



Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP)

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Presentation Outline

- ESAR-VHP Overview
- Key Strategies
- Current Status
- ESAR-VHP & MRC Integration



ESAR-VHP Mission

To establish a national network of State-based programs that effectively facilitate the use of health professional volunteers in local, State, and Federal emergency responses.



What is ESAR-VHP and how does it work?

- National system of State-based programs for managing health professional volunteers
- Recruitment
- Advance registration
- Licensure and credential verification
- Assignment of standardized credential levels
- Mobilization of volunteers

Why is ESAR-VHP important?

- Volunteers practice at highest professional capacity
- Volunteers understand legal protections and liabilities
- Service delivery site confidence in volunteer competence
- Volunteers fully integrated into emergency response
- Standard classification leads to effective use of volunteers
- National standards allow for easier transfer across State lines

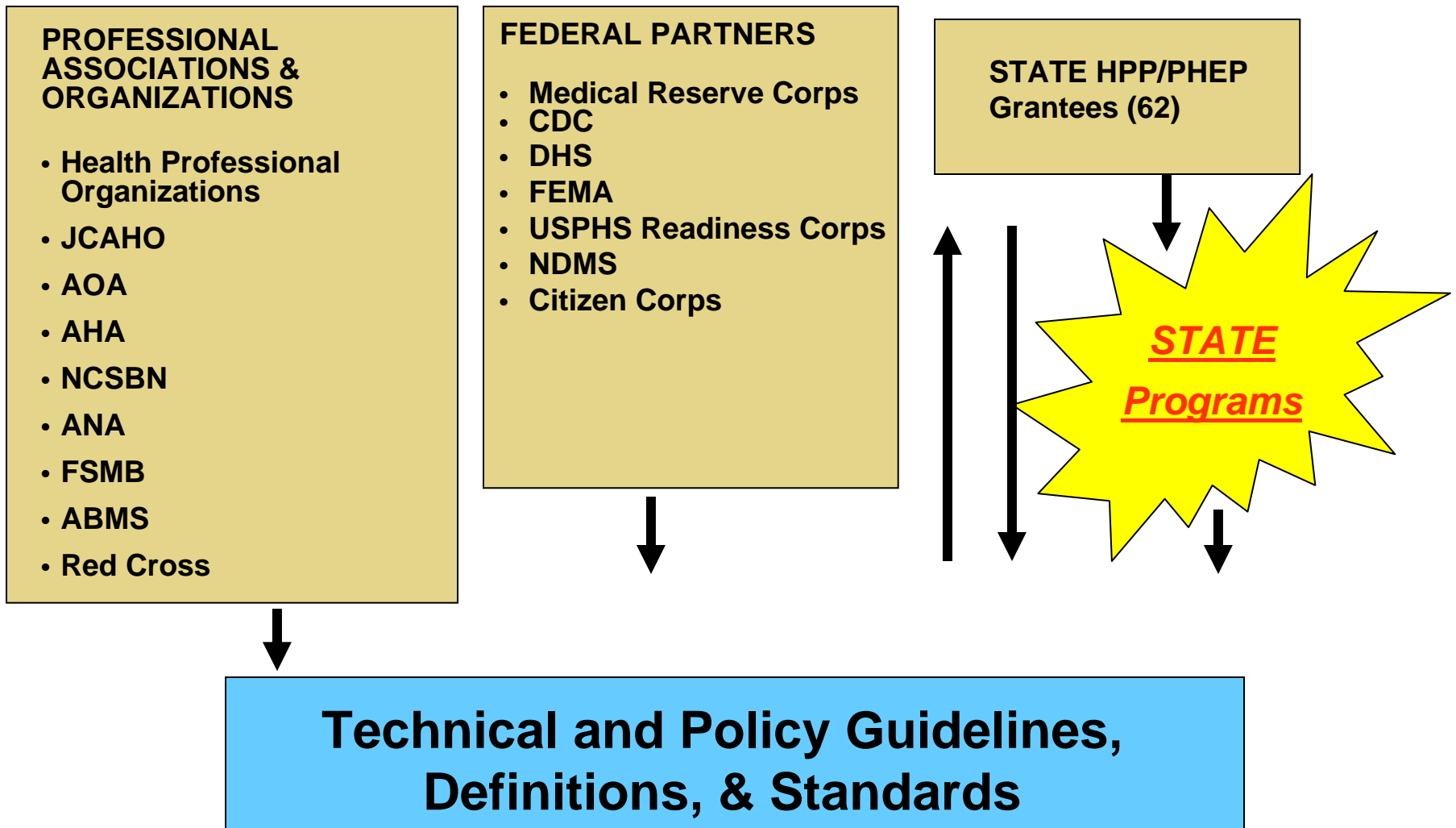
Building a National System

- ESAR-VHP will be a national system in the sense that the State ESAR-VHPs will be built to national standards and definitions and can be shared and utilized across State lines.
- States and jurisdictions will be encouraged to enter into agreements, creating local, State and regional surge capacity.
 - Models and best practices provided

Key Strategies

- Develop Federal ESAR-VHP Guidelines to ensure consistency across States for:
 - credential verification
 - data transfer/exchange
- Provide technical assistance throughout development
 - Educate States on legal and regulatory issues regarding use of volunteers
 - Targeted technical and operational assistance
 - Access to National Databases
 - Marketing and recruitment support
- Identify volunteers willing to be activated in a Federal emergency
- ESAR-VHP and MRC Integration

Essential Partners



ESAR-VHP Professions

- Physicians (Allopathic and Osteopathic)
- Physician Assistants
- Registered Nurses
- Advanced Practice Registered Nurses
- Licensed Practical Nurses and Licensed Vocational Nurses
- Psychologists
- Clinical Social Workers
- Dentists
- Marriage/Family Therapists
- Pharmacists
- Respiratory Therapists
- Mental Health Counselors
- Veterinarians
- Cardiovascular Technologists and Technicians
- Diagnostic Medical Sonographers
- Emergency Medical Technicians and Paramedics
- Medical and Clinical Laboratory Technicians
- Medical and Clinical Laboratory Technologists
- Medical Record and Health Information Technicians
- Radiologic Technologists and Technicians

Standardized ESAR-VHP Credential Levels

