



HEALTHIER WORKPLACES | A HEALTHIER WORLD

Guidance to Protect Volunteers From COVID-19 During Natural Disaster Response and Recovery

Guidance Document

[aiha.org](https://www.aiha.org)



National Institute of
Environmental Health Sciences
Worker Training Program

Photo courtesy of Getty Images

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Overview

This guidance document is designed to provide you, an unpaid natural disaster response volunteer, with information about how to protect yourself from the SARS-CoV-2 virus that causes the disease COVID-19. Additionally, information about how volunteer organizations operate during a response has been included to help you understand the managerial and organizational systems you may encounter. Natural disasters include severe naturally-occurring events like hurricanes, earthquakes, tornadoes, floods, and wildfires, as well as hazards originating from human activity that can devastate the environment, such as chemical spills.

While this guidance document focuses on protecting you from COVID-19, there are many other occupational health and safety hazards which occur in relation to natural disasters, including heat and cold stress, fatigue, toxic chemical exposures, and mold exposures, that you must also consider during response and recovery. These other concerns, although important, are not addressed in this guidance document, since many organizations have guidance and recommendations addressing them already. This document focuses primarily on preventing your exposure to COVID-19 as an unpaid volunteer. If you are interested in learning more, there will be a companion guidance piece for managers and incident commanders available soon.

Organizations that have a strong volunteer training, management, and protection program are best suited to ensure the safety of the volunteers they engage. Therefore, volunteering with an organization with this kind of program, rather than self-deployment, provides additional safety measures and better protection and coordination for all involved.

The Volunteer Community

Types of volunteers that assist in preparation and response efforts before, during, and after natural disasters may include:

- Community members responding on provisional bases to a disaster occurring within their own community.
- Members of [Local Emergency Planning Committees](#) (LEPCs), associations of locally-based professionals who have been tasked under the Emergency Planning and Community Right-to-Know Act (EPCRA) to prepare emergency plans on behalf of the communities which they serve.
- Volunteers belonging to community- or faith-based organizations.
- Volunteers serving under an organizational structure, such as the American Red Cross or Team Rubicon.
- Volunteers trained for disaster preparedness and response, such as Community or Municipal Emergency Response Teams (CERT¹ or MERT).
- Volunteers serving in a professional capacity, such as volunteer firefighters.

Whatever the exact nature of your volunteer role, it is important that you are not unduly exposed to COVID-19 when you assist communities during natural or environmental disasters. Whether you volunteer in your own community, or if you are deployed or required to travel to other locations, personal health and safety must remain one of your top priorities. Volatile and unstable outdoor settings can be risky to navigate during ordinary circumstances, but during a pandemic, exposure to people who may be infected with COVID-19 is an additional hazard to mitigate.

¹See Appendix A for more information on CERTs.



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Volunteers can learn about additional hazards related to disaster sites by participating in Occupational Safety and Health Administration (OSHA) [Disaster Site Worker Training](#)² and through information conveyed in the National Institute of Environmental Health Sciences (NIEHS) Disaster Preparedness and Response Training [tools and resources document](#)³ on the NIEHS [website](#)⁴. The World Cares Center specialized in volunteer management and protection and also has free information on its [website](#).

The content of this guidance document includes the following: (click to jump to each section)

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Legal Protections for Disaster Volunteers

There are few legal protections for volunteers, and these vary by state, organization, and agency. Before volunteering, if there are concerns about the legal protections for volunteers, contact the associated organization or agency directly.

Volunteers who self-deploy, or work outside of the Incident Command System, are not the responsibility of the Incident Commander and have little recourse in the event that they are injured or become ill during the response. If an organization accepts the help of a volunteer, by default, that individual then becomes the responsibility of that organization.

The organization must:

- Provide insurance for volunteers.
- Register volunteers.
- Assess if volunteers are healthy enough to volunteer.
- Train volunteers to do the job.
- Minimize risk to volunteers.
- Protect volunteers with personal protective equipment (PPE).
- Properly manage volunteers.

(adopted from: *Ethical Volunteer Management: www.disastervolunteerismacademy.org*)

²<https://www.osha.gov/training/outreach/overview>

³https://tools.niehs.nih.gov/wetp/public/hasl_get_blob.cfm?ID=11087

⁴<https://tools.niehs.nih.gov/wetp/index.cfm?id=556>



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Proper Management Improves Protection: The Incident Command System

Emergency responses can be managed by any members of the whole of community coming together to help. Government and municipalities use a standardized approach to coordinate emergency response: the Incident Command System (ICS), a component of the National Incident Management System. While not all volunteer organization use this system, many do, and this document accounts for the ICS command and communication structure.

ICS uses a command chart to ensure that volunteers know to whom they report and whether they are communicating with the right person. As a volunteer, you may be asked to report under one of the following four sections, also shown in the blue boxes in Figure 1, each of which are led by section chiefs reporting in turn to a single incident commander:

- **Operations**, the section that performs work at the site of the incident.
- **Planning**, the section that develops Incident Action Plans and manages recordkeeping.
- **Logistics**, the section that obtains all resources needed for response
- **Finance and Administration**, the section that manages and documents financial costs

You could also be placed to support the ICS command staff, including:

- The **public information officer**, who generates all public communications regarding the incident.
- The **liaison officer**, who coordinates with supporting agencies outside of the Incident Command System.
- The **safety officer**, who is responsible for the safety of every individual working within the Incident Command System.

