are subject to criminal background checks at the time of acceptance to the team as well as periodically throughout their tenure as team members per the direction of IDPH and/or IEMA. All background check matches will be reviewed by the Director of Operations and/or the Medical Director.

Convictions which serve as a bar to licensure/employment that allows access to children in the State of Illinois will be grounds for denial of membership or removal from the team. All background checks will be reviewed by the Director of Operations and the Medical Director on a case-by-case basis. Members deemed ineligible due to history are not entitled to appeal and all decisions by the Directors are final.



IMERT Uniform

Purpose:

The guideline details the proper way to wear the official IMERT uniform as well as optional uniforms.

1. The IMERT uniform shall only be worn to IMERT sponsored events (training, deployments, meetings etc.) or if requested by the IMERT staff. If you are unsure if wearing your IMERT uniform is appropriate dress then please contact a staff member
2. The IMERT uniform consist of:
 - a. Black, grey, or red IMERT uniform t-shirt and Black IMERT uniform windbreaker or Red RN uniform windbreaker.
 - i. Black or Red uniform t-shirts are issued to each member at and/or following their Deployment Validation training.
 - b. Grey (summer) uniform t-shirts are sold through the IMERT Store and can be worn to IMERT sanctioned events from Memorial Day through Labor Day. The Team Commander or his designee can approve wearing this item at events that fall outside of the summer timeframe.
 - c. Red IMERT polo shirts are issued to Command Staff and at special event trainings.
3. Khaki or black pants
4. Khaki or black steel-toe work boots
5. All team members will be in uniform for all training sessions and IMERT deployments unless otherwise directed.
6. During a team member's call cycle their uniform shall be neat and ready at all times.
7. Additional clothing, pins etc may only be worn with the permission of the Director.



Employer Support Request

To Whom It May Concern:

The Illinois Medical Emergency Response Team (IMERT) is a volunteer organization, under the direction of the Illinois Department of Public Health. The mission of IMERT is to provide medical care personnel to assist state and local health officials in providing emergency medical treatment at mass casualty incidents. These incidents may include those that result from acts of terrorism, including, but not limited to, chemical, biological, and radiological incidents.

The IMERT concept of a state medical response team is unique to Illinois. IMERT is included in the Illinois Emergency Management Agency (IEMA) statewide disaster response algorithm. The Director of Public Health, upon request from the Governor, activates IMERT teams.

Members of IMERT are asked to commit to being deployed for 72 hours in the event IMERT is activated in Illinois. This means that individuals may be required to take time off work in the event a response is needed. The assurance your employee needs is that if and when his or her services are required, as his or her employer you will support him or her for the time necessary to respond to the site of a disaster to provide emergency medical care. If for any reason an IMERT member cannot be released by their employer they will still maintain their membership according to the limitations described in the IMERT policy and procedure manual. IMERT recognizes that not all members will be able to leave for every deployment due to either work or personal obligations.

IMERT members may also have the opportunity to participate in out-of-state Emergency Management Assistance Compact (EMAC) missions. EMAC missions are fulfilled by members who are not on-call and are not a mandatory requirement of IMERT participation. If IMERT is deployed on an extended EMAC mission you, as the employer, would be reimbursed for the team member's wages as well as overtime expenses incurred for the length of the EMAC mission.

As an IMERT member, your employee is a volunteer who will devote their own time and energy to train and make themselves available to respond to an unexpected disaster. We would like to take this opportunity to thank you for supporting your employee's participation in this important endeavor. If you have any questions about IMERT, please do not hesitate to call the IMERT office at (630) 701-5344 and speak with a staff member.



Inactive Member Status

A member can request to be placed on inactive status with IMERT at any time for medical or personal reasons at the discretion of the Team Commander and/or Chief Nursing Officer. Members on inactive status will continue to receive communications and information, however, they will not be required to complete or participate in IMERT training while they are on inactive status.

Upon declaration of inactivation, the team member must return any IMERT or IDPH property that has been provided to them. Members on inactive status will be contacted yearly and asked to update the IMERT office on their status. Members who do not respond to the update request will be removed from the team.

Prior to reactivation with IMERT the member is required to complete and show proof of the pre-requisite trainings, any updated orientation training, and any other required trainings specific to their specialty area. If the member was inactive due to medical injury they are also required to submit a Return to Participation Medical Clearance form from their physician.



Termination of Membership

Termination of IMERT team membership will occur in any of the following circumstances:

- Violation of the code of conduct to the extent that the team leader, IMERT Medical Director, IMERT Director, and/or the Chief Nursing Officer recommends termination.
- Failure to meet or maintain IMERT education, training, or team position requirements.
- Failure to meet or maintain individual personal and contact information, including a text-capable wireless device or cell phone.

The final decision regarding termination will be made by the IMERT Medical Director or IMERT Director.

Upon termination, the individual will be required to:

- Return the identification badge
- Return any uniforms, supplies, or equipment

Resignation

In the event a current team member chooses to resign from IMERT we ask that you notify the office in writing (via letter or email). Upon resignation the team member will be responsible for returning any issued property, the ID badge, and uniform.

Team Members who have resigned from IMERT are able to reapply for membership at any time.



Maintaining Current Contact Information

IMERT members are responsible to making changes/updating their personal information and credential information. Please keep a current email address on file as this the primary way IMERT disseminates daily information and changes.

In order for you to receive general information and notification of an IMERT deployment, your contact information must be complete and up to date.

