



Casualty Care Coordinator

A Step-by-Step Guide to Enhancing the Exercise Experience for Volunteers

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General Description

Exercises are driven by specific organizational needs and objectives; however, in order to maximize their potential benefits, they require unrelenting attention to detail in several areas. One such area is in the care and use of volunteer victims where their handling can not only affect the success and failure of the current exercise, but subsequent exercises, as well.

DPRO has created this Casualty Care Coordinator document to guide exercise planners in providing optimal care for their volunteers and maximizing their use during exercises. This information is organized under several headings which follow a comprehensive, step-by-step process from solicitation to orientation and finally to dismissal of volunteer victims. This document promotes a successful exercise and enhances the likelihood that volunteers will return to meet your future exercise needs.

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Job Description

As the Casualty Care Coordinator, you have been entrusted with one of the most important jobs in exercise planning. Your responsibilities might include soliciting volunteers, assigning them to specific patient scenarios, orienting them to the exercise and, overall, ensuring that their exercise experience is one they look forward to repeating. This document identifies significant steps in the planning process that, once completed, will increase the likelihood that your exercise day will be successful for exercise planners, players and volunteers alike.

Exercises are often designed to test the abilities or capabilities of agencies involved in disaster response. Their ability to integrate, communicate and respond is generally the focus of corresponding objectives, evaluations and After Action Reports. However, media attention is generally dedicated to the effectiveness of the disaster response system by portraying the perceived competency of care of volunteer victims involved in the exercise. The evening news and newspapers reports are focused on the dramatic presentation and rescue of victims which will presumably result in prevention of injury or illness and preservation of life. Hence, the viable need for a dedicated Casualty Care Coordinator in exercise planning and implementation.

Optimally, this position should be identified early on in the exercise design and planning process. It is difficult to enter later in the planning process due to the amount of planning it takes to adequately fulfill this responsibility. Initially, your role may be to listen carefully to the needs of participating organizations regarding their objectives, to ensure that the appropriate type and number of volunteers are solicited. You should be present at all planning meetings that discuss or pertain to casualty care; especially those involving care response systems such as EMS, hospitals, clinics, transportation, media, etc.

Significant Roles & Responsibilities for the CCC:

- Meet the needs of the exercise as they relate to casualties
- Develop a volunteer casualty data base for future needs
- Educate the volunteer victims/casualties about their expected roles and responsibilities
- Recruit moulage personnel and associated supplies
- Provide a safe and healthy environment for the volunteer victims
- Provide a survey to evaluate the experience(s) of the volunteer victims
- Integrate these findings into the After Action Report for the exercise

Step-by-Step Guide: Addressing Roles & Responsibilities

Below is a step-by-step guide designed to help CCC's address major planning milestones during the exercise design process. You will note a dollar sign symbol next to certain steps. This is used to denote that those steps might incur costs and should be included in the comprehensive budget. Each of these steps should be modified to meet the individual needs of each exercise.

Step 1: Establish a Volunteer Budget

Integrate your position into the exercise planning process by attending all appropriate meetings where details about scenario will be discussed. Your goal here is primarily to listen to the exercise needs and determine what role the casualties will play in order to assist agencies in meeting their objectives. By participating early in the process, you are also present to solicit funds to meet the needs of your position.

Once this detail is determined, your work can begin. The first step is to establish a budget for handling volunteers. Although the term volunteer implies 'free,' many details concerning volunteers will require funding including props and items necessary to ensure safety of the volunteers.

Budgetary Items - The following items are typically associated with volunteers and require funding:

- ✓ Advertising
- ✓ Copies and mailing fees
- ✓ Moulage supplies
- ✓ Moulage artists
- ✓ Old clothing (disposable)
- ✓ Seat protection for transportation
- ✓ Make-up remover/towels
- ✓ Portable bathroom facilities
- ✓ Meals or snacks (dependant upon exercise duration)
- ✓ Hydration
- ✓ Parking Passes
- ✓ Gifts of appreciation i.e. hats, t-shirts, mini-preparedness kits, etc.