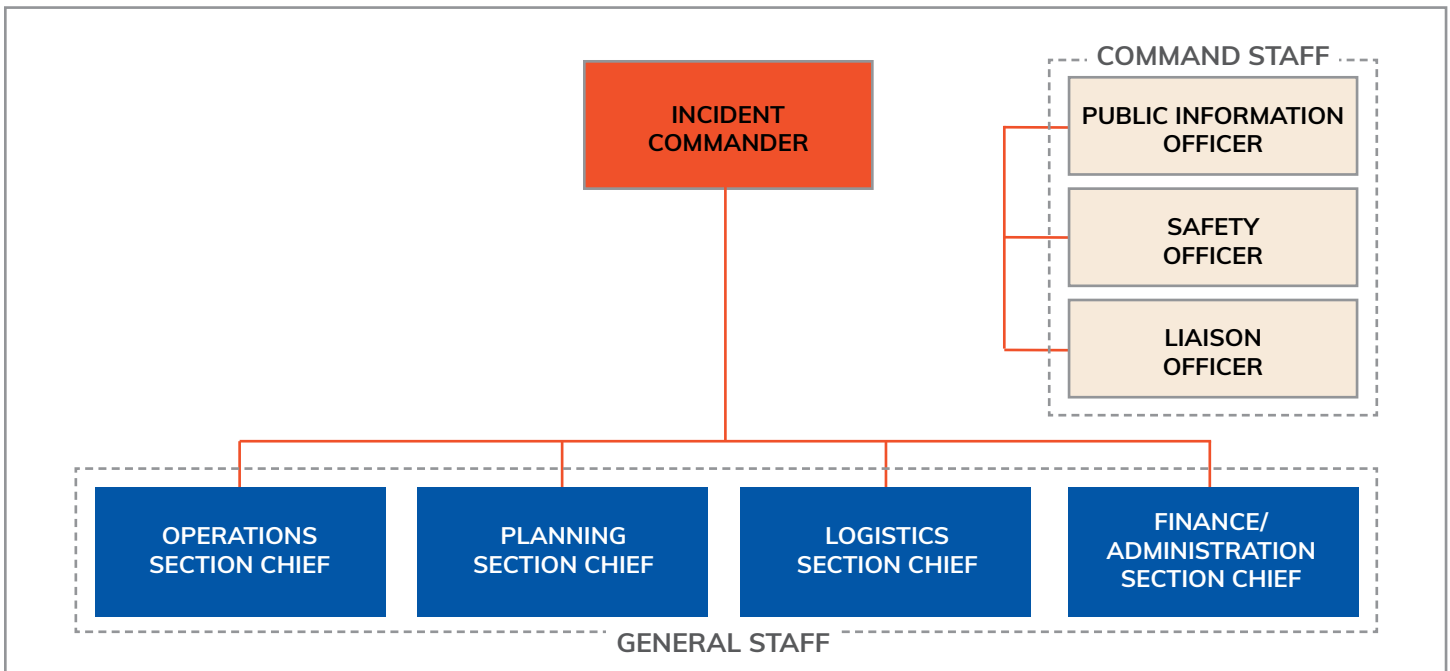


Figure 1. The organizational structure of ICS. Source: FEMA, National Incident Management System, 3rd Edition, 2017 (PDF), https://www.fema.gov/media-library-data/1508151197225-ced8c60378c3936adb92c1a3ee6f6564/FINAL_NIMS_2017.pdf.



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All emergency response personnel under the ICS, including volunteers, are assigned to a position and have a single supervisor directing them on the work to be done. This is a very important component of ICS, called the chain of command. If multiple supervisors were to give conflicting directions to one volunteer, that volunteer may not understand his or her assigned role or task, leading to mistakes, inefficient response, or unsafe actions. The mandate for every individual to report only to one supervisor reduces confusion among personnel.

Along with a direct report, you should be provided with a description of the roles and tasks you have been assigned, shift hours, personal protective equipment, and worksite locations. You should assess your roles and responsibilities carefully to be sure you fully understand them and are comfortable with the associated risk.

You should expect that you will attend daily briefing and debriefing meetings, which allow personnel to share information and inform other teams of the current situation. These meetings are critical for protecting all personnel.

Personal Measures to Prevent COVID-19

The following practices are important to prevent exposure to COVID-19, for both your safety and that of others, such as recovery workers and members of the displaced population.⁵

What can you do to prevent exposure?

Maintain hand hygiene:

- ✓ Wash hands often with soap and water for at least 20 seconds.

- ✓ Use a hand sanitizer that contains at least 60 percent ethyl alcohol if soap and water are not available.
- ✓ Avoid touching your eyes, nose, and mouth with unwashed hands.

Avoid close contact:

- ✓ Avoid close contact with people who are visibly sick.
- ✓ Maintain precautionary distance between yourself and all others, whether they appear sick or not; the virus may be spread by individuals who do not show obvious symptoms.
- ✓ Keep distance from people who are at higher risk to avoid potentially exposing them to the virus.

Use a cloth face cover or mask:

- ✓ Wear a cloth face cover in public areas where maintaining social distancing is difficult—to protect others in case you have unknowingly become infected.
- ✓ Do not cover the faces of children younger than two years of age, anyone who has trouble breathing, or anyone who is unconscious or unable to remove the mask without assistance.
- ✓ Maintain six feet between yourself and others, even while your face is covered; cloth masks do not substitute for social distancing. (See more information about the differences between cloth face covers and other personal protective equipment (PPE) in the section on PPE below.)

Follow etiquette for sneezing and coughing:

- ✓ Cover your mouth and nose with a tissue when coughing or sneezing, or shield your face with the inside of your elbow, if not wearing a face cover or mask.
- ✓ Discard used tissues in the trash.

⁵<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>



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- ✓ Wash hands with soap and water for at least 20 seconds immediately after coughing or sneezing.
- ✓ Clean hands with hand sanitizer containing at least 60 percent ethyl alcohol, if soap and water is not available.

Clean and disinfect:

- ✓ Clean and sanitize frequently touched surfaces daily, including tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.