- Level 1: Verified active hospital practice
- Level 2: Verified active clinical practice (non-hospital)
- Level 3: Verified State licensure or certification (in good standing)
- Level 4: Verified education or experience (no verification of licensure or clinical practice)



Credential Verification Standards and Levels

Credential	Status	Level 1	Level 2	Level 3	Level 4
Unencumbered License or equivalent State authorization to practice	Verified	X	X	X	
Specialty Certification/Registration	Verified	X	X		
Active Clinical Practice (Patient Care)	Verified		X		
Active Clinical Privilege (Hospital)	Verified	X			
Record of adverse actions	Verified	X	X	X	
DEA registration	Verified	X	X	X	
Inspector General Status	Verified	X	X	X	X
Education or Experience	Verified				X

Current Status and Update

- In 2006, developed and exercised Federal Protocol
- 40 States and Territories have operational ESAR-VHP systems
- 80% of the top ten population States have operational ESAR-VHP systems
- As of April 2007, there are a total of 122,616 registered ESAR-VHP volunteers
- By the end of CY 2008, it is expected that all 50 states will have operational ESAR-VHP systems

Vision for Integration

Develop a unified and systematic approach for Local-State-Federal coordination of volunteer health professionals, in support of existing resources, to improve the health, safety and resiliency of local communities, States, and the Nation in public health and medical emergency responses

Benefits of Integration

- Strengthens local and state coordination
- Increase surge capacity
- Allows maximum use of volunteer health professionals' skills and expertise
- Minimizes duplication of effort
- Improves resource planning and allocation
- Increases the resiliency of local communities and States

- All States should have an ESAR-VHP State Coordinator and an MRC State Coordinator
- MRC and ESAR-VHP should be included in local and State response plans
- Coordinate activities and share responsibility for identifying and recruiting potential volunteers, as well as developing coordinated notification, activation, mobilization and demobilization procedures for local, intra-State and State-to-State deployments

Key Recommendations for Integration

- State ESAR-VHP responsible for registration and credentials verification
- MRC units should use the State ESAR-VHP for registering and verifying credentials of their members
- MRC unit responsible for training and preparing volunteers for activation at the local level, in coordination with their local and State response partners
- State requests for the activation and deployment of MRC volunteers require sign-off/approval of their local MRC unit leader



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