Demographics and Types of Volunteers

The ethnicity, gender and ages, etc. of the victims are determined primarily by the availability of volunteers, but also by community demographics. The types of

victims needed are dictated by the exercise scenario. For example, a bomb detonation in a school would obviously dictate the use of children of appropriate ages for that level of school. However, a bomb blast in a downtown urban environment would generate casualties of varying ages with injuries appropriate to the blast pattern that depend on the time of day and year, type of blast, location, local businesses, etc.

In order for the distribution of volunteers to accurately reflect your general population, your community's demographics can be obtained through local and state public health divisions, city planners and emergency managers who have access to year-around data specific to your location and season or through online sources such as <http://www.quickfacts.census.gov>. From this demographical information, you can derive a rough guideline for the ages and numbers of casualties your exercise scenario would realistically effect in the real world; this information should guide your volunteer recruitment efforts.

However, the availability of casualties makes exact duplication of victims nearly impossible. Exercise and Casualty planners should make every attempt to make the casualty list as accurate as possible to their communities to increase 'buy-in' from players and participants during the exercise.

Checklist to Determine the Type and Number of Casualties

- Determine type of incident (Chemical, biological, blast, institutional equipment failure, etc.)
- Determine location of incident
- Determine total number of patients needed to meet the needs of exercise stakeholders, including:
 - Hospitals
 - Local/State government agencies
 - Emergency Medical Services
 - Police or public safety
 - Fire Departments
 - Search & Rescue organizations
 - Volunteer organizations
 - Airports
 - Other organizations or agencies
- Determine buildings in general location that would be affected
- Obtain information about population/occupants of buildings and businesses (city manager, Public Health, travel industry, hotel industry, schools, restaurants, night life, etc)
- Determine or ask local or state experts about types and numbers of expected casualties (Homeland defense, State Emergency Coordination Center, Emergency Operations Center, etc.)
- Ask EMS, safety, fire, rescue and hospital responders if there are specific volunteer types that would enhance their exercise

- experience (such as Obstetrical patients, Pediatric patients, burn patients, special needs patients, non-English-speaking, etc.)
- Determine what types of casualties will be needed
- Emergent (Red) casualties?
 - Deceased or expectant (black) casualties?
 - Minor (yellow) casualties?
 - Delayed (green) casualties?
 - Psychiatrically injured casualties?
 - Special-needs casualties?

Step 2: Determine Potential Sources of Volunteers

One of the most commonly asked questions is: “Where should we start looking for exercise volunteers?” The simple answer is: right in your community. If possible, reference volunteer rosters or data bases from past exercises and include this group in your initial recruitment campaign. Volunteers that have had positive experiences might consider participating and their experience can be beneficial. Compiling a databank of volunteers is very helpful to communities in planning annual exercises.

Since the concept of volunteer recruitment and retention may be new, it may be necessary to seek new resources. The most important aspect of brainstorming potential volunteer sources is to be creative and solicit help from others in your community.

The following list is by no means all inclusive; but has been compiled through our experiences with several exercises. Each category will result in varying degrees of success, depending upon your community and they type of exercise you are conducting.

- Local recruits from Navy, Army, Coast Guard, Marines, Air Force
- EMT and Paramedic students
- University nursing, pre-med or other medical related students
- Church groups
- Job corps
- High Schools – especially drama clubs (note: might require a minor liability waiver)
- Junior and Community Colleges
- Home school centers
- Volunteer Organizations i.e. United Way
- Boy Scouts, Girl Scouts
- Theater/acting classes (high School and college)
- Newspaper ads
- Public radio announcements
- Special Needs groups (Schools or institutions for the physically handicapped)
- Other hospitals locally and in adjacent states or communities
- Friends and family members of hospital or EMS employees



Step 3: Solicit Volunteers

The process of recruiting volunteers for casualty positions should be started approximately 3 months in advance of an exercise, if possible. By this time, each involved agency should have clearly identified their objectives and the number of casualties they would like to receive.

Once established, this number should be agreed upon by clinicians involved in the response during the exercise and approved by administration at these facilities to minimize any disruption in the usual environment of care. This also helps to minimize any last minute changes. Set your recruitment goal to 10-15% above the number you will actually need for the exercise.