Our primary dispatch system uses text messaging. You must have a text capable device to receive notification of IMERT deployments, **you must adhere to the following format: using a 10 digit number, followed by the “@” sign and concluding with the domain address (1234567891@wirelessdomain.com).**

After the primary dispatch system sends out a text notification, alerts will be sent using the following formats: E-Mail and Phone.

Members who do not have current contact information on file may be removed from the team.



Training Requirements: Pre-Requisites

As part of the basic IMERT team member requirement, all team members **must** complete a basic Incident Command course, the National Incident Management System course, and show proof of Weapons of Mass Destruction training. ***Proof of completion should be submitted to the IMERT office.*** These courses are available on line at the websites listed below. Follow the instructions at the site to register for and link to the selected course, these are secured sites.

INCIDENT COMMAND

The FEMA Introduction to Incident Command System IS-100b & FEMA Basic Incident Command System IS-200b. These self-study courses provide a comprehensive introduction to ICS if a member has not taken prior ICS courses:

<http://training.fema.gov/EMIWeb/IS/IS100b.asp>

<http://training.fema.gov/EMIWeb/IS/IS200b.asp>

NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS)

IS-700a National Incident Management System, An Introduction. This course introduces and overviews the National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private-sector, and nongovernmental organizations to work together during domestic incidents.

<http://training.fema.gov/emiweb/is/is700a.asp>

WEAPONS OF MASS DESTRUCTION TRAINING

IMERT requires members complete the following to fulfill your WMD requirement in order to be deployment ready:

The George Washington University National Nurse Emergency Preparedness Initiative (NNEPI), Nurses on the Front Line: Preparing for Emergencies and Disasters, an online interactive web-based course that provides emergency preparedness training for practitioners working in a wide variety of settings. Although the course is targeted to nurses, the lessons are applicable to all health care professionals and IMERT members who may respond to a CBRNE (Chemical, Biological, Radiological, Nuclear, and Environmental) event.

To start, go to <http://www.nnepi.org/>.

OR

Attend an **IMERT Domestic Preparedness course** which allows you to earn continuing education credit. Courses, when available, will be listed on the IMERT website under Upcoming Events.

If you have already completed an ICS, NIMS, or WMD course in another location, either on-line or in person, please submit completion certificates for those courses to the IMERT office for review and possible acceptance.



Training Requirements: Orientation

In addition, members must complete the Orientation process. This is a 2 part process including an online component and attendance at a deployment immersion training.

INTRODUCTION TO IMERT POLICY AND PROCEDURE

The Online Introduction to IMERT Policy and Procedure course is required for all new IMERT members. This course serves as an introduction to IMERT for new members who have not previously taken the Deployment Operations Course or attended BootCamp. Members will need to take this course before attending the hands-on deployment simulation Deployment Validation Training. During the course, members will review to team policies and procedures, the code of conduct, and the IMERT response.

<http://www.imert.org/team/traininginfoTEAMMEMBERS.asp>

IMERT DEPLOYMENT OPERATIONS TRAINING

You must complete and submit proof of completion of all the IMERT online training requirements: NIMS and ICS, Introduction to IMERT Policy and Procedure. During the course, members review to team policies and procedures, become familiar with the IMERT equipment bags, and practice selected skills, in addition to receiving uniforms and taking photos for team identification badges. Please remember you must have completed all online training prior to attending.

For dates and locations please visit the upcoming events section of the website, www.imert.org/events.



CONTINUING ANNUAL TRAINING and EXERCISE PARTICIPATION

To remain current with IMERT, annual competencies and drill participation are required.

In addition to the prerequisite training, all personnel must participate in ongoing training. Team members who are currently licensed by the State of Illinois in a medical-related field must participate in two exercises biennially. All other IMERT team members and support personnel must participate in four exercises biennially.

Also, any prerequisite classes required in the Member Training Requirements: Pre-Requisites section and Member Training Requirements: Orientation section herein that are subsequently updated by FEMA or by IMERT must be retaken by (1) the end of the calendar year following the year of the class revision or (2) the end of the calendar year following the year of team member admission, whichever is later.

Proof of all such training and drill completion shall first be screened for compliance by the IMERT Staff and then be submitted to the Director. The failure of a team member to complete the ongoing training requirements may result in removal from the IMERT at the discretion of the Director.

Accepted training may include, but are not limited to: IMERT sponsored trainings, hospital, state, federally sponsored emergency management and preparedness trainings, CBRNE training, IMERT communications drills, etc. You must submit proof of completion of outside agency trainings to the IMERT office for review.



Position Description: Chief Nurse Officer

Functional Description:

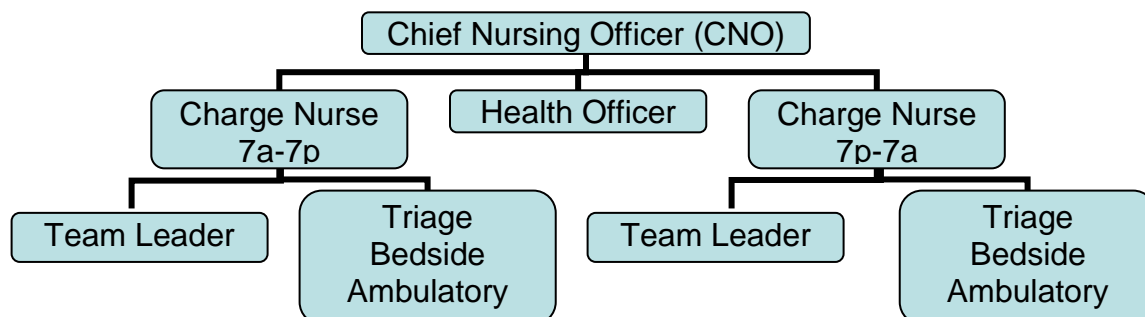
Has 24 hour responsibility for patient care services provided by the IMERT team while on deployment. Likewise, is responsible for the health and safety of the IMERT team.

