Title 19-DEPARTMENT OF HEALTH AND SENIOR SERVICES  
Division 20-Division of Community and Public Health  
Chapter 44-Emergency Response and Terrorism

19 CSR 20-44.010 Definitions and procedures for volunteer dispensing of Strategic National Stockpile medications during governor declared disasters

PURPOSE: The Division of Community and Public Health, Department of Health and Senior Services has the authority to establish rules for dispensing medications according to the Strategic National Stockpile Plan during a governor-declared state of emergency. This rule defines specific terms and procedures to follow in when dispensing medications according to the Strategic National Stockpile Plan during a governor-declared state of emergency.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material, which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in the rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Definitions.

(A) Department – The Missouri Department of Health and Senior Services or its designee.

(B) Dispense – To deliver a drug to an ultimate user by or pursuant to the lawful order of a practitioner including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for such delivery.

(C) Licensed health care provider – Any person authorized to dispense medication under Missouri law.

(D) Point of Dispensing (POD) – A pre-identified mass medication dispensing site(s) that allows community members to quickly and easily receive treatment according to the state Strategic National Stockpile plan.

(E) Volunteer – A person who, of his or her own free will, performs any assigned duties for the department with no monetary or material compensation.

(F) Supervision – General oversight and the authorization to direct in any given situation. This includes orientation, initial and ongoing direction, procedural guidance and periodic inspection and evaluations.

(2) Volunteer qualifications.

(A) A volunteer may include medical or non-medical personnel.

(B) A volunteer shall be authorized by the department prior to performance of the assigned task.

(C) A volunteer covered by the provisions of section 44.105, RSMo, shall:
   1. Fill out an application prior to volunteering which shall include at a minimum, full name and current address, volunteer experience, work experience, any current
professional licenses, registrations or certifications and any other information relevant for the duties to be assigned;
2. Sign an authorization for the department to conduct a background check that may include the department’s Employee Disqualification List and verification of professional licensure, if applicable;
3. Complete the same confidentiality training that a paid department employee is required to take;
4. Sign and abide by the same confidentiality statement that is required of a paid department employee;
5. Complete any health assessment form required by the department;
6. Submit to vaccinations, inoculation or other medication if recommended and warranted; and
10. Sign a waiver to hold the department harmless.
(D) Department staff may function as volunteers when:
1. Providing services with no monetary or material compensation;
2. Providing services outside their normal work hours; and
3. Their duties are not part of their employment job expectations.

(3) Volunteer training.
(A) Every person wishing to be a volunteer as defined by section 44.105, RSMo, must receive training, provided by the department or its designee, or demonstrate competencies that at a minimum address chain of command, POD structure and purpose, universal precautions relevant to dispensing of medications, medication identification and selection process, prescription labeling requirements, and patient education.
(B) For all individuals that volunteer, at the time of a governor-declared state of emergency, training specific and relevant to that event shall be provided by the department or its designee.

(4) Volunteer management.
(A) Utilization of Volunteers – In the event of a governor-declared state of emergency, volunteers may be used to support the department in mass medication dispensing sites including the set up, operation and break down of mass medication dispensing sites.
(B) The department shall keep accurate and current records of every volunteer who has been recruited, trained, and accepted by the department, including at a minimum, volunteer applications, and background checks.
(C) All volunteers must be equipped with proper personal protective equipment as appropriate for the situation and in accordance to Occupational Safety and Health Administration standards (29 CFR Part 1910) 2007, which are incorporated by reference as published by the Office of the Federal Register, National Archives and Records Administration and are available on the web at www.osha.gov or by contacting the Occupational Safety and Health Administration, 200 Constitution Avenue, N.W., Washington, D.C. 20210. This rule does not incorporate any subsequent amendments or additions.
(5) The department may refuse to accept or assign any individual as a volunteer.


PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars ($500) in the aggregate.

PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars ($500) in the aggregate.