Below are some ways to advertise for volunteers. For more information, please refer to Appendix 1,

- Word of mouth
- Organizational and association newsletters
- Local papers
- Public radio
- Fliers at local businesses and colleges (particularly drama departments)
- Seek out students in the health fields or associated training centers

Step 4: Develop a Detailed Volunteer Database

The next step in the registration process will be to develop a detailed database to store contact information for volunteers. This database should match the information that is collected on the registration form including: name, address, phone, e-mail, ages, gender, and emergency contact information.

In addition, you may want to include a few questions to address:

- Preference for the part they would like to play
- Special abilities or disabilities
- Where they heard about this opportunity
- Pre-existing medical conditions and allergies
- Medications they regularly take
- Family/Friends that will also be participating



Step 5: Distribute Information Packet

Prior to the exercise, it is important that the CCC develop and distribute an information packet for all registered volunteers. This packet should include, again, the arrival time, date and location of the exercise, plus information about what they can expect during exercise day.

It is suggested that if volunteers are going to be moulaged, that this packet warn male participants to wear bathing suits or boxer shorts and females to wear a bathing suit under their clothes. Let them know that their clothes might become stained or torn as a result of their participation and whether or not old clothing will be provided for their use. If decon operations are planned, this is especially important.

Provide detailed information for participants about what they can expect from the exercise process. Begin with the registration and briefing including times and location at which you expect them to arrive. Inform them of possible staging, first responder interactions, the decontamination process, transportation, care and feeding and debriefing. Be very clear about the roles and responsibilities that you expect your volunteers to fulfill.

Depending upon the policy and legal requirements of your facility, this packet may need to include a liability waiver. This waiver should include the risks associated with participating in this exercise including to physical property and self. Ask that each volunteer sign and return the form to the CCC in order to complete registration.

In the end, it is important to give them the information they will need to deliver the quality of performance that your exercise deserves. This includes contact information for exercise staff where they can direct further questions in the form of a phone number and e-mail address.



Step 6: Plan for Moulage

There are two main components to planning for moulage: makeup artists and supplies. Both of which can cost money; however, medical personnel often are capable of moulaging victims and can be recruited from participating facilities if they are not active in the exercise. If these resources are not available, you may have local moulage professionals in your community that you could contract. Your contract should explicitly state the time, date, location and specific injuries that you will need simulated. Also, you may want to include clean-up responsibilities and supplies, such as cold crème.

For future planning, be sure to keep track of moulage costs and average time necessary to complete application on each volunteer. This estimate will be helpful when planning future exercises.



Step 7: Provide Old Clothing

Old clothing can be brought by participants, but can also be purchased for a small fee from second-hand clothing stores. Be aware that even when volunteers are asked to bring 'disposable clothing' some inevitably forget and that clothing will likely be destroyed during moulage and/or decontamination procedures. Cost for clothing can be solicited from the exercise coordinators, homeland defense funds, grant funds, municipalities, etc.



Step 8: Arrange for Sanitation Facilities

Plan for portable bathroom facilities for volunteer use throughout the day. These facilities should be checked and stocked regularly with sanitizer and toilet paper. Cleanliness is essential for volunteer happiness and return for future exercises.



Step 9: Arrange for Food & Hydration

Many local restaurants are happy to donate their services (or portions thereof) for a little bit of publicity. We suggest that you approach various food distributors for free catering for meals and/or snacks, although this should be done 3-6 months in advance. Plan to have snacks available at intervals throughout the exercise AND encourage participants to bring their own snacks. Have sufficient supplies of water and other hydration available and accessible throughout the day.



Step 10: Determine Transportation Needs

Establish a place for volunteers to park on exercise day and provide this information to them in the information packet. Whenever possible, try to provide free parking for volunteers. Also, keep in mind that in many exercises, volunteers are transported from the scene of the incident to treatment areas or facilities. Providing return transportation from these facilities may be the responsibility of the Casualty Care Coordinator. Be sure to arrange for volunteers to have a copy of or ready access to transportation schedules and pickup locations (preferably with a map of how to get to the pickup location). Finally, determine those individuals who will perhaps travel by private vehicle to treatment areas as 'unexpected casualties' and provide direction to the facilities and appropriate liability waivers.