Responsibilities include:

- 1) Verification of standard of care in all aspects of patient treatment
- 2) Corroborate with command and medical staff to insure effective utilization of clinical staff and other resources
- 3) Establish a safe and adequate staffing pattern
- 4) Insure a safe environment for staff and patients
- 5) Modify patient care environment as required by evolution of scenario
- 6) Monitor and document staff injuries, illness, and insure appropriate follow-up
- 7) Document pertinent info in daily log. Completion of a comprehensive after action report

Method:

- 1) Rounds to every patient care area at least every 12 hours or PRN
- 2) Attend (or appoint designee) each briefing/command staff meeting
- 3) Develop and adjust staffing pattern based on clinical assets and needs
- 4) Monitor patient care environment for potential/real dangers to staff/patients
- 5) In collaboration with other on-site medical/nursing staff, devise and adapt the patient care environment. Provide for and seek out feedback from IMERT team and others
- 6) Function as (or appoint designee) as IMERT team health officer. Document injuries, blood/body fluid exposure, infectious disease exposure, and treatment modality. Report to appropriate agency. Insure that post-exposure procedures are followed and documented. Provide clear method for reporting any untoward reaction post-deployment. Provide CISM initial contact



of Charge Nurses per 12 hour shift depends on staffing and patient load.



Position Description: Medical Team Lead

Functional Description:

Has responsibility for patient care provided by an IMERT medical strike team as part of a task force. This may include a specific treatment area or a specific function within a treatment area. This position may be filled by a registered nurse (charge nurse experience preferred) or EMT-P (with supervisory experience). Reports to the Charge Nurse of the patient treatment area or directly to the Chief Nurse or designee.

Responsibilities include:

- 1) Receive assignment from Charge Nurse or CNO
- 2) Collaborate with Physician on duty to confirm standard of care, and standing orders
- 3) Accountable for IMERT team members assigned to group
- 4) Provide effective utilization of clinical staff and other resources
- 5) Insure a safe environment for staff and patients
- 6) Monitor patient care supply inventory; anticipate needs and direct requests to the MST
- 7) Report and document staff injuries and/or illness
- 8) Serve as a clinical and functional resource
- 9) Participate in shift reports
- 10) Document pertinent info in the daily log.

Method:

- 1) Confirm scope of assignment: i.e.: Code Team leader, Triage Team Leader, Patient Care Section Team Leader, etc
- 2) Brief team members, provide assignments if necessary
- 3) Verify that required equipment and supplies are present and in working order
- 4) Monitor patient care environment for potential/real dangers to staff/patients;
- 5) In collaboration with other on-site medical/nursing staff, devise and adapt the patient care environment. Provide for and seek out feedback from IMERT team and others



Position Descriptions: Physician

Functional Description:

The IMERT Physician is responsible for supervising all medical care provided by the Team and directly providing medical care to critically injured victims in the Medical Zone.

Requirements:

- 1) Physician with an unencumbered Illinois License
- 2) Completion of all IMERT prerequisites
- 3) 2 years' experience as a physician

Responsibilities include:

- 1) Makes recommendations concerning Team member's fitness for deployment and fitness for duty while on deployment based on medical screening at time of activation - will assess physical health of team members
- 2) Supervises subordinates
- 3) Ensures all Team personnel are kept informed of mission objectives and status changes
- 4) Evaluates and advises local public health agencies on medical issues when requested by the IC leader
- 5) Provides medical advice to local EMS personnel as necessary
- 6) Ensures appropriate Personal Protective Equipment (PPE) is used by all members
- 7) Ensures Universal Precautions for all team members against exposure to communicable disease
- 8) Provides and directs medical care to Team members and victims as appropriate
- 9) Performs diagnostic tests as appropriate
- 10) Prepares performance evaluations for assigned personnel
- 11) Document pertinent info in the daily log.
- 12) Attend all required briefings and participate in the After Action report.



Position Description: Registered Nurse

Functional Description:

Provides primary nursing care to assigned patients. Collaborates with team physicians, nurses, medics and MST staff to provide the highest level of care possible. Reports to Medical Team Leader.

Requirements:

- 1) Registered Nurse with an unencumbered Illinois License
- 2) Completion of all IMERT prerequisites
- 3) 2 years experience as a nurse

Responsibilities include:

- 1) Provide primary care to assigned patients; assist other health care workers to do the same
- 2) Communicate directly with team leader on standard of care issues, need for supplies or equipment and any other factors that may impact patient care
- 3) Collaborate with physicians and other health care workers to mitigate/resolve patient care issues
- 4) Collaborate with IMERT team members to enhance overall team response capabilities
- 5) Monitor patient care environment for potential/real dangers to staff/patients
- 6) Attend all required briefings and participate in the After Action report.



Position Description: Paramedic (EMT-P or EMT-I)

Functional Description:

Provides medical care as assigned. Collaborates with Team Physicians, RNs, MST staff and other healthcare professionals to provide the highest standard of care possible. Reports to Medical Team Leader

Requirements:

- 1) Must hold a current EMT-P license from the State of Illinois or hold national certification;
- 2) ACLS, ITLS (or similar). PALS/APLS preferred.

