

Integrating volunteers into health authority disaster planning:
A review of the literature

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Introduction

The research question is, how can health authorities proactively prepare for and advance a strong relationship with spontaneous volunteers that present in times of crisis? Without planning and broader acceptance of non-traditional responders to a disaster, health authority Emergency Managers will continue to rely only on traditional disaster planning methodologies and internal personnel to respond to disasters that affect hospital functionality. This is short sighted because the number of staff that respond to the call for help may be less than anticipated creating safety issues (Adams & Berry, 2012).

Background

Traditionally health authorities, when building disaster plans, rely only on the staffing resources that are typically present at a point in time or attempt to quickly recall other employees that are off duty. Health authorities assume that adequate numbers of staff in the needed staffing model will present. Exactly what can be expected during a disaster and who will show to render aid can never be conclusively decided because of the unpredictable nature of a disaster. Employees have their own challenges in responding to a sudden call for assistance; be it child care responsibilities, elder care, or concerns for personal and family safety. This could mean that fewer employees than anticipated will report to work which affects the length and comprehensiveness of the response, potentially creating hazards to staff and patients (Adams & Berry, 2012).

Therefore, how can health authorities proactively prepare for and advance a strong relationship with spontaneous volunteers that present in times of crisis?

Methods

For this project, secondary data was utilized to construct a critical appraisal of research evidence. An initial resource search was conducted via the Justice Institute of British Columbia (JIBC) library system, followed by Google Scholar, PubMed, ASPR Tracie and specific websites related to the topic.

Results/Findings

The data suggests that spontaneous volunteers have utility in disaster response however there is scant evidence that specifically considers or evaluates spontaneous volunteers that present in healthcare.

Discussion

The evidence presented that explores the value of, and challenges with spontaneous volunteers could reasonably be extrapolated to a healthcare setting but it would be incumbent upon each health authority to evaluate their program through exercise and gap analysis to ascertain where spontaneous volunteers could best supplement their disaster plans.

Health authorities could utilize the recommendations as a basis for evaluating their own readiness for spontaneous volunteers. This preparedness step could increase the number of personnel that are available to the health authority in their response. This will provide longevity to the response as well as increase the capabilities of their own staff (Cole, 2013)

Conclusions or Recommendations

Health authorities must engage with the public to build outcomes in concert with the public and be prepared to realise opportunities and capitalize on these to engage new partners in novel ways. These adaptations and engagements will strengthen the relationship that health authorities have in their communities as well as enhance their reputation. This can be done by utilizing the following recommendations:

- 1. Revise plans to include spontaneous volunteers.** The initial step is to accept that non-employees and those outside first response agencies have something positive to contribute to the effort.
- 2. Know the truth.** Don't exclude spontaneous volunteers out of fear of unknown or over blown liability issues.
- 3. Plan with traditional partners and non-governmental agencies.** Undertake a capability based planning session with stakeholders to understand what they see their role in the disaster to be and how spontaneous volunteers can support those functions.

References

Cole, M. (2013). Managing the volunteer convergence phenomenon. Canadian Journal of Volunteer Resources Management, 21.3, 4-6. Retrieved from <https://volunteer.ca/Listings.php?ListType=CJVRM&MenuItemID=386>

Adams, L.M., & Berry, D. (2012). Who will show up? Estimating the ability and willingness of essential hospital personnel to report to work in response to a disaster. *Online Journal of Issues in Nursing*, 17(2). <https://doi.org/10.3912/OJIN.Vol17No02PPT0>