Step 11: Establish a Volunteer Relief Tent

Volunteers may have unanticipated needs. For example, they may be stung by a bee, or step on a piece of glass and require routine medical care. A relief tent is a location known to all volunteers where they can go and make their needs known and these needs can be addressed as they arise. Things to consider having in a relief tent include:

- Snacks
- Water or sports drinks
- First aid supplies with EMT/ Paramedic/Nursing/physician support
- Benedryl
- Epi pens
- Cots for rest
- Rain gear, towels, paper towels

- Cold cream (moulage removal)
- Garbage containers
- Blankets
- Gloves
- Blood pressure cuff, stethoscope, thermometer
- Clip boards, pens, tape scissors, paper clips
- Tables
- Basic tool kit
- Volunteer gifts

Step 12 - Game Day! – see page 13

General Time Line of Events

Time Frame	Activity
6 + months	<ul style="list-style-type: none"> • Committees and sub-committees are established. CCC gets involved in patient scenario related topics • Establish budget to purchase supplies for the volunteers, volunteer tent items, clothing, etc.(see steps with \$ icon designation)
	<ul style="list-style-type: none"> • Develop advertisement materials • Develop registration materials • Develop contact database • Secure moulage personnel and discuss supplies that will be needed • Contract for use of portable sanitation facilities • Approach food vendors for sponsorship
4-6 months	<ul style="list-style-type: none"> • Determine types and demographics of volunteers needed • Number of volunteers is determined (10-15% above number needed to fulfill exercise requirements) • Recruitment of volunteers begins • Recruit for clean-up crew and maintenance crew for volunteer facilities during exercise day • Contract with health providers to develop patient scenarios (including lamination if decontamination is performed)
3 months	<ul style="list-style-type: none"> • Send out information packet to registered volunteers • Bring copies of all materials to the exercise – people will forget or not read them! You will need waivers signed • Finalize food and hydration plan • Gather supplies for relief tent
1 month	<ul style="list-style-type: none"> • Confirm delivery time and location for meals, supplies, tent, bathrooms, etc. • Finalize and print patient scenario cards

	<ul style="list-style-type: none"> • Print volunteer name badges, if necessary • Assemble volunteer gift items • Confirm moulage supplies are sufficient • Gather disposable clothing for volunteers • Call volunteers to confirm participation, if possible
2 weeks	<ul style="list-style-type: none"> • Purchase, beg, steal and borrow supplies for volunteer relief tent • Match patient scenarios with volunteers, wherever possible to get an idea of how many are filled, etc. • Compile a list of jobs that are needed on-site and could be filled by extra volunteers
1 week	<ul style="list-style-type: none"> • Solidify volunteer assignments to patient scenarios to see what roles are not yet filled (i.e. pregnant patient or Peds patient) • Call reminders to all volunteers and answer all remaining questions • Establish team to set up tent, stock supplies and monitor portable sanitation facilities • Receive all patient scenario cards and confirm lamination, lanyards, contents • Print all forms needed (i.e. for registration, survey and/or tracking of victims) • Identify any missing pieces of information not yet collected such as waivers and emergency contact information (if collected ahead of time) • Confirm health care support for volunteer tent
Day before	<ul style="list-style-type: none"> • Pack all supplies for transport to location • Print out master list of volunteers and patient assignments • Re-confirm moulage personnel and supplies • Re-confirm all food and hydration plans

Exercise Day: Volunteer Arrival

The care and management of victims is essential for continued good will in your community and to ensure an abundant supply of victims for future exercises. Your attention to these details ensures victim safety and addresses liability issues related to the management of individual volunteers.