Deployment Measures to Prevent COVID-19

Many volunteer organizations are developing key steps to prepare their responder and volunteer networks to safely respond to disasters during a pandemic. As a volunteer, you may be asked to complete pre-deployment training. Throughout the ongoing pandemic, virtual training is necessary to teach volunteers about their organization, their jobs and its related hazards, and the measures taken to protect them.

Risk mitigation strategies that may be used by organizations to reduce volunteers' risk of exposure to the SARS-CoV-2 virus are discussed here with focus on volunteer dining, lodging, housing, or accommodations, if provided, and hygiene during response and recovery operations. Organizations should provide volunteers with the right personal protective equipment (PPE) for the work they will do. You should verify that the necessary PPE will be provided to you; in some cases, you may want to bring supplies with you, as safety gear is often in short supply after a disaster, and even more so during the current pandemic. Pandemic safety supplies should include face coverings, hand sanitizer, and other personal

hygiene items. Follow guidelines set by the Centers for Disease Control and Prevention (CDC) and policies set by state and local officials.

Arrival Measures

When you arrive to your duty stations, it is recommended that management provide separate spaces for you to [socially distance](#)⁶ from others on your crew for 14 days, if possible. During this period, you should take special precautions to limit any close interactions with other people by maintaining at least six feet distance and avoiding shared kitchens, living spaces, bathrooms, and household items. If you cannot socially distance for 14 days upon arrival, it is highly recommended that you wear your mask at all times and monitor yourself for any signs and symptoms of COVID-19. If you experience any signs or symptoms that may be due to COVID-19, let your supervisor know.

If shared living spaces and common areas must be used during the initial 14-day period after reporting, you should still maintaining at least six feet distance from one another, wear [cloth face coverings](#)⁷, and frequently clean and disinfect shared and high touch surfaces. Management may also consider increasing ventilation rates or the percentage of outdoor air that circulates within the shared living and working areas, to further protect you.

When feasible, management should employ mechanisms to help limit your interactions with others during this 14-day period. This may include online training sessions and delivery of groceries and meals.

After the initial 14-day period is over, volunteers who work together and do not have regular interactions with other people can isolate as a unit. During this time, volunteers should continue to use masks; cover their mouth and nose when they cough or sneeze;

⁶<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

⁷<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>



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perform proper [hand hygiene](#),⁸ and frequently clean and disinfect shared spaces, [vehicles](#),⁹ and equipment with EPA-registered disinfectants that are appropriate for the surface in question and effective against the SARS-CoV-2 virus, following label instructions. If the crew operates as a unit, it is not necessary for crew members to wear face coverings unless they are [not feeling well](#)¹⁰ or are interacting with the public; this is consistent with CDC guidelines for [households living in close quarters](#).¹¹ If interactions with the general public must occur, all personnel should practice social distancing, wear cloth face coverings, perform hand hygiene, and disinfect surfaces, objects, or items that are shared with the general public. For more information, see CDC's COVID-19 [Guidance for Shared or Congregate Housing](#).¹²

Volunteer organizations must have a plan to separate sick individuals from all other personnel. As a volunteer, you should ask to see this plan if it has not been provided.

Lodging

Lodging, which may be provided by the volunteer organization, will vary depending on the disaster site. Make sure, prior to deployment, that you have accommodations. Hotel accommodations may not be guaranteed, so you may need to stay in shelter-type conditions. If you are staying in a hotel, you may have a single-occupancy room or be assigned a roommate. Sharing towels or bedding is not recommended. If possible, find accommodations at extended stay hotels, which may offer a morning

meal or cooking area and have laundry facilities to wash your clothes. The hotel may also provide room cleaning services. Ask the front desk for the cleaning schedule, which may have been altered or reduced to protect hotel employees. Other guests in the hotel may fellow volunteers or other affected individuals, so you may use your shared lodging as an opportunity to develop working relationships.

It is recommended that you keep a flexible perspective on lodging options, as you may want or need to relocate once the disaster site has been assessed. If you must travel during the disaster, it is strongly recommended that you to use the buddy system and notify someone else of your plans. You should provide your volunteer team leader or partner a packet containing your medical, contact, and other critical information, in case of emergency.

Be aware that most volunteer organizations are now focusing on efforts involving local volunteers that can work at the disaster site during the day and return home at night. Most volunteers are working virtually or within their locality to support efforts such as preparing hygiene kits and stocking mobile kitchen units.

Other Housing Situations

In some cases, you may be housed in a large space with other volunteers. [According to CDC](#)¹³, hotels, dormitories, and small shelters accommodating fewer than 50 residents should be prioritized over larger shelters. Large congregate shelters should be used only as a last resort.

⁸<https://www.cdc.gov/handwashing/when-how-handwashing.html>

⁹<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html>

¹⁰<https://www.cdc.gov/coronavirus/2019-ncov/faq.html#Preparing-Your-Home-and-Family-for-COVID-19>

¹¹<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/living-in-close-quarters.html>

¹²<https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html#common-spaces>

¹³<https://www.cdc.gov/coronavirus/2019-ncov/downloads/Guidance-for-Gen-Pop-Disaster-Shelters-COVID19.pdf>



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When lodging with other volunteers, remember that CDC recommends social distancing at six feet minimum. When setting up your sleeping space, keep at least six feet of space between you and your roommate. You may want to add some extra distance between you and the next person for your bed. You should also set up the beds to sleep head to toe. If possible, beds should be separated by a bed length, floor-to-ceiling, non-permeable barrier, such as Plexiglas or plastic sheeting, keeping a 36-inch space between each bed and barrier. Materials must be fire resistant or treated with fire retardant. Barriers cannot obstruct exits or air flow and must be cleaned at least daily. Another option is to issue each personnel member with a single-occupancy tent to use in place of barriers group accommodations.