Responsibilities include:

- 1) Provide patient care as directed. Assist other health care workers as needed
- 2) Collaborate with the RN to mitigate/resolve patient care issues
- 3) Assist with patient transport, treatment, transfer and/or discharge
- 4) Collaborate with IMERT team members to enhance overall team response capabilities
- 5) Monitor patient care environment for potential/real dangers to staff/patients
- 6) Attend all required briefings and participate in the After Action report

*** EMT I (same job description within constraints of current licensure) ***



Position Description: EMT-B

Functional Description:

Assists in the provision of medical care as part of an IMERT response. Reports to Medical Team Leader.

Requirements:

- 1) Must hold a valid EMT-B license from the state of Illinois.

Responsibilities include:

- 1) Provide patient care as directed. Assist other health care workers as needed
- 2) Collaborate with the Team Leader to mitigate/resolve patient care issues
- 3) Assist with patient transport, treatment, transfer and/or discharge
- 4) Provide assistance to MST staff as requested
- 5) Collaborate with IMERT team members to enhance overall team response capabilities Monitor patient care environment for potential/real dangers to staff/patients
- 6) Attend all required briefings and participate in the After Action report



Position Description: Mental Health Specialist

Reports to: Team Support Unit Leader or directly to the Safety Officer and CNO.

Functional Description: The volunteer mental health provider provides several functions on the scene, which provide direct and indirect support to the IMERT team members. The primary function is to provide supportive observation to those on scene to assure that IMERT responders are working within healthy boundaries of stress management, recognizing physical limitations (fatigue, hunger, working without injury), and limitations of immediate emotional consequences of working at a disaster or emergency site (numbness, anger, irritation, overwhelm, fatigue, shock, despair, grief, guilt, etc) that can lead to both typical and atypical stress responses and conditions. The goal of the MH Volunteer is to help provide a safety and oversight mechanism to assure the well-being of the responders in a supportive manner, using components from critical stress management.

Responsibilities:

- 1) Identify the major psychiatric symptoms and syndromes which are most frequently connected with a disaster (stress syndromes, brief grief reaction, PTSD, generalized anxiety, brief psychotic episode)
- 2) Understand the principles of critical stress management
- 3) Understand the components of Psychological First Aid and CISM: defusing, debriefing, education and critical incident supportive services
- 4) Understand how Psychological First Aid and CISM and the role of disaster mental health is supportive intervention, and not therapy
- 5) Understand the components of incident command and the various roles of the various responders on disaster scenes
- 6) Understand the need for identification and consultation for assistance and referral when/if necessary
- 7) Recognize the signs and symptoms of stress
- 8) Be able to intervene with responders about the signs and symptoms of stress appropriately
- 9) Understand the complexities of working at a disaster site and the roles of the various responders at a disaster site.
- 10) Attend all required briefings and participate in the After Action report.



Position Description: Logistics Specialist

Functional Description:

Responsible for: movement, distribution and stocking of equipment and supplies as requested by the Supply Unit Leaders or Team Logistics Officer. Will assist with patient movement through the IMERT system as requested by the Team Logistics Officer or patient care staff. Reports to Team Logistics Officer

Requirements:

- 1) All basic IMERT required training.

Responsibilities include:

- 1) Provide re-supply of patient care areas as requested by the Supply Unit Leader
- 2) Prepare equipment and supplies for use in patient care areas
- 3) Assist in patient movement as instructed by IMERT medical staff
- 4) Assist in patient tracking, administrative support and documentation as appropriate
- 5) Monitor patient care environment for potential/real dangers to staff/patients
- 6) Attend all required briefings and participate in the After Action report.



Position Description: Communications Specialist

Functional Description:

Reports to the Communications Unit Leader. He/she is responsible for the set up, operation, tracking and maintenance of IMERT communications equipment.

Requirements:

- 1) All basic IMERT required training
- 2) Completion of the MST Orientation Packet
- 3) Completion of required training:
 - (1) Completion of MST Exam
 - (2) ICS 800 National Response Framework
 - (3) NIMS 800 National Response Plan
 - (4) Communications Position Orientation

Responsibilities include:

- 1) Provides reliable communications systems to IMERT and its MST staff
- 2) Monitors, maintains and tracks all IMERT communications equipment used during deployments
- 3) Monitor patient care environment for potential/real dangers to staff/patients
- 4) Attend all required briefings and participate in the After Action report.



Position Description: Safety Specialist

Reports to: Team Commander, Chief Nurse, and MST Chief.

Functional Description: He/she is responsible for the anticipation and identification of known or potentially hazardous and unsafe conditions during pre-deployment, deployment, and demobilization. This role includes providing the necessary support and recommendations for and verification of hazard abatement and/or reduction activities. Also has the authority to take prompt actions necessary to protect those in imminent danger from unsafe acts or hazardous conditions found in the work environment?