Instructions for Exercise Day

Hold an exercise briefing for all volunteers prior to exercise start. This will allow you to provide instructions and information about the exercise and outline procedures to be followed for the day. While the exercise flow and requirements may be clear to you, the entire disaster system is a mystery to most civilians who have never participated in such an event. Remember that this is your chance to educate and influence the general public regarding emergency preparedness – this is a significant educational opportunity! We recommend that you include the following information:

- Sign-in
- Collection of waivers
- In case of emergency contact person
- Thank them for volunteering their time and stress the importance of their participation
- Explain the overall exercise scenario in broad detail
- Patient scenarios
 - ✓ Distribute DPS (or other patient scenario) cards with signs and symptoms
 - ✓ Discuss individual scenarios with volunteers to ensure familiarity with injury or illness and how it progresses through the exercise
 - ✓ Give advice on how the volunteer should act to appropriately represent his/her illness or injury
- Patient acting/clinical Coaching (know how to be the patient on your card)
- Moulage instructions
- Decontamination procedures, if applicable
- Volunteer survey form – observations and feedback are important
- Safety issues to discuss:
 - ✓ Exercise specific “release word” to signal real emergency during exercise play
 - ✓ Hydration
 - ✓ Food
 - ✓ Bathroom locations and breaks
 - ✓ Potential hazards (bee stings, insect bites, broken glass, dust, etc.)
 - ✓ Latex allergies

- ✓ Sunburn/cold
- ✓ Pre-existing medical conditions
- ✓ Real symptoms (onset of illness)
- ✓ Injuries that occur during the exercise and procedures for reporting
- Presence of VIPs, photographers, reporters and television crews
- Flow of exercise – from beginning to dismissal
- Dismissal procedures from exercise, for example:
 - ✓ collect survey form
 - ✓ sign-out
 - ✓ return of patient scenario cards
- Contact number for on-site CCC or other exercise officials for problems or concerns that arise during exercise
- Return of patient scenario cards

Check-in procedures

Provide a check-in or sign-in sheet for all victims/actors. It should include the following elements at a minimum (See Appendix):

- Name
- Time of arrival
- Waiver signed (yes, no) and Consent form, if volunteer is a minor
- List of any pre-existing medical conditions
- List any known allergies
- Family members
- Location that they will be transported to
- Departure time (from exercise)
- Emergency Contact Information (name and phone number)
- Survey (to be completed at the end of the exercise)

Waivers

Each organization maintains responsibility for injury or illness incurred during the exercise. We highly recommend that you seek legal counsel to assist with preparation of waivers specific to your exercise and organization. See Appendix #2 for an example of a waiver. Please modify and adapt this waiver to meet your institutional needs.

Pre-Existing Conditions

Many individuals have pre-existing conditions that may need to be identified before participation in the exercise. Failure to identify and record these injuries could result in liability issues. While a record of these injuries or illnesses does

not preclude litigation, it can act to minimize risk. Once conditions are identified and recorded, a medical screening exam should be performed and a decision made to include or exclude the individual in the exercise.

Safety First – Determine a Release Word

It is strongly recommended that each exercise designate a “stop” or “release” word that establishes immediately that “real world” assistance is needed. This phrase or stop word should be widely publicized to all participating organizations, players and volunteers. Use of this term can end the exercise, establish a real world emergency, or identify that a player or participant is in need of assistance.

Insertion & Integration into Overall Exercise Scenario

As the Casualty Care Coordinator (CCC) you have a responsibility to the volunteers to keep them safe and appropriately utilized throughout the exercise. If casualties are dispersed to several facilities simultaneously, consider providing a CCC at each of the receiving facilities. This person then acts as the on-site contact person to assist volunteers in any way or in case of emergencies. This person can then communicate site-specific needs with the lead CCC for questions and volunteer tracking. The loss of or injury to a volunteer during an exercise could be devastating and should be avoided at all costs. The procedures listed above will not necessarily prevent any problems from arising, but will demonstrate dedication to casualty safety and responsibility for volunteer care.