Personnel should not be allowed to visit sleeping quarters to which they have not been assigned. If bunk beds are used in group shelters, occupants must sleep head to toe.

Cohorting

Another approach that volunteer organizations may take to minimize potential SARS-CoV-2 spread is through sorting volunteers into groups that work, live, and travel together, called cohorts. Volunteers who have completed 14 days of isolation and have tested negative for COVID-19 prior to deployment should pose low risk for spread of the virus, and groups made up of these volunteers should be able to interact safely among themselves. Once these groups have formed, care must be taken to prevent exposure to any outside personnel.

Volunteers who work mostly with other members of their cohort have minimized exposure to other responders, even if time constraints do not permit a

full 14-day quarantine period. If one person within a cohort exhibits symptoms, the entire cohort can be isolated. This eliminates the need for further contact tracing and the need to isolate larger numbers of responders. However, for this practice to be effective, the volunteer organization must develop protocols to ensure that cohorts do not have contact with outsiders, or that such contact is minimized as much as possible. If you have questions about if or how your volunteer organization practices cohorting, it is recommended that you ask about this before deploying.

Dining and Food Safety

You will most likely be responsible for your dining arrangements during your deployment. Try to have at least three days of food and one day of bottled water with you until eating arrangements are securely established. At disaster sites, there is a strong emphasis on providing individual boxed meals or ready-to-eat meal packs and bottled water to affected individuals and responders, to reduce foodborne illnesses. [As recommended by CDC](#)¹⁴, if boxed meals are not available, cafeteria-style service is preferred over self-service, buffet, or family-style dining, while responders still maintain a minimum six-foot distance between each other (or others outside their cohort; see above).

[Do not share dishes](#)¹⁵, drinking glasses, cups, or eating utensils with others. Food should be served using disposable silverware, cups, and plates. See [CDC's food safety resources](#)¹⁶ for more information on measures the volunteer organization may use to protect responders from foodborne illnesses.

If given the option, choose a sit-down meal over a fast-food meal. Sit-down meals give you time to relax, organize your thoughts, and have conversations

¹⁴<https://www.cdc.gov/coronavirus/2019-ncov/downloads/Guidance-for-Gen-Pop-Disaster-Shelters-COVID19.pdf>

¹⁵<https://www.cdc.gov/disasters/foodwater/index.html>

¹⁶<https://www.cdc.gov/disasters/foodwater/facts.html>



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with other people. Socializing helps to recharge your psychological wellness, but still remember to practice proper social distancing. See [NIEHS Emergency Support Activation Plan](#)¹⁷ for more information.

Public Transportation Safety

Always carry hand sanitizer with you and use it the moment you leave public transportation, including busses, trains, or subways. Avoid touching your face to the greatest extent you're able, but especially if you are taking public transit, as the small, enclosed, potentially high-traffic space is a potential repository for the SARS-CoV-2 virus. Wash your hands the moment you have access to soap and water. Limit contact with train and bus supports such as poles and handles, and avoid directly touching turnstiles. Avoid crowds if possible.¹⁸

Hygiene

Creating and following a systemic cleaning and sanitizing regime is key to preventing exposures. You should be provided clear procedures to address hazards such as waterborne illnesses and what to do if there is lack of clean and potable water for hand washing. Also, it is important to know that hand sanitizers are not effective when hands are visibly dirty. The use of hand sanitizers, soap, and access to potable water to wash hands is difficult during disasters so every effort to have potable water available during the response is critical for volunteers.

For more information on hygiene practices, see [CDC's guidance on cleaning and disinfection](#)¹⁹, [hand washing](#)²⁰, and [personal hygiene during a disaster](#).²¹

Cleaning

The volunteer organization should ensure that frequently-touched surfaces and shared areas, such as exercise room, laundry facilities, restrooms, and elevators, are [cleaned and disinfected](#)²² using [EPA-registered disinfectants](#)²³ authorized for use against the SARS-CoV-2 virus. The EPA list names all cleaners known to be effective against the SARS-CoV-2 virus.

Keep in mind the important differences between cleaning and disinfecting. Cleaning removes loose debris such as dirt or crumbs. Disinfecting kills viruses. The cleaning step is important because EPA-registered disinfectants can work safely and effectively only on an area free of debris. Instructions for cleaning and disinfecting can be found on the [CDC](#)²⁴ and [AIHA Coronavirus Outbreak Resource Center](#)²⁵ websites.

You should disinfect spaces that you share with other responders or volunteers before and after you use them.²⁶ Make sure to wear proper PPE while using disinfectants, such a gloves, and to follow and manufacturers' instructions for use of the chemical. Follow [EPA's guidance](#)²⁷ for general disinfectant use and look up the disinfectant's Safety Data Sheet to determine what PPE to use.

¹⁷https://tools.niehs.nih.gov/wetp/public/hasl_get_blob.cfm?ID=10602

¹⁸www.disastervolunteerismacademy.org

¹⁹<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

²⁰<https://www.cdc.gov/handwashing/>

²¹<https://www.cdc.gov/disasters/floods/sanitation.html>

²²<https://www.cdc.gov/coronavirus/2019-ncov/prepare/disinfecting-building-facility.html>

²³<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

²⁴<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

²⁵https://www.aiha.org/public-resources/consumer-resources/coronavirus_outbreak_resources

²⁶<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>

²⁷<https://www.epa.gov/sites/production/files/2020-04/documents/disinfectants-onepager.pdf>



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Shared Restrooms: Shared restrooms should be cleaned regularly, at least twice per day, after the common periods of heavy use in the morning and evening. During cleaning, make sure that trash cans are also emptied. Keep restrooms continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer should be provided whenever soap and water is not available. Notify your supervisors if you notice have any difficulties in maintaining clean, stocked restrooms.

