



Oregon Public Health VISTA partnership update

By Akiko Saito

Portland, Ore. – The Oregon Public Health VISTA

Partnership has welcomed another team of 10 VISTAs

serving around the state. These volunteers have come from all over the country to serve in Oregon and make our public health systems more effective at delivering services along with making the communities they serve in more resilient.

Six of these VISTAs are serving at local health departments: Benton County, Harney County, Lane County, Marion County, and Washington County. In addition, there are VISTAs at the Sunset Empire Parks & Recreation Department in Clatsop County, the Coquille Indian Tribe in Coos County, and the state EMS office. One VISTA leader joined the team and is serving at the state office to support the new members.

Focus areas for these VISTAs vary widely. Many are helping build healthier communities through worksite wellness and other health outreach programs. Other VISTAs will be assisting in accreditation efforts and emergency preparedness.

The new team of VISTAs has traveled from as far as Florida and Rhode Island to serve, as well as some native Oregonians. With another team of 21 joining in September, we have become the largest VISTA program in the state. We are excited to be hosting such a bright and enthusiastic group of volunteers, and to help create the next generation of public health leaders!

OREGON PUBLIC HEALTH DIVISION



Advances with alternative and complementary care practitioners in SERV-OR

By Eric Gebbie

Oregon's Public Health Division has greatly increased the number of alternative and complementary health care practitioners in its official State Emergency Registry of Volunteers in Oregon (SERV-OR).

Like all states, Oregon has been mandated and funded by the U.S. Department of Health and Human Services to manage a statewide Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), and, like most states, it has focused on key professions, such as nurses and physicians.

However, in 2011 the state program officers initiated a challenging program expansion through the integration of alternative and complementary care practitioners, including licensed acupuncturists, naturopathic physicians and chiropractors.

The expansion encountered challenges such as varied personal experience with, knowledge of, and biases about such fields of alternative and complementary practice.

Pursuing the integration of such professionals was based on three assumptions: (1) they are professionals who were licensed by the state to provide care; (2) there is demand for their services in non-emergencies, so there would be demand for their services in the wake of public health emergencies; (3) any such practitioners interested in volunteering for disaster response would bring skills, commitment and social capital to the volunteer program and the broader network of stakeholders involved.

Over two years, a process of outreach and engagement through meetings, focus groups and more, increased the number of practitioners from two acupuncturists and one naturopathic physician to 69 licensed acupuncturists, 44 naturopathic physicians and 40 chiropractors, among the highest proportion of participation per capita of licensees among all licensed health care professionals in Oregon.

Their activities in SERV-OR events is expected to increase. The first official SERV-OR deployment of an acupuncturist to provide care occurred as part of the Vigilant Guard exercise in May 2012. At that major National Guard-led three-day exercise, one SERV-OR volunteer was given a command tent in order to provide supportive care to local responders and members of the National Guard working through the evening. Chiropractors have been a strong contingent at [Project Connect of Central Oregon](#) for several years.

The next stage is to better define the operational structure and conditions for alternative and complementary care practitioners deployed for disaster response. Responding to concerns of volunteer acupuncturists who are not sure that their skills will be appropriate, SERV-OR staff have partnered with Acupuncturists Without Borders to develop formal definitions of acupuncture teams, their composition, resource needs and capabilities.



Building cross-border volunteer deployment

By Eric Gebbie

The state of Oregon is building new partnerships to deploy across state lines in the event of a major

disaster. The state of California's disaster health care volunteer program is our newest partner.

In March, Oregon's SERV-OR staff participated in a multi-state tabletop exercise hosted by California's Emergency Medical Services Authority in Sacramento. The exercise was designed to explore the participating states' capabilities to communicate about urgent volunteer needs and coordinate volunteer management efforts during interstate deployments.

The exercise was driven by a multi-hazard scenario that included a "pineapple express" storm pattern that led to flooding in northern California, heavy snowfall in the Eastern Sierra region, as well a major southern California earthquake. This extraordinary combination of hazards led to the need for mutual aid across state lines from Oregon, Nevada and Arizona.

"We were fortunate to be able to draw on years of legislative advances and hundreds of hours of volunteers' time given during full-scale exercises with Washington state," said Akiko Saito from the Oregon Public Health Division's Health Security, Preparedness and Response Program. State law has changed in recent years to allow official state health care volunteers to deploy across state lines during certain conditions, and still keep Oregon's worker protection and liability coverage for approved volunteers registered with SERV-OR. The laws and program implementations have been developed and tested during full-scale exercises that saw Washington volunteers deployed in North Bend, Oregon, and Oregon's SERV-OR volunteers deployed to Puyallup, Washington.

The new initiative with California will build on that work and develop possibly critical new partnerships. With our policies in place, we're confident about legal issues, but there is nothing like building personal relationships and exercising and improving the nitty-gritty details of how operations might unfold. We know that if major disasters strike neighboring states that many of Oregon's health care workers will be ready to volunteer their skills and energy. We have to do our part to support them with the most effective public resources, agencies and policies.

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