Many agencies can be involved in the planning and execution of exercises. Each of these agencies generally has a set of objectives that they hope to achieve during the exercise. Unfortunately, volunteers may be seen simply as a means to an end and their appropriate use in the response system is often overlooked. For example, in a recent exercise involving a nuclear explosion, casualties were pre-staged at the scene at the time of detonation. However, due to elevated radiation readings, first responders did not arrive to retrieve casualties for several hours. This required significant efforts by a CCC to provide hydration, bathroom breaks, and re-staging efforts while concurrently communicating the situation with the Incident Commander in an effort to ‘jump-time’ to ensure an appropriate rescue effort. Volunteer survey forms later indicated a true concern on behalf of the victims that their needs would not be met during a real emergency as a result of this delay in rescue. Prior planning between the CCC and exercise coordinators may have prevented this problem. If the insertion of victims is delayed, the response time for first responders may be delayed; however, premature insertion may subject victims unnecessarily to the elements, dehydration, and boredom from prolonged delays in response.

Victim Care & Feeding

In addition to appropriate utilization of volunteer victims, certain personal needs must be addressed. Be sure to provide bathroom breaks and appropriate facilities at each stage of the exercise. If fixed bathroom facilities are not available, the use of portable bathroom facilities with appropriate accessories and sanitizing wipes is necessary. A team or individual should be assigned responsibility for re-stocking and cleaning of these facilities throughout the exercise.

While participants should be encouraged to bring their own hydration, it remains the responsibility of the CCC to ensure all participants are well-hydrated throughout the day. Local restaurants and beverage distributors are often willing to provide food and beverage as a donation or community service. In lieu of a food service, snacks and water should be provided for any exercise or drill expected to last longer than one hour.

Privacy and Decontamination Issues

As civilians in the community, many participants have never been disrobed in public before and will be preoccupied with privacy concerns. Be sure to notify all participants during the registration process if decontamination procedures are to be performed. Be clear if clothing removal will be required, if clothing could be ruined and that volunteers should wear bathing suits under their clothes. Participants are encouraged to wear either bathing suits (dark colored) or jog bras (dark colors) and shorts. Lighter colored bathing suits and jog bras often become transparent when wet and may result in withdrawal of volunteer cooperation or other privacy issues. Often, large-scale exercises are highly publicized and photographers are present – volunteers should be told ahead of time to expect their presence.

Exercises employing decontamination procedures often require ‘bagging’ of civilian clothing. Decontamination teams are often focused on the decontamination procedures rather than the tracking or preservation of clothing. It should be stressed to participants that their clothing may be cut off during decontamination. They should be either willing to sacrifice the clothing they have brought (through prior notification and instruction) or they should don clothing provided by the exercise design team or CCC that is designated for this purpose.

If victims bring their own clothing and shoes and wish to retrieve these items, they should be readily available in a designated location, or they should be brought to the volunteer victim at the end of their participation in the exercise. The CCC at each treatment facility should be responsible for this action.

At the end of the exercise, victims may require transport back to the sign-in area to retrieve their vehicles or meet-up with other participants. Drop-off and pick up

locations should be established at each of the receiving facilities. Furthermore, a time should be established such as “pick up will occur on the half hour at “X” facility at “X” location. Each volunteer victim should carry this information with them, including a contact number in order to enhance tracking and recovery of volunteers.

Moulage and Coaching of Clinical Conditions

Moulage is an intricate part of engaging the clinical response teams in casualty care. Moulage, when coupled with appropriate victim ‘acting,’ can engage clinicians to respond in a ‘real world’ fashion and accelerate the enthusiasm and participation of response teams. Some patient scenarios employ descriptions for appropriate moulage application that accompany the patient injury/illness scenario card (Cards available through DPRO at <http://www.clusterfix.com>), while others leave descriptions of the moulage application to the imagination of the moulage specialist.

Not all moulage specialists are clinically skilled enough to teach appropriate clinical signs and symptoms to volunteer victims. It is recommended that a skilled clinical person be readily available to discuss with the volunteer victim his/her expected behavior/acting as it relates to their injury or illness. It is not merely enough to ask the victim to cry out in pain. Many patients do not normally behave this way (or they may have never experienced this condition) and they actually need to be coached and encouraged to practice before becoming involved in the exercise. Demonstrations of expected behavior by a clinician or actor can be helpful. Clinicians can also assist moulage personnel with small nuances of moulage application as they may relate to specific injuries that accompany the patient condition.