Requirements:

- 1) IMERT Basic Training Requirements
- 2) Completion of MST Exam
- 3) ICS 800 National Response Framework
- 4) Command and General Staff
- 5) Hospital Incident Command System Training
- 6) Documented safety training/certification/experience
 - (1) BS in Safety, CSP, CIH, other
 - (2) OSHA Training (HAZWOPER, Disaster Site Safety, and/or 10 or 30 hour Construction safety training)
 - (3) IMERT Safety Training (site specific, just in time)
 - (4) 3-5 years' experience in healthcare safety or 5-10 years general safety experience with a role in emergency preparedness/response
 - (5) Demonstrated skills in hazard recognition, PPE, basic industrial hygiene, hazmat response, biohazards/universal precautions
 - (6) Safety training experience
 - (7) Basic first aid/CPR certification
- 7) Participation on at least two deployments by IMERT to mock or real disaster situations (or precautionary deployments to events) within the last two years

Responsibilities include:

- 1) Immediately halts unsafe activities and determines if work area risks warrant restricting or modifying activities during preparedness, deployment, and recovery/demobilization
- 2) Provides general and site specific safety and hazard recognition information in support of field operations, for inclusion in the IAP
- 3) Determines site/emergency response site specific threats, conditions, and/or activities which may impact the safety or operations

Responsibilities include (Cont'):

- 4) Communicates safety issues and hazards introduced to the deployment site by operations including hazardous materials/wastes, sharps, and/or other equipment/supplies which may impact on overall site operations



Position Description: Safety Specialist (Cont')

- 5) Identifies and communicates information about operations which may trigger false positives during deployment site security and/or environmental monitoring
- 6) Develops measures to reduce risk for known or potential hazards identified or recognized and communicates them to the MST members
- 7) Monitors weather and provides updates in briefings as it relates to worker safety or site safety
- 8) Provides safety briefings to IMERT and its MST Members
- 9) Prepares or assists with development of emergency notification and evacuation plans
- 10) Ensures that personnel obtain and are qualified to use required personal protective equipment; including voluntary use of PPE
- 11) Documents, investigates, and/or assists Medical Unit in recordkeeping associated with injuries sustained on deployment or other sanctioned activities
- 12) Participates in planning meetings and briefings
- 13) Develops, and instructs team members on site safety issues including emergency evacuation plans and evacuation sites
- 14) Attend all required briefings and participate in the After Action report.

Method:

- 1) Attends planning meetings and briefings
- 2) Collaborates with the section chiefs and Task Force 1 and 2 leaders to maintain a safe working environment
- 3) Collaborates with the safety officers from the lead agency to assure a common goal



Position Description: Information Technologies Specialist

Functional Description:

Reports to: Information Unit Leader. He/she is responsible for establishing maintaining the information technology infrastructure of IMERT.

Requirements:

- 1) All basic IMERT required training
- 2) Demonstrated knowledge of IMERT IT systems

Responsibilities include:

- 1) Establish the IT infrastructure required for patient tracking, documentation of activities, administration and tracking of personnel / equipment
- 2) Assists IMERT and its MST staff with technical issues
- 3) Field repairs equipment as needed and appropriate
- 4) Monitor patient care environment for potential/real dangers to staff/patients
- 5) Attend all required briefings and participate in the After Action report.

Method:

- 1) Collaborates with the patient care and MST staff to assure all needs are being met



Position Description: Vehicle Operator Specialist

Functional Description:

Reports to the Transportation Unit Leader, responsible for the transportation of IMERT equipment, supplies and personnel.

Requirements:

- 1) Minimum of 1 year IMERT or equivalent experience
- 2) All basic IMERT required training
- 3) Completion of the MST Orientation Packet
- 4) Valid Illinois Drivers License
- 5) Completion of the MST drivers training program
- 6) Completion of required training:
 - (1) Completion of MST Exam
 - (2) ICS 800 National Response Framework
 - (3) NIMS 800 National Response Plan

Responsibilities include:

- 1) Provides safe and reliable transportation for IMERT operations
- 2) Delivers equipment and supplies as required
- 3) Monitor patient care environment for potential/real dangers to staff/patients
- 4) Attend all required briefings and participate in the After Action report.



Deployment Policies and Procedures General Team Deployment

Purpose:

This describes the actions members should take in response to an IMERT page or call for participation in a deployment.

This policy takes effect after IEMA and IDPH have ordered an IMERT deployment.

1. An alert will be sent out to the appropriate IMERT Team members. The initial call-out will be sent out via cellphone or wireless device. The wireless text will give the number to the IMERT information line for volunteers to call and to respond. Subsequent information will follow during email. The alert email and information line will include the following information:
 - a. The type and location of the mission
 - b. Designated point of contact
 - c. Rendezvous point for the teams responding (if available at the time of notification)
2. Team members will respond with their availability as instructed.
3. The team member personnel deployment cache should be ready for deployment (including food and water) and should travel with the team member.
4. All team members will respond in full uniform with proper ID displayed.
5. Team members **SHOULD NOT ATTEMPT** to contact the IMERT office, Administrative staff, or Command Staff directly. Self-dispatching of team members will be not permitted.
6. Activated Team members should report departure to the staging area as requested by Command Staff.
7. Upon arrival at the Reception Site the team will be pre-screened and directed to the CNO or designee for Team Assignment.
8. Transportation to the incident site from the rendezvous site will be arranged, approved and coordinated by the IMERT staff. Team members should not attempt to respond in a personal vehicle or arrange other transportation without the prior approval of the on scene Team Leader or designee.
9. The code of conduct and chain of command will be strictly adhered to during the deployment phase of the response.



Pre and Post Deployment Medical Evaluation & Procedure

Purpose:

This guideline details when team member's personal medical evaluations should be completed on drills and deployments.

Pre Deployment Procedure

Immediately before and directly after any deployment or training, team members will fill out a medical history form and have a medical screening done by a physician or a nurse. Team members should have available any relevant medical history, inoculation history, and personal medications.

The Medical Director has the final authority to remove any team member from a deployment or training at his/her discretion.