Volunteers should be provided with information on how to wash hands properly, such as through signs posted in bathrooms. Be aware that that sinks and countertops may be an infection source, so avoid placing toothbrushes and similar personal items directly on counter surfaces. Tote bags are useful for keeping personal off restroom surfaces.

Shared Workstations: When sharing workstations, it is important to keep them clean. Disinfect the workstations before and after you use them. If any pens are required, they should be sanitized after use. A convenient way to keep sanitized pens separate from used pens is by placing them in appropriate cups, marked “clean” and “dirty” respectively.

Shared Tools and Equipment: Tools and equipment should likewise be cleaned and disinfected before and after each use.

Shared Kitchens and Dining Rooms: The volunteer organization may restrict the number of people allowed in the kitchen and dining room at any given time, so that volunteers can remain at least six feet apart from one another. Remember, do not share dishes, drinking glasses, cups, or eating utensils.

Trash Receptacles and Containers: Use gloves when removing garbage bags and handling and disposing of trash. Wash hands as often as possible while handling trash.

Laundry Rooms: Volunteer organizations may provide laundry facilities to help prevent the spread of COVID-19. If you use a laundry facility, continue to maintain at least a six-foot distance from others. Wait outside of the laundry area for your load to finish washing or drying, if that is necessary for social distancing practices. Wash your hands immediately after handing dirty laundry or using the shared machines.

Recreational Areas, such as Activity and Exercise Rooms: These areas may not be accessible to volunteers due to the increased risk of exposure that occurs in any area where humans congregate for long periods of time. If they remain open for volunteers' use, the number of people allowed in at one time may be restricted by the facility or volunteer organization to ensure everyone can stay at least six feet apart. Participating in activities and sports, such as board games, basketball, and chess, that require close contact is not recommended, particularly indoors.

Personal Protective Equipment

You may need to wear personal protective equipment (PPE) during your volunteer work, including gloves, eye protection, respiratory protection, surgical or cloth masks, and face shields.

Gloves: If you are handling items that may be contaminated with chemical or biological materials, such as the SARS-CoV-2 virus, you will need to protect your hand with gloves. If you are working with chemicals, the gloves must be authorized as safe to use with the chemicals to be effective. This information can be found in product Safety Data Sheets or the manufacturer's instructions for use. Check in with a supervisor before using any chemical.

Eye protection: Safety glasses or goggles protect your eyes from splashes containing a chemical or biological hazard, or from the respiratory droplets pro-



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duced by a sick person's coughing or sneezing, if you must be within six feet of them. Face shields can provide additional protection in these situations as well.

Respiratory protection: NIOSH-approved N95 filtering facepiece respirators, and other respiratory protection, remove and block contaminants from air entering the facepiece, providing clean air to the person wearing the respirator. If you are provided respirators, note that they can be difficult to breathe through and could be hazardous for people with certain medical conditions. Before you think you will need to use a respirator, talk with your healthcare provider about whether it is safe for you. As is the case with all PPE, you will need to be provided training in correct use before donning a respirator.

To work properly, a respirator must form a seal against the face that is tight enough to prevent dangerous particles such as viruses from entering through the sides. Respiratory fit testing should be done on site by a respiratory protection administrator. Anyone wearing a respirator must be clean-shaven for it to be effective, as facial hair or stubble breaks the seal. The seal's integrity is verified through you undergoing a fit test with an N95 of the same make, model, and size as the one you will be wearing. You cannot assume that an N95 is protecting you unless you have been fit tested.

Surgical masks: Surgical masks are cleared for use by the FDA and block infectious particles exhaled by the wearer from entering the surrounding environment. They are open on the sides, which makes them easier to breathe through than an N95. Medical clearances and fit testing are not required for using a surgical mask. They have some splash resistance in case someone coughs or sneezes on you, but since they are open on the sides, you should not assume that surgical masks protect you from all airborne infectious particles in the environment.

Cloth face coverings or masks: Commercially-available masks and face coverings block infectious particles exhaled by the person wearing it, but typically have closed sides. Models have shown that the rate of infection within a community or work group can be significantly reduced when everyone wears masks that block these particles.²⁸

Some face coverings filter particles from the air better than others. The cloth masks that provide the best filtration are made of several layers of high thread count cotton, chiffon, or silk material, or include a half-inch-thick layer of cotton batting. Stretchy fabrics provide less filtration. Coverings made up of a single layer of cotton, such as bandanas, also provide much less filtration.

Face Shields: In addition to respirators or masks, face shields may be worn to protect the eyes and face from exposures. It is important to ask your supervisor when and if they or other PPE are needed.

Personal Safety and Family Considerations for Volunteers

Here are some considerations to help you decide whether volunteering is right for you.

It is best to volunteer through an established organization. Self-deploying to a disaster site without being attached to an organization or the Incident Command System is dangerous for both you and others working onsite who do not expect you to be there.

Find out what exactly your volunteer organization of choice does after disaster strikes. Contact the volunteer organizations in which you are interested and learn what activities the organization performs before, during, and after a disaster and what types of activities the volunteers may perform.

²⁸<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>



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Personal Safety Considerations: It is important to identify at least some of this information before you go.

- Do you know:
 - What hazards you may face?
 - What controls, such as cohorting and PPE, will be put in place or provided by the volunteer organization?
 - What you can do beforehand to plan, prepare, equip, and train as a volunteer?
 - What training the volunteer organization requires or recommends and whether it can be completed remotely and ahead of time?
 - What special precautions are being taken by the volunteer organization due to the pandemic?
- Do you know where you will be performing volunteer work?
 - Will you have to travel out of town?
 - Will you be able to travel home after your shift?
 - Will you have communal eating, lodging, dining, or transportation services?
 - Will you be working indoors or outdoors?
 - Will you work on a team or independently?
 - Will the site have precautions in to prevent the spread of COVID-19?
- Have you considered:
 - What volunteer positions are you looking to fill or support?
 - What the organization needs during an emergency or disaster?
 - What the requirements are for the volunteers, in terms of training, medical screening, and physical and medical abilities?
 - What professional skills or training do you have to contribute?