If your exercise employs the use of moulage, please be sure that the victims are instructed about the care of their make up and moulage appliances. Another consideration is that moulage makeup is very messy and difficult to remove. Moulaged victims will get the makeup on anything they come in contact with including chairs and car seats. If volunteers utilize their personally owned vehicles or if transportation is leased during the exercise, be prepared to provide car seat coverings or garbage bags for victims to sit on to prevent staining.

Finally, moulage can be difficult to remove and requires the use of showers, cold creams or other lotions for prompt removal. Please consult your moulage specialist before exercise day about their recommendations for removal and provide volunteer victims with access to these items.

Volunteer Victim Surveys

As stated throughout this document, the use of volunteers can be invaluable to the success or failure of each exercise. Sometimes a facility or agency may not

have an accurate assessment of their ability to deliver rescue and care to victims unless they solicit feedback from volunteers. In order to avoid bias, it is strongly recommended that all exercises utilizing volunteer victims also include a volunteer survey form to provide feedback on their experiences. The purpose for this is not only to evaluate their overall care, but to ensure continued volunteer participation in subsequent exercises.

Please see Sample Volunteer victim survey in appendix 3.

Appendices

- **Appendix 2: Volunteer Information Sheet**
 - **Appendix 3: Sample Volunteer Survey**
- **Appendix 4 Sample Volunteer Sign-in Sheet**

Appendix 1 – Volunteer Information Sheet

Actor Information Sheet (EXERCISE LOCATION)

*Please carefully read the following points; they will ensure that your participation in this exercise is safe and enjoyable!
Exercise officials are available to answer any of your questions.*

Don't Be Late! Please arrive at (location) between (time) and (time).

When you arrive, you will need time to check in, be assigned a role or an injury, have your makeup applied, attend a short briefing about your role and what will happen during the exercise and then be directed to your assigned area.

Please know that the day may be long and tiring. Volunteers transported to hospitals will be returned to the exercise site (provide schedule i.e. at .5 hour intervals). Volunteers will be returned to the start location no later than _____ [am/pm]; however, individuals could finish at different times. Also, if you have any health concerns, please tell the Casualty Care Coordinator before the start of the exercise.

Eat a good breakfast before arrival.

Please understand that emergency exercises can be chaotic affairs, as they would be in real life. It is your responsibility to eat a well-balanced meal before arriving at the exercise, just in case you miss some of the food provided at the park.

There will be snacks and beverages available before and during the exercise. Meals will be provided.

Parking at (insert exercise location)

If you are driving your personal vehicle to (location), please park _____. (Watch for "Volunteer Parking" sign). If you carpool, keep in mind individual volunteers may end the exercise at different times and that you might have to wait for others to arrive back to the start location.

Wear layers of old clothes.

Wear clothes that you don't mind getting wet, dirty, stained, or torn. Your old painting clothes, thrift shop shirts, or old clothes you had planned to give away would be perfect. There is also a possibility of temporary staining on your skin from the makeup. And, you will probably get dirty!

For those who have volunteered to be "decontaminated", remember to wear a bathing suit beneath your old clothes. You will get wet!

Bring only necessities and a sense of humor.

Do not bring cameras, cell phones, jewelry, or other items that might get wet, lost or stolen. Also, do not bring large sums of money. There will be no safe place to keep these items. Also, please do not bring uninvited friends or anyone who has not previously registered to volunteer during this exercise.

Physical Examination

Victims are routinely examined by health care providers such as EMTs/Paramedics/Nurses/and Physicians during an exercise. Be prepared to be touched in a professional way such as what you might expect during any routine physical examination. Any inappropriate touch should be refused by the participant and immediately reported to exercise personnel by using the 'safe' word established by your exercise team.

Don't overact.

It is very important to play your assigned role the best you can, but this does not mean you should overact. Overacting can be dangerous for yourself and the emergency workers in the exercise.

If you do not know how to play your role or have questions about the briefing, please ask the volunteer coordinators who are there to help. If you are assigned the role of a psychologically distressed person, please act upset, but not out-of-control!

