



Lexington-Fayette County Health Department

Environmental Health
650 Newtown Pike
Lexington, KY 40508-1197
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(859) 231-9459 Fax

COUNTY AFFILIATION AGREEMENT

*BETWEEN THE LEXINGTON-FAYETTE COUNTY HEALTH DEPARTMENT
AND FAYETTE COUNTY EMERGENCY MANAGEMENT IN
REGARD TO THE LEXINGTON-FAYETTE MEDICAL RESERVE CORPS (MRC) UNIT*

THIS MEMORANDUM OF UNDERSTANDING, (hereinafter "agreement") made and entered into on the date of the last signature hereto, between the Lexington-Fayette County Health Department (hereinafter, LFCHD), and the Lexington Fayette Urban County Government on behalf of it's Division of Emergency Management (hereinafter, LFUCG) for their mutual benefit and the benefit of the public, hereby witness that:

WHEREAS, The LFUCG and the LFCHD agree that the Medical Reserve Corps (hereinafter, MRC) located in Lexington, Kentucky is managed and housed within the LFCHD.

WHEREAS, The Citizen Corps Program which includes the MRC and the Community Emergency Response Teams (CERT) plays an integral role in the regions preparedness efforts and response strategies. The MRC provides an organized means for medical, non-medical and public health volunteers to offer their skills and expertise during local/regional crisis and throughout the year. Locally based MRC volunteers can assist during large-scale emergencies, such as an influenza epidemic or an act of terrorism. MRC volunteers also work to strengthen the overall health and wellbeing of their communities. Some examples of possible utilization could include (but is not limited to):

- Response to Natural or Manmade Disaster/Acts of War
- Staffing Point Of Dispensing Sites /Distribution Node
- Strategic National Stockpile Activation
- Assisting Epidemiological Rapid Response Team
- Assisting with Environmental Health Emergencies
- Provide resources for staffing of shelters (regular and special needs)
- Assist first responder/community agencies in disaster response activities as trained (examples include: Search & Rescue, Damage Assessment, Evacuation, Triage & Treatment,
- Healthcare Surge Capacity)

WHEREAS, upon activation, MRC volunteers deployed will be considered volunteers as described above.

[Helping Lexington be well](#)

WHEREAS, the LFUCG agrees to:

- Provide coverage under and through the KY Division of Emergency Management Workers' Compensation (KyEM Form 50) KRS 39C.110 when activated for a disaster (natural or man-made), training (receiving or instructing), and exercises that support emergency preparedness, emergency response, emergency recovery, emergency mitigation and/or emergency assessment.
- Notify the LFCHD to notify the LFCHD MRC of the need for deployment / activation.

WHEREAS, The LFCHD agrees to:

- Recruit and train MRC volunteers with skills and qualifications commensurate with their assigned duties.
- Maintain a current list of volunteers with qualifications and skills through use of the KY Department of Public Health Kentucky Health Emergency Listing of Professionals for Surge (K HELPS) database.
- Provide members with appropriate continuing education/training as necessary to maintain skills for assigned duties.
- Credential MRC volunteers as outlined in the Kentucky MRC Unit leader Guide.
- Deploy MRC volunteers as a unit or individual members as requested by LFUCG or their state counter parts.
- Notify LFUCG when volunteers are utilized and work in conjunction with LFUCG for all volunteer activations.
- Provide LFUCG with copies of signed KYEM Form 50 by every approved volunteer. A roster of volunteers being utilized will be given to EM for a state number to be assigned prior to MRC deployment/activities being initiated.

MODIFICATIONS

This Memorandum of Understanding (MOU) may be modified, in writing at any time upon the mutual written consent of the signatories hereto.

DURATION, RENEWAL AND TERMINATION

1. This memorandum of understanding shall be valid for one (1) year beginning February 1, 2018.
2. Termination of this memorandum of understanding shall become effective immediately upon initial notification, which may be made verbally between the parties and substantiated in writing within thirty (30) calendar days following initial notification.

The parties to this memorandum of understanding establish this writing and agree to its terms as evidenced by their signatures hereto:

SIGNATURE:

Lexington Fayette Urban County Government:

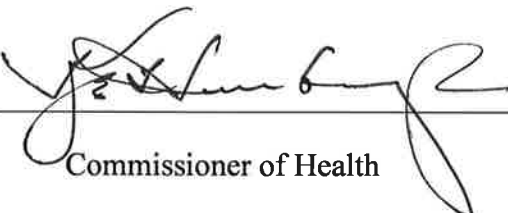
Division of Emergency Management, Director

Date

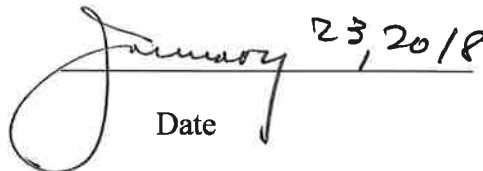
Lexington Mayor

Date

LEXINGTON-FAYETTE COUNTY HEALTH DEPARTMENT:




Commissioner of Health



Date



Chief Financial Officer



Date



Community Health Officer



Date