- What training in support of the organization have you already taken?
 - Do you have experience with medical confidentiality training and documentation, namely that required for correct implementation of the Health Insurance Portability and Accountability Act (HIPAA)?
 - Do you have credentials or professional licenses that may be useful for the volunteer organization?
 - Do you speak or write multiple languages, and if so, with what degree of fluency?
- Are you aware of the current risk of contracting COVID-19 in the area where you will be volunteering?
 - How will the volunteer organization track COVID-19 cases and what type of testing will they make available to volunteers?
 - How will the organization protect you from exposure to from other volunteers and responders who have tested positive for COVID-19?
 - What information does the volunteer organization have available on the area where the work will be performed?
 - Can you check your local or state department of health for updates, or get information from personnel already in the field or on site?

Family and Mental Health Considerations: Learn how to protect yourself and your family from COVID-19.

- Do you know the risk of you and your family contracting COVID-19 if you volunteer?
 - Do you know the signs and symptoms of COVID-19 and other communicable illnesses such as influenza?
 - Do you have any increased personal [health risks](#)²⁹ due to comorbidities, medications, or age?

²⁹<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-increased-risk.html>



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- Do you know the increased health risks due to comorbidities, medications, or age that may affect your immediate family members, especially those with whom you reside, should you become infected? (If you are unsure of the risks to yourself or your family, consider discussing options with them before volunteering.)
- Do you know whether you will be required to self-isolate or quarantine for 14 days after completing your volunteer work, and how will this affect your family and your work?
- If you or your family are at increased risk of contracting COVID-19, have you considered [volunteer opportunities](#)³⁰ that you can do from home or a remote location, independently, or in such a way to remain distanced from other volunteers and the community? Examples include:
 - Administrative functions such as website updating, accounting, organizing conference calls, and conducting research.
 - Fundraising online or by phone.
 - Gathering and delivering donations.
 - Running errands for responders.
 - Phone operations such as manning an emergency call line.
 - Developing training materials.
 - Providing online training.
- If you feel that the risk of volunteering is acceptable, have you considered how you will maintain that level of risk, given possibly unstable scenarios or situations, and what options you will have if that acceptable level of risk cannot be maintained?
- Have you considered the effects of that volunteering may have on your psychological health and how you will manage the stress?
- Note that returning home after working in a disaster zone may mean a period of psychological readjustment to normal life, or even a relatively normal life under self-isolation or quarantine. Work in a disaster zone includes exposure to hazards and trauma, of which COVID-19 is only a part. In such times, connecting with family and social support is important, even if these connections may need to take place online to maintain social distancing.
- Further points to consider regarding stress and trauma:
 - Maintain any personal boundaries you need. If certain topics of conversation are upsetting to you, it's appropriate to say that you don't want to talk about them.
 - Keep your calendar free and flexible for the first few weeks after returning home. Give yourself time alone to process feelings if you need to.
 - Seek professional help if stress symptoms are overwhelming, if you are having trouble sleeping or remembering things, if you experience significant depression, anxiety, or thoughts of suicide, if you are neglecting yourself by not eating, bathing, or changing clothes, if you experience problematic use of alcohol or drugs, or if you commit acts of or are a victim of domestic abuse.
- Have you considered the physiological health affects that you may experience while volunteering due to your personal health and expected work and living conditions?
- Can you commit to the volunteer operations for the time they require? Do you have conflicting time constraints or family obligations?

³⁰<https://www.ready.gov/volunteer>



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Protective and Community-Based Measures: Lastly, AIHA and NIEHS make the following recommendations for your health and safety.

- Seek out opportunities that allow you to return home each night.
- If you must travel and use the lodging or shelters established by the volunteer organization, know ahead of time, if possible, what type of lodging will be provided. If communal shelters have been established for lodging, minimize exposure by maintaining a distance of at least 6 feet from others; wearing face covering when you are not at your bunk, bed, or cot; and washing your hands frequently.
- Avoid bringing or carrying valuables or large sums of money with you. Make sure “high theft” items such as computers and smart phones are locked away securely, even when you leave your work area only momentarily.
- If there is a communal dining area, consider eating alone or at least six feet away from others due to the increased risk of transmission from dining without face coverings. Be sure to wash your hands before and after touching serving utensils.
- Drive your own motor vehicle and limit ridesharing or carpooling. Open windows if there are passengers. Keep car keys in hand and walk with someone when going to and from work. In the evening, use free public safety shuttles, if available, to get to your car or housing.
 - Wear prescribed facial coverings or PPE if driving or riding in the vehicle with others; notify the site supervisor or team leader if there are issues.
- Decontaminate shared tools, equipment, and workstations before and after use.
- Know where the closest medical services are located and if the site has a medic.
- Know if you have options onsite to choose the kind of activities or work you will perform.
- Decide if you are willing and able to depart the volunteer worksite if necessary due to unacceptable risk.
- Have an action plan in the event that you are exposed to the SARS-CoV-2 virus or discover that you have tested positive. Know in advance how you would quarantine or isolate (see [CDC Guidance](#)).³¹
- Consider self-isolating or quarantining when you return after being deployed.
 - Quarantining yourself may be necessary to protect family and other household members. A 14-day quarantine period is optimal before returning to normal interactions. This may mean confinement to a certain area of the house or staying in a separate facility for the two-week period. You may seek COVID-19 to confirm your infection status prior to resuming normal household life.
- Know what protective equipment the volunteer organization will provide and what you need to bring.
 - Cloth face coverings are not considered PPE but do help to reduce community spread of COVID-19.
 - Consider bringing additional personal hand sanitizer, soap, lip balm, and mask ear savers or protectors.
- Pack according to the type of living conditions you anticipate at the volunteer site—know whether to bring your own food, water, bed linens, cot, or other equipment.
- Pack under the assumption that supplies will be limited and retail stores closed. See the volunteer organization’s packing recommendations or those

³¹<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html>



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of the Emergency Partners Information Connection ([EPIC](#)³²) for more information.