If you get hurt or have a real problem say, (Insert "stop or safe word")!

You must use the phrase (insert “stop word”) to tell exercise staff that you have a real problem and are no longer acting. We will have emergency medical personnel working on-site to ensure your safety and comfort.

You must check-in and sign-out.

When you are assigned an “injury”, a victim tag will be placed around your neck. These cards must be turned in at the registration desk before you leave. **Do not remove or allow anyone to remove your victim tag during the exercise - not even at the hospital!** When the exercise is over, turn in your victim tag with the questions completed on the back.



If You Go To The Hospital...

Please be sure to read all (insert number of flip cards) cards of your scenario!

Some of you will change and progress to a different condition and will need to change your behavior to reflect these changes. Some of you will get sicker. Some of you will get better. Some of you will not change at all.

There are potentially (insert #) stages of progression for this drill:

- **Stage I is your condition at the time the medics find you at the scene.**
- **Stage II is your condition at the time you arrive at the hospital and go through triage.**
- **Stage III is your condition approximately 30 minutes after arrival to the hospital.**

***Do Not Allow Nurses, Doctors or Medics to “Read Ahead”
On Your Condition!***

They may only read the card that is for them and the cards that came ahead or before your arrival to that stage. They may not read ahead to different stages until it is time.

Please play your part. This is critical!

If you act uninjured, your condition will not be believable. The biggest complaint from healthcare providers is that it “didn’t seem real.” Therefore, it is your job to convince them that this is as real as it gets for training!

If someone touches an area or bumps an area that is injured, you should scream out in pain! This is your opportunity to earn a Grammy. We encourage you to seize the moment!!!

Please be sure you understand all of these points. If you have any questions, please contact the (Casualty Care Coordinator) Office of Emergency Management at (insert phone number here). We want to ensure your safety and preparedness for this exercise.

On behalf of (Insert organization responsible for volunteer care/or exercise planning group) and all of the participants in the exercise, thank you in advance for volunteering! It will be an interesting and enjoyable day and should result in our community being better prepared to face real emergencies in the future.



Appendix 2 – Sample Volunteer Survey

Please answer all questions by circling the number on a scale of 1-10 that best matches your experience during this exercise.

(1 = least positive or not at all; and 10 = most positive or excellent)

1. How would you rate your overall experience?

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

2. Rate the information materials you received prior to the exercise

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

3. Rate the adequacy of the food supplies during the exercise

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

4. Rate the adequacy of water/hydration supplies during the exercise

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

5. Rate the overall level of safety you felt throughout the day

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

6. Rate how safe you felt during transport

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

7. Did you feel like your medical needs as a victim were met in a timely fashion before you were transported (i.e. at the scene of the incident)?

Yes | No | Not applicable

8. If no, how long was it until you were first evaluated?

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

9. Did you feel like your medical needs as a victim were met in a timely fashion after you were transported to the treatment area?

Yes | No | Not applicable

10. If no, how long was it until you were first evaluated?

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

11. Did you have your vital signs (Blood pressure, pulse, breathing) checked more than once after you arrived to a treatment facility?

Yes | No | Not sure

12. Rate how well the health car professional caring for you communicated what was happening?

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

13. Did you have a sense that the person(s) treating you understood your condition?

Yes | No | Not applicable

14. Did you feel like you were treated with compassion?

Yes | No | Not sure

15. Did you feel like your privacy was respected?

Yes | No | Not sure

16. Would you want to be treated at this same hospital if there were a real disaster that was similar to the exercise you did today?

Yes | No | Not sure

17. Please give one reason for your answer in question #16:

18. Would you want to return again to be a volunteer?

Yes | No | Not sure

General Comments:

What would you like to see done differently in the future?

What do you think was done well?

Appendix 3 – Sample Volunteer Sign-in Sheet

Name	DOB (mm/dd/yy)	Age	Waiver (Y/N)	Emergency Contact Info. (Name/Phone)	Individual or Family*	Time In	Time Out
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

* This question is meant to determine whether the volunteer is participating alone or with others who might need to be kept together.