Post Deployment Procedure

There may be an occasion when post event debriefing is required. IMERT will make arrangements for debriefing if one is necessary.

At the conclusion of every pre-deployment or deployment team members will receive instructions on reporting to the dispatch center when they get home.

Any illness or injury that occurs to a team member while at a training or on deployment must be immediately reported to the Chief Nurse or Physician on duty.

All team members are required to complete any post-deployment paperwork, including, but not limited to:

- a) Post-deployment assessment or personal after action report
- b) Post-deployment medical assessment



Deployment Advisories and Warning Orders

Purpose:

This guideline specifies and describes the difference between a deployment advisory and a warning order. It also details the actions that will be taken by IMERT Administration after receiving either a deployment advisory or warning order.

Advisory Message – an event of significance has occurred or may occur within the State of Illinois that does not require an immediate IMERT deployment but has the possibility to escalate. Typically an advisory message will be communicated to all IMERT staff, the on-call physicians, IMERT Team Commanders, unit and section leaders via email.

Warning Order - An event has occurred or may occur within the State of Illinois that will likely result in an IMERT Deployment. It is possible that under these circumstances, a call for availability will be made or Team members with select capabilities or who live in a specific area will be notified to prepare for possible deployment.

Deployment Order - IMERT has received an official order to deploy medical and support team assets to the scene of a disaster or staging area. The response will be based on the requested capabilities.



Activation Protocol

Purpose:

This describes the expectations of the membership for an IMERT deployment.

All IMERT responses are based on requests from either local agencies or the State of Illinois. Often these requests are very specific. Sometimes the need is for medical assistance, other requests may be for specific equipment or other capabilities. IMERT is required to meet the mission request, at least initially. Events are often fluid and additional assistance can be requested as time goes by.

Dispatch system for activation

- Each team member will maintain text capable device at all times
- Secondary notification via phone and email will be sent
- Follow the instructions provided by dispatch
- Further instructions will be provided to members at the time of call-back

Transportation to meeting point

- Team members will self-transport to established rendezvous site
- Follow the rules of the road

On arrival at site

- Report to IMERT reception

Additional call-outs:

- A request for additional staff may be requested along with the initial call-out, immediately after the initial team arrives on the scene, or the request may be delayed
- An all-call will go out to eligible team members including: a description of the event, a staging area and any mission specific information available at the time
- The typical time frame for deployment will be 36-48 hours after initial notification



Recommended Personal Cache

Purpose:

This guideline provides recommendations for what equipment and personal effects members should bring with on an IMERT deployment. What you have packed in your bag should change with the seasons. Volunteers will also need to make sure that perishable items and their water supply are rotated periodically. **The guideline is; if you bring it you need to be able to carry it.**

1. IMERT ID
2. State Issued ID (drivers license)
3. Current Personal Medical Information Form
4. IMERT Uniform (ample pants and shirts)
5. Work boots (ankle high w/steel toe / shank) if outside work is expected, otherwise a sturdy work shoe is acceptable
6. Personal clothing and at least one set of non-uniform clothes for off shift wear.
7. Sturdy leather work gloves
8. One (1) IMERT Uniform Jacket
9. Toiletry kit (Chap Stick, soap, toothbrush, toothpaste, toilet paper, ibuprofen / aspirin, sunscreen, bug repellent, etc.)
10. Six (6) pairs cotton socks
11. Three (3) pairs wool socks
12. Six (6) pair underwear
13. Prescription eyewear (2 pair)
14. Prescription medication (at least 3 day supply)
15. Two (2) Towels
16. Comfortable shoes (for off duty)
17. Several writing pens
18. Badge holder
19. Food and Water (food: enough to sustain yourself for 24 hours)
20. Phone or pager charger
21. Sleeping bag
22. Book, iPod, pictures of family–downtime activities or whatever you need to relax!

Cold Weather Only

1. Two (2) sets of long underwear
2. One (1) wool Cap
3. One (1) parka
4. Two (2) pair ski gloves
5. Eight (8) pair socks, heavy
6. One (1) sweatshirt

Warm Weather

1. Sunscreen
2. Sunhat/sun protective gear
3. Light-weight/dry-fit clothing for off-duty wear



Work Cycle Guidelines and Shift Rotation

Purpose:

This guideline outlines the maximum work cycle of a team member on an IMERT deployment.

1. Team member work cycle will be limited to a twelve hour shift maximum whenever possible.
2. Rotation of staff will be determined by the Chief Nursing Officer or designee. This includes all staff: MST, medical staff, non-medical staff, etc.



Injury/Illness on Duty

Purpose:

The safety and welfare of IMERT members is paramount. This guideline will provide specific instructions on the actions team members are required to take if they are either injured or taken ill while on duty with IMERT.

1. If it is determined that there is a clear and present danger to any team member or patients, immediate steps to correct the problem must be taken by all team members present.
2. Injured team members will be provided with immediate first aid.
3. Injuries or illness must be reported immediately to the Physician on duty and Chief Nurse or designee.
4. The team member will be examined by the Physician on duty.
5. If an injured IMERT team member requires transport to the hospital, a member of the IMERT staff shall accompany the team member to the hospital.
6. The team commander for the mission and the IMERT Director of Operations will be immediately notified.
7. The team member's emergency contact will be notified when approved by the team member. In the event the team member is unable to give permission, permission to notify the emergency contact will be assumed.
8. An injury investigation will be conducted as soon as possible by the Safety Specialist or designee. This should include a written report from any witness to the incident.
9. The team commander and the chief nurse will be responsible for completing any required IDPH paperwork.
10. Illinois State workmen's compensation and health protection will only be in effect during IEMA and IDPH ordered/sanctioned deployments.



