



Disaster Emergency Management Personnel System

STANDARD OPERATING PROCEDURE

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Standard Operating Procedure (SOP)

1. PURPOSE AND AUTHORITY

A. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish standardized procedures for conducting medical qualifications, deployment readiness assessments, and post-deployment health management for personnel involved in two emergency management programs: the **Disaster Emergency Management Personnel System (DEMPS)** and the **First Receivers Decontamination Program (FRDP)**. The SOP is designed to ensure that personnel are medically and physically fit to respond effectively to emergency situations and disaster scenarios, thereby supporting the Veterans Health Administration's (VHA) mission to provide high-quality healthcare during emergencies.

b. Authority

This SOP complies with the following directives and regulations to ensure a systematic and compliant approach to managing emergency response personnel:

The SOP aligns with federal and organizational standards, ensuring compliance with VHA regulations, and provides a framework for the consistent application of procedures related to the medical qualification of DEMPS and FRDP personnel.

2. PROCEDURES

A. Medical Examinations and Evaluations

The Disaster Emergency Management Personnel System (DEMPS) program mandates thorough medical examinations and evaluations to ensure personnel are medically fit and prepared for deployment to emergency situations. These evaluations

(1) Initial Medical Examination

The initial medical examination is a mandatory requirement for all DEMPS personnel and serves as the foundation for assessing an individual's fitness for deployment. The process involves multiple steps to evaluate various aspects of health and readiness:

Comprehensive Review of Medical History

- **In-Depth Health Assessment:**
- **Mental Health Considerations:**
- **Medication Review:**
- **Family and Social History:**

Immunization Status Check

- **Verification of Required Immunizations:**
- **Documentation of Immunization Records:**
- **Additional Immunizations for High-Risk Areas:**

Physical Examination

- **General Physical Fitness Assessment:**
- **Assessment for Physical Demands:**
- **Evaluation for Respiratory Protection:**

(2) Medical Qualification Categories

Personnel are assigned to one of the following categories based on the initial medical examination results:

- **Category 1: Fully Deployable Without Limitations**
Individuals in this category can be deployed to any emergency scenario without health-related restrictions. They have no medical
- **Category 2: Deployable with Stable, Manageable Chronic Conditions**
This category is for personnel who have stable chronic medical conditions with a low likelihood of

- **Category 3: Temporarily Non-Deployable Due to Active Medical Issues**

Personnel in this category have health conditions that temporarily prevent deployment, such as recent surgeries or hospitalizations.

- **Category 4: Permanently Disqualified Due to Significant Health Risks**

Individuals with permanent medical disqualifications remain in this category if their conditions would significantly hinder their ability to

OSHA Respiratory Protection Guidelines

The primary goal of OSHA's respiratory protection standard is to protect workers from respiratory hazards by ensuring that respirators are used properly and effectively. The guidelines cover scenarios where:

- **Airborne contaminants exceed established exposure limits,**
- **Respiratory protection is required**
- **Workers may be exposed to infectious agents**

Key Requirements for a Respiratory Protection Program

1. Development of a Written Respiratory Protection Program

The organization has written program detailing procedures for the selection, use, maintenance, and monitoring of respirators. The program should:

- **Be site-specific,**
- **Include standard operating procedures**
- **Be accessible to employees,**

2. Hazard Assessment

Before implementing respiratory protection, a thorough hazard assessment must be conducted to identify and evaluate:

- **Types of airborne contaminants**
- **Work tasks and conditions**
- **Potential exposure levels**

3. Selection of Appropriate Respirators

Respirators must be selected based on the nature of the hazard and the level of protection required. They must be:

- NIOSH-approved [REDACTED]
- Suitable for the specific **physical state of the contaminant** [REDACTED]
- Selected to ensure a **proper fit** for each individual user, taking into consideration [REDACTED]

Medical Evaluations for Respirator Use

OSHA requires a medical evaluation before a worker is allowed to use a respirator. This step ensures that the individual is physically capable of wearing the respirator without jeopardizing their health.