- If you have special medical needs, such as use of a CPAP machine or refrigerated medicines, ensure that the volunteer organization can accommodate you before deployment.
- Learn if the deployment location has limited communications, such as a lack of cell phone coverage or internet, radio, and television reception; prepare family and emergency communication plans accordingly.
- If you have special dietary needs, ensure that the volunteer organization's dining options will accommodate you, or be prepared to supply your own food.
 - Consider packing extra water and non-perishable food like energy bars, nuts, or dried fruit.
- Ensure you have sufficient medical supplies, medicines, or personal supplements to last the entire deployment.
- Be extra careful during rest and relaxation time as bars, restaurants, and entertainment venues also pose a risk of COVID-19 exposure.

Additional Safety Measures to Consider in the Field

Safe Driving and Navigation: Navigating roads can be hazardous during a natural disaster because of high water, trash and debris on roads, hidden potholes, and traffic light and sign outages. Be alert for any potential hazards and, if driving is absolutely required, get direction from a site supervisor, if possible. For more information on safe driving, refer to CDC's guidance "Drive Safely in a Disaster Location".³³

³²<https://3hb3e83lj75i1iikjx1wkj2o-wpengine.netdna-ssl.com/wp-content/uploads/epic-spotlight-on-information-for-response-and-volunteer-organizations-on-responder-safety.pdf>

³³<https://www.cdc.gov/disasters/interimdrivesafely.html>

³⁴<https://www.cpsc.gov/s3fs-public/kerosene.pdf>

³⁵<https://www.cdc.gov/niosh/topics/co-comp/default.html>

Electrical Safety: Be careful using extension cords, overloading outlets, using items with damaged wiring or connectors, or using generators. During emergencies, electrical power maybe disrupted or reduced in service. Generators may be used for powering limited circuits. Do not open power or breaker boxes or handle damaged wires that may be "hot" or live.

Carbon Monoxide (CO) Poisoning: Emergency situations may cause temporary or prolonged loss of electrical power and require you to use portable or emergency generators. Emergency situations in cold weather may mean you must use kerosene heaters and cook with kerosene or gel stoves. Petroleum-powered (gasoline, diesel, or propane) generators, kerosene heaters, and gel stoves produce CO, an invisible and odorless gas that can cause death. **Never use generators in an enclosed space such as a garage or room in a building, even if the doors and windows are open.** Only use generators outside, 20 feet or more away from open windows, doors, or other sources of building air intake. Kerosene heaters come in vented and unvented models. Vented heaters exhaust combustion products out of the structure through a stack or chimney, while unvented kerosene heaters exhaust directly into the surrounding space. Both types can cause burns, fires, and CO poisoning. Prevent CO poisoning by installing portable CO detectors in living spaces where portable heaters and cooking stoves are in use, and check the detectors' operation regularly. Refer to the [Consumer Products Safety Commission](#),³⁴ [Centers for Disease Control and Prevention](#),³⁵ and commercial sites for additional warnings and instructions to help keep you safe.



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Appendix A: Community Emergency Response Teams (CERT)

The Federal Emergency Management Agency (FEMA) developed the Community Emergency Response Team (CERT) program to help people prepare for a disaster. The CERT program provides training in disaster preparedness, ICS, Disaster Medical Operations, Disaster Psychology, Fire Safety and Utility Controls, Light Search and Rescue, and Terrorism Response. Most CERT organizations are affiliated with a local police or fire department. You can take CERT training for your individual preparedness, or you can volunteer in your community through the local CERT organization. [Find a CERT program](#)³⁶ near to your location through the search function on the CERT website.

CERT volunteers may be called upon to assist affiliated agencies in many ways, and are sometimes covered under the insurance of that same agency when deployed. In some cases, such as in California, the affiliated agency may seek volunteers certified as a disaster service worker (DSW) volunteer. DSW volunteers may be covered under the California state workers' compensation program. Check with your affiliated agency to determine if you can be considered a DSWV with potential coverage.

Appendix B: Short Case Studies

1. Case Studies from the Hurricane Hanna response by non-governmental organizations (NGOs) such as the American Red Cross and other Voluntary Organizations Active in Disasters (VOADs):

American Red Cross: During the Hurricane Hanna response in Central and South Texas by the Ameri-

can Red Cross, Local Executive Director A.J. Renold stated that, "A lot of the [response] work is done virtually. So, in the past, it may be that 70 percent of our workforce was on the ground, boots on the ground traveling from all over the country to provide assistance. But right now that's flipped where 70 percent of our workforce is doing [response work] remotely." He also noted that a few of the local volunteers are doing their work online while the others have been deployed to the area to [provide assistance](#).³⁷

Salvation Army: The organization provided mission assistance to the Hurricane Hanna response via providing eight 3,500-meal push packs and two pallets of water, which were staged in San Antonio until it became safe to move to the affected area; six feeding units that were either deployed or kept on standby; and catering from Kerrville and Bryan to support response efforts in Corpus Christi and McAllen. The McAllen Salvation Army, at the request of Hidalgo County Emergency Management, opened its facility at 1600 N. 23rd Street as a pre-landfall shelter with a bed capacity of 30, where it also provided training for all staff to ensure all teams would adhere to safety protocols put into place due to COVID-19, such as wearing PPE and social distancing where applicable.³⁸