Convoy Travel

Purpose:

The following is intended as a general guide to procedures and practices to be using in planning convoy travel. Convoy procedures will depend on each situation and the support available, and as such should be adapted to the circumstances. This advice is designed to be generic, and adapted into security plans as appropriate to the incident and is dependent on the risk analysis.

Introduction

It is essential that all vehicle occupants are aware of these procedures and feel empowered to enforce them. Drivers should be given special training to ensure they fully understand both the procedures and the reasons behind them. As with other aspects of security planning, involving as many staff as possible in developing the plan will ensure greater understanding, effectiveness and compliance.

Example Procedures

Individuals should follow clear procedures for traveling in convoy and stress the need for convoy discipline. The following checklist is not exhaustive but may serve as a prompt of the major issues to consider:

Prior to Departure

- ❑ Local authorities along the route may need to be informed of the convoy (details, timings, objectives). However, this procedure will vary depending on the deployment and security situation. Travel plans should not be shared with anyone who does not need to know them. Ensure that information is obtained about the area to be transited. Assess the current situation including the terrain, road conditions, weather and security risks. If possible, check out the route before planning the convoy.
- ❑ Estimate the distance to be traveled and divide the journey into sections. Determine the estimated time of arrival (ETA) for each section. Identify locations where the convoy will stop to rest. The plan should include alternative routes, which also need to be checked for hazards and risks.
- ❑ Prepare contingency plans in the event of an accident, medical evacuation, vehicle breakdown, etc. Include procedures for stopping the operation.
- ❑ Ensure vehicle weight and height do not exceed bridge specifications.
- ❑ List any contact persons on the route and at the destinations. Obtain information about other agencies working in the area.
- ❑ Prepare a full list of convoy vehicles including their registration numbers and the names of the drivers assigned to each vehicle. Decide on the position of each vehicle in the convoy with slower vehicles near the front.
- ❑ Prepare a full list of all people in the convoy and assign responsibilities to each.



Convoy Travel (con't)

On the Day

- ❑ Volunteers should arrive at the meeting point one hour before the planned convoy departure. The convoy commander should arrive 2 hours before. Organizing the departure of a convoy can take some time and late arrivals will delay departure of the entire convoy.
- ❑ All drivers and members of the convoy should be briefed on roles and responsibilities, who is in charge, route, convoy procedures (check-points, rest stops, etc.), contingency plans (in the event of a medical emergency, breakdown or security incident), action on arrival, radio signaling procedures, and timings.
- ❑ All vehicles should be checked for road-worthiness and safety of loads, Vehicles should have their own equipment for changing wheels.
- ❑ Check that all vehicles start with a full tank of fuel.
 - Ensure there are adequate supplies of food and water in each vehicle.
- ❑ Radio communications should be checked before departure and while en route.
- ❑ Decided on a time schedule for radio checks with the dispatch center if using one.
- ❑ If the convoy is being escorted, ensure the security escort and convoy leader can communicate.
- ❑ The driver of the vehicle in front should always keep the vehicle behind in view. Driving with headlights on will assist in maintaining visual contact.
- ❑ The lead vehicle will keep to an agreed upon convoy speed.
- ❑ An advance party may go ahead to check road conditions and security, as well as prepare for the convoy's arrival.
- ❑ There should be pre-determined times to stop and check vehicles and loads.
- ❑ Select stopping locations carefully – assess from a security point of view.
- ❑ If one vehicle is stopped, the entire convoy should come to a halt.
- ❑ When the convoy sets off after being stopped, vehicles should remain close together and moving steadily to prevent interference with other vehicles.
- ❑ Lane changes are to be expected. In the event a lane change is needed, the lead vehicle will indicate the lane change by using their directional indicator and each vehicle behind the lead will also apply their directional indicator. The last vehicle in the convoy will then move to the indicated lane and each vehicle in front of that vehicle will follow suit, providing a block for others in the convoy until all vehicles are in the intended lane of travel.
- ❑ Expect breakdowns and have agreed upon procedures to deal with them. All vehicles must stop while repairs are being made. Alternative actions include: tow, recover by CMS mechanics, or temporary abandonment.
- ❑ Avoid bunching up and driving too close to the vehicle in front, but also avoid driving too far apart. Vehicles should keep an agreed distance between each other.



➔ policy and procedure manual

- One vehicle (the convoy commander) plus at least one other should have radio contact with the dispatch center (if using one) as well as all vehicles should have contact with each other. In the event that is not possible or all vehicles are not equipped with radios, agree to a system of signals using headlights and/or horns. These signals should include the ability to indicate if a stop is required, if emergency repairs are needed, or if consultation is required.
- When able, all drivers will be on a 4 hour rotation of driving and rest time.
- On arrival at the destination, the dispatch center should be advised of time and condition of the convoy on arrival and informed of problems encountered along the route.



Reimbursement

Purpose:

This guideline delineates reimbursable expenses and the required procedure for team member expenses.

IMERT volunteers generously give of their time, talents, and abilities. Certain personal expenses are eligible for reimbursement. This policy will delineate eligible expenses and the proper procedure for submission.

IMERT will reimburse the following team member expenses:

1. Approved mileage per mile for a round trip over 100 miles.
2. Approved overnight accommodations
3. Approved equipment or fuel purchases during deployments or training exercises.