Medical Evaluation Process:

- **Health Questionnaire:** [REDACTED]
- **Pulmonary Function Testing (** [REDACTED]
- **Full Physical Examination:** [REDACTED]
- **Written Medical Determination:** [REDACTED]

The medical evaluation helps to determine if any underlying conditions could pose risks when using a respirator. For example, conditions like claustrophobia or severe anxiety may preclude the use of tight-fitting full-face respirators.

Fit Testing

To ensure a tight seal between the respirator and the user's face, fit testing is mandatory for all tight-fitting respirators. Fit testing ensures that the respirator provides adequate protection against airborne hazards.

Fit Testing Procedures:

- **Qualitative Fit Testing (QLFT):** [REDACTED]
- **Quantitative Fit Testing (QNFT):** [REDACTED]
- Fit tests must be conducted **annually**, whenever a different respirator is used, or if there are changes in [REDACTED]

Training

Workers must receive training on the use and limitations of respirators, which should cover:

- **How to properly wear and adjust the respirator.**
- **Emergency procedures** [REDACTED]

- **Maintenance and inspection routines** [REDACTED]

- **Limitations of the respirator:** [REDACTED]

Training should occur **before initial use** and be repeated at least **annually**, or whenever changes in workplace conditions warrant refresher training.

Inspection, Maintenance, and Care

Respirators must be regularly inspected and maintained to ensure proper functionality:

- **Inspect before each use:** [REDACTED] ion.
- **Replace worn or damaged parts:** [REDACTED]
- **Proper cleaning and storage:** [REDACTED]
- **Establish a maintenance schedule** [REDACTED]

Use of Respirators in Emergency Situations

In emergencies where airborne contaminants suddenly increase, or when engineering controls fail, respirators are used as the last line of defense. OSHA requires:

- **Emergency respirator kits:** [REDACTED]
- **Escape Respirators:** [REDACTED]
- **Training on emergency procedures:** [REDACTED]

Additional OSHA Considerations

- **Voluntary Use of Respirators:** If respirators are used voluntarily by employees when not required by OSHA standards [REDACTED].
- **Special Provisions for Specific Industries:** Certain settings, such as healthcare dealing with infectious diseases [REDACTED].

(2) Annual Medical Evaluation

Annual evaluations ensure that personnel remain fit for deployment and that any emerging health issues are identified and managed promptly.

Medical History Review

- **Updating Medical Records:** [REDACTED]
- **Review of Chronic Conditions:** [REDACTED]
- **Medication Adjustments:** [REDACTED]

Immunization and TB Screening Review

- **Verification of Immunization Compliance:** [REDACTED]

- **Tuberculosis (TB) Screening:** [REDACTED]

Physical Examination (if indicated)

- **Targeted Examination:** A [REDACTED]

- **Special Focus on Fitness for Duty:** [REDACTED]

Annual Medical Evaluation Process

1. **Notification and Scheduling:** [REDACTED]
2. **Health History Review:** [REDACTED]
3. **Conducting the Physical Examination (if needed):** [REDACTED]
4. **Updating PIMS Records:** [REDACTED]

(3) Just-in-Time Medical Evaluation

This evaluation occurs immediately before deployment to ensure personnel are ready for specific deployment conditions, especially if more than three months have passed since the last evaluation.

Just-in-Time Evaluation Process

1. **Review DASI Requirements:** [REDACTED]
2. **Assessment of Recent Health Changes:** [REDACTED]
3. **Approval or Restrictions:** [REDACTED]

Examples of Deployment-Specific Risks Addressed During Just-in-Time Evaluations

- **Exposure to Infectious Diseases:** [REDACTED]
- **Use of Respiratory Protection in Polluted Environments:** [REDACTED]
- **Climate Adaptation:** [REDACTED]

(4) Post-Event Medical Evaluation

Post-event evaluations are conducted after deployment to assess any health risks related to exposure or the environment encountered. This helps identify any latent conditions and ensures that personnel receive appropriate follow-up care.

Post-Event Evaluation Process

1. **Exposure Assessment:** [REDACTED]

2. **Medical Surveillance:** [REDACTED]

3. **Mental Health Evaluation:** [REDACTED]

4. **Clearance for Duty:** [REDACTED]

B. Ordering of Labs and Standardization Requirements

(1) Lab Ordering Protocols

Laboratory tests must follow clinical guidelines and standardized protocols to ensure they are necessary and relevant.