United Methodist Committee on Relief (UMCOR): This nonprofit awarded a solidarity grant to support the relief and response of the Rio Texas Conference of the United Methodist Church. The conference deployed emergency response teams and received cleaning kits for flood-affected households. Hurricane Hanna caused heavy damage in El Valle District and limited amounts of damage in the Coastal Bend District. The Rio Texas Disaster Response Ministry began monitoring the situation while Hanna was developing in the Gulf and began supplying

³⁶<https://community.fema.gov/PreparednessCommunity/s/cert-find-a-program>

³⁷<https://www.kbtx.com/2020/07/28/local-red-cross-volunteers-helping-with-hurricane-hanna-recovery/>

³⁸Texas Division of Emergency Management State Situation Report, Monday, July 27, 2020, <https://tdem.texas.gov/situation-reports/>



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UMCOR cleaning kits as soon as it was possible to safely enter the area. As of July 30, 2020, 975 UMCOR cleaning kits (flood buckets) and 100 tarps had been delivered from the Martinez Disaster Warehouse in Kerrville. Four thousand UMCOR hygiene kits were delivered from Kerrville later that week and six hundred additional cleaning kits were expected from UMCOR Sager Brown the following week. Generators and tools have also been delivered to the area. Most of the supplies have been staged at First UMC McAllen.³⁹

For more information on hurricane response during the COVID-19 pandemic, refer to the [FEMA COVID-19 Pandemic Operational Guide for 2020 Hurricane Season](#).⁴⁰ FEMA partners with other federal agencies such as the U.S. Army Corps of Engineers, the Defense Logistics Agency, and non-governmental organizations (NGOs) such as the American Red Cross.

2. Case Study emphasizing the importance of the 14-day quarantine period:

American Seafoods: The fish processing industry has a standard to quarantine all personnel for 14 days and administer COVID-19 testing to personnel prior going out to sea, where workers must sleep, eat, and work 16-hour shifts side by side on factory trawlers. Employers who follow these guidelines have not seen outbreaks on vessels. One company, American Seafoods, chose at first a five-day quarantine period followed by testing rather than following the 14-day industry standard. After 110 employees on three different ships fell ill within one month, American Seafoods decided to follow the industry standard.

Appendix C: References and Additional Resources

- American Meteorological Society: Statement on Hurricane Preparedness During the COVID-19 Pandemic, bit.ly/ams-hurricane-prep.
- CDC: Emergency Responders: Tips for Taking Care of Yourself, bit.ly/cdc-care-tips.
- CDC: FAQs for Wildland Firefighters, bit.ly/wild-land-faq.
- CDC: Hurricanes and COVID-19, bit.ly/hurricanes-and-covid-19.
- CNCS: Managing Spontaneous Volunteers in Times of Disaster (PDF), bit.ly/spontaneous-volunteers.
- FEMA: Evacuation and Sheltering Assistance Under an Emergency Declaration in a COVID-19 Environment, bit.ly/fema-shelter-assist.
- FEMA: Get Assistance After a Disaster, bit.ly/find-assistance.
- National Hurricane Center: www.hurricanes.gov.
- National Weather Service: www.weather.gov.
- NIEHS Worker Training Program: Emergency Support Activation Plan Awardee Instructor Deployment Guide (PDF), bit.ly/deploy-guide.
- NIST Technical Note 1882: Indoor Environmental Issues in Disaster Resilience (PDF), bit.ly/nist-note-1882.
- Ready.gov: Disaster Supplies Kit, www.ready.gov/kit.
- Ready.gov: Hurricanes, www.ready.gov/hurricanes.
- Red Cross: Preparing for Disaster During COVID-19, bit.ly/redcross-prep.
- University of North Carolina Medical Center: Volunteer Handbook (PDF), bit.ly/volunteer-uncmed-center

³⁹<https://riotexas.org/news/2020/7/30/hurricane-hanna-response-underway>

⁴⁰<https://www.fema.gov/media-collection/covid-19-pandemic-operational-guidance-2020-hurricane-season>



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AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA's nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit [AIHA.org](https://www.aiha.org).

NIEHS

Worker Training Program

WTP provides grants to nonprofit organizations, including labor-based health and safety organizations and academic institutions, so they can deliver training to a variety of workers who may face a hazardous work environment. Training is provided to workers across many occupational sectors, such as:

- Environmental cleanup workers
- First responders
- Health care employees
- Industrial or construction workers
- Law enforcement officers
- Transportation or rail workers

Some training is tailored to specific populations, such as underemployed or non-English-speaking workers.

WTP supports curricula development and training programs throughout the United States to help employers meet requirements under the Occupational Safety and Health Administration's Hazardous Waste Operations and Emergency Response (HAZWOPER) standard and the U.S. Environmental Protection Agency's standards for hazardous waste operations and emergency response.

Training is provided under six program areas:

- Hazardous Waste Worker Training Program
- Environmental Career Worker Training Program
- HAZMAT Disaster Preparedness Training Program
- SBIR E-Learning for HAZMAT Program
- NIEHS/DOE Nuclear Worker Training Program
- Ebola Biosafety and Infectious Disease Response Training Program

About Occupational and Environmental Health and Safety Professionals

Occupational and environmental health and safety (OEHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, controlling and confirming workplace conditions that may cause workers' injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OEHS professionals make sure workplaces are healthy and safe.

- Get additional resources at AIHA's [Coronavirus Outbreak Resource Center](https://www.aiha.org/coronavirus).
- Find a qualified industrial hygiene and OEHS professional near you in our [Consultants Listing](https://www.aiha.org/consultants).



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These guidance documents were primarily developed for those smaller business that don't have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders.

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