Procedure:

1. Mileage: Team members will provide documentation of mileage on approved forms and calculate the cost of the mileage according to the amount listed on the form. The forms must be submitted to the IMERT office within 7 days of the last day of the deployment or training.
2. Forms must be filled out completely and legibly. This includes totaling the sums as directed on the form.
3. Tolls and Parking: Team members will provide copies of receipts for any tolls or parking fees.
 - a. The copies of the receipts will be attached to the Reimbursement Request form and submitted to the IMERT office within 7 days of the last day of the deployment or training.
4. Overnight Accommodations: Team members who are required to stay overnight at a hotel and pay for it themselves must receive authorization from IMERT staff member prior to the night of stay
 - a. An original receipt must accompany the Reimbursement Request form. The form must be completed and submitted to the IMERT office within 7 days of the last day of the deployment or training.



Lodging

Purpose:

This guideline provides information on the circumstances in which IMERT will provide lodging.

1. Lodging for all IMERT Team Members must be approved by an IMERT staff member.
This includes lodging for meetings, trainings, conferences, pre-deployments etc.
2. Deployment lodging will be arranged by the staff responsible for Billeting.
3. IMERT will only pay or reimburse for essential incurred lodging expenses such as room and tax. Movies, alcoholic beverages etc will not be covered.
4. Traveler must follow the IMERT code of conduct and all local rules that may apply while traveling on IMERT business whether in or out of uniform. IMERT (IDPH or IEMA) will not be responsible for any fees/fines for failure to comply with any local rules or ordinances.



Narcotic Recording and Monitoring

Purpose:

This guideline covers the proper procedure for requesting and administering narcotics to patients.

In the event Narcotic medications are added to the IMERT deployment stockpile from an internal cache, local, state or federal resources the following procedure will be required.

1. The IMERT Medical Director or the Lead Physician or the Chief Nurse must give approval for the deployment/ receipt of the medications.
2. The medication supply should be received in a locked container with an accompanying medication inventory list.
3. Upon receipt of the medications two IMERT staff (Physician, RN, or EMT-P) shall verify that the products were received in a locked container.
4. The lock number should be recorded on the appropriate deployment event log.
5. Once the container is opened, the inventory shall be verified and documented by 2 team members (Physician, RN or EMT-P).
6. A written order for the administration of a narcotic medication must be obtained.
7. The healthcare professional who administers the narcotic will note the dose and route on the patient chart as well as document the name of the patient, medication, dose, route, and name of ordering physician on the Narcotic Log Sheet.
8. Vital signs will be taken and documented before and after the administration of any medication.
9. The patient will be re-evaluated within 15 minutes of narcotic administration, and evaluated for pain relief.
10. Any wasted narcotic must be witnessed and co-signed by 2 RNs or an RN and a Physician.



Restraints and Seclusion

Purpose:

To govern the use of seclusion and restraint procedures which are to be used only when a patient is an imminent risk of significant violence or self-destructive behavior and no other less restrictive intervention is possible.

IMERT is committed to a violence-free environment. We must continually reinforce to all people that violent acts and threats are not acceptable.

It is IMERT policy to provide care and treatment in a manner that is the least restrictive of patient movement and freedom. Seclusion and restraint are emergency procedures used only to prevent people from harming others or oneself. Seclusion and restraint are not treatment and may not be implemented as a behavioral consequence in response to a previously occurring behavior, or imposed as a means of coercion, discipline, convenience, or retaliation by staff.

RESTRAINTS REQUIRE A PHYSICIAN'S ORDER

Before employing restraints or seclusion, healthcare providers should employ these techniques in the following order:

- 1) Use techniques to identify staff and patient behaviors, events, and environmental factors that may trigger the need to use restraint or seclusion.
- 2) Try the use of nonphysical intervention skills.
- 3) Choose the least restrictive intervention based on individualized assessment.
- 4) Utilize safe application of restraints and seclusion, including recognition of and response to signs of physical and psychological distress.
- 5) Monitor the physical and psychological well-being of patient (e.g., respiratory and circulatory status, skin integrity, vital signs) at 15 minute intervals or as directed.
- 6) Look for clinical identifications that restraint or seclusion is no longer necessary

While restrained, all patients should be given the following:

- 1) Provide the patient in restraints range-of-motion exercise for at least 10 minutes at least every two hours, unless the patient's behavior renders this impossible or unsafe for either the patient or the staff or is contraindicated by condition of joint or limb.
- 2) Clean linen, bedding, and clothing promptly should they become soiled.
- 3) Offer fluids at least hourly unless fluids are restricted by a physician's order. Meals and snacks will be offered at regular intervals.
- 4) Offer the patient use of toilet facilities or a bedpan/urinal at least hourly and whenever a patient requests a need.
- 5) Allow and/or assist the patients to bathe.



In all cases of seclusion and restraint, documentation in a patient's medical record must include:

- 1) A written order by a physician with a description of the patient's behavior and the intervention used. The order should include frequency of monitoring.
- 2) Alternatives or other less restrictive interventions attempted (as applicable)
- 3) The patient's condition or symptom(s) that warranted the use of the restraint or seclusion
- 4) The patient's response to the intervention(s) used, including the rationale for the continued use of the intervention.
- 5) All care offered and care provided to a patient during the procedure including hygiene, diet, fluid intake, bowel/bladder functions, physical observations, range-of-motion, and vital signs
- 6) Any exceptions to care and reason/rationale.
- 7) If restraint or seclusion is used to manage violent or self-destructive behavior, then the patient's medical record must also include a half-hour face-to-face medical and/or behavioral evaluation.