Guideline Adherence

- **Follow VHA Clinical Guidelines:** [REDACTED]

S. [REDACTED]

- **Avoidance of Redundant Testing:** [REDACTED]

Coordination with DEMPS Coordinator

- **Approval for Tests:** [REDACTED]

- **Relevance to Deployment-Specific Risks:** [REDACTED]

Documentation and Justification

- **Justify Each Test:** [REDACTED]

- **Maintain Accurate Records:** [REDACTED]

C. Immunization Review and TB Screening

(1) Immunization Requirements

[REDACTED]

Immunization Review Process

1. **Verification of Immunization Records:** [REDACTED]

2. **Identify Deficiencies and Administer Vaccines:** [REDACTED]

3. **Adapt Immunizations to Area-Specific Needs:** [REDACTED]

(2) TB Screening

Personnel undergo TB screening to detect and manage any risk of tuberculosis exposure.

TB Screening Process

1. **Initial Baseline Screening:** [REDACTED]
2. **Annual Screening for High-Risk Facilities:** [REDACTED]
3. **Pre-Deployment Screening Based on DAS:** [REDACTED]

D. Environmental and Physical Considerations**(1) Environmental Factors**

[REDACTED]

Environmental Assessment Process

1. **Heat and Cold Tolerance:** [REDACTED]
2. **Physical Exertion Capability:** [REDACTED]
3. **Respirator Use Clearance:** [REDACTED]

E. Medical Qualification Guidelines for Specific Conditions

The evaluation process includes special considerations for personnel with pre-existing medical conditions.

- **Cardiac Conditions:** [REDACTED]
- **Hypertension:** [REDACTED]
- **Diabetes:** [REDACTED]
- **Neurological Disorders (e.g., Epilepsy):** [REDACTED]
- **Mental Health Disorders:** [REDACTED]

Guidelines for Deployment Restrictions

Personnel requiring continuous medical support, refrigerated medication, or specialized equipment may be restricted based on the feasibility of maintaining health standards during deployment.

F. Medical Documentation and Database Updates**(1) PIMS Record Updates**

[REDACTED]

PIMS Update Process

1. **Record Evaluation Outcomes:** [REDACTED]
2. **Maintain Up-to-Date Qualification Status:** [REDACTED]
3. **Protect Personnel Privacy:** [REDACTED]

3. ASSIGNMENT OF RESPONSIBILITIES

a. Chief of Occupational and Environmental Health Section

[REDACTED]

b. DEMPS Coordinator

[REDACTED]

c. EOH Providers

- [REDACTED]

d. Nursing and Support Staff

[REDACTED]

4. DEFINITIONS

- **Decontamination:** The process of removing or neutralizing hazardous substances, such as chemicals, radioactive materials [REDACTED]
- **Prophylactic:** Referring to measures or treatments used to prevent disease or a condition from occurring. [REDACTED]
- **Surveillance:** Ongoing, systematic monitoring of health events or conditions, often to detect changes in trends, [REDACTED]
- **Claustrophobia:** An anxiety disorder characterized by an intense fear of being in confined or small spaces [REDACTED]
- **Latent:** Present but not visible, apparent, or active. [REDACTED]
- **Pulmonary:** Relating to the lungs. Pulmonary function tests, for instance, assess how well the lungs work by measuring how much air they can hold, [REDACTED]
- **Mitigate:** To reduce the severity, seriousness, or harmfulness of a situation. In the context of emergency [REDACTED]
- **Rehabilitation:** The process of restoring someone to health or normal life through training and therapy after illness, injury, [REDACTED]
- **Recertification:** The process of renewing a certification to confirm that a person, program, or process continues to meet [REDACTED]
- **Surveillance:** Systematic and ongoing collection, analysis, and interpretation of health-related data for the planning, [REDACTED]

5. REFERENCES

[REDACTED]

6. REVIEW

This SOP is subject to annual review or upon any significant changes in federal or organizational policies. Documentation of the review will be maintained within the DMS system.

7. RECERTIFICATION

Scheduled for recertification on or before the last working day of [REDACTED]

8. SIGNATORY AUTHORITY

[REDACTED]

DISTRIBUTION

[REDACTED]

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