

**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF EMERGENCY MANAGEMENT  
AND  
HOMELAND SECURITY  
STANDARD OPERATING PROCEDURES**

Formerly DEMHS SOP: 5.4 Second Revision February 2022

**APPROVAL OF ACTIVITIES OF MEMBERS OF  
THE COMMUNITY EMERGENCY RESPONSE TEAMS (CERT)**

**Background:**

On July 20, 2006, the Office of the Attorney General for the State of Connecticut issued a legal opinion that confirms that volunteer members of the Community Emergency Response Teams (CERT) are covered under the State of Connecticut Workers' Compensation Program, when certain statutory conditions are met.

Under Title 28 of the Connecticut General Statutes, specifically §28-14, CERT members who are working under the direction of a designated local official and: (1) have been recruited by the Local Citizens Corps; (2) have satisfied the requirements of Conn. Gen. Stat. §28-12 (the loyalty oath provisions), and; (3) are not employees of the state, municipalities or political subdivisions of the state, are construed to be state employees, and are afforded the protection provided for under Connecticut General Statutes Chapter 568 [workers compensation law] and §5-142 [disability compensation and death benefits provision], while participating in approved training for or engaged in authorized civil preparedness duty. Under §28-1(5), "any member of the civil preparedness forces who is called upon either by civil preparedness personnel or state or municipal police personnel to assist in any emergency shall be deemed to be engaging in civil preparedness duty while assisting in such emergency or while engaged in training under the auspices of the Department of Emergency Services and Public Protections, the Divisions of Emergency Management and Homeland Security and the State Police within the Department of Emergency Services and Public Protection, or a municipal police department, for the purposes of eligibility for death, disability, and injury benefits as provided in Section 28-14." Thus, under §28-1(5), there are a number of different ways in which emergency activation or training activities may be authorized.

The following are guidelines established for the local emergency management community to follow when requesting DESPP/DEMHS approval of any emergency activation or training activity in order to ensure that the CERT volunteer members' training and/or participation in an event or disaster are covered under the opinion issued by the Office of the Attorney General. For further information on DEMHS/DEMHS approval of CERT activations, please see **DEMHS Advisory Bulletin 2009-1**.

# **Procedures for Local Emergency Management Director to Follow to Obtain DESPP/DEMHS Approval:**

## **1. Local Procedures in an Emergency Activation**

Whenever the local Emergency Management Director (EMD) deems it necessary to activate the members of the CERT through DESPP/DEMHS in the case of an imminent or actual emergency, he/she will:

- Request DESPP/DEMHS approval through the Regional Coordinator by phone or by email. Make sure that a response is received from the Regional Coordinator so that you know the request has been received;
- Follow up with a written request as soon as possible, but not more than **48** hours after the initial request is made.

**REMEMBER**, under Title 28, a CERT team may also be activated by local civil preparedness personnel or state or municipal police personnel to assist in any emergency.

The written request shall contain:

- Date and anticipated times of the activation;
- Names of the CERT members involved;
- Reason for the activation or training request, including details of the activities to be taken or that have been taken;
- **Written name and signature of local EMD requesting activation.**

NOTE: After an activation, the local EMD must provide a roster of actual attendees with their participation start and end times.

By submitting the names of the Team members, the local EMD is certifying that these members have received appropriate training under the Local Citizens Corps organization, including any additional training necessary for the activation (e.g., ESF 11 Animal Response) and have been sworn in annually under Conn. Gen. Stat. §28-12, or are in training to be sworn in under that section.

CERT members who self-dispatch to an emergency scene without the approval of the local EMD will not receive Title 28 protection through DESPP/DEMHS.

The local EMD shall maintain a log (See attached sample) of all emergency activation requests submitted to DEMHS. The local EMD shall also maintain a roster of current CERT members, including their names, contact information, and training received. Annually, by August 15, the local EMD will provide an updated copy of this roster to the DEMHS Regional Coordinator for his/her DEMHS region. Under §28-12, all CERT members must be sworn in annually.

## **2. Local Procedures in a Training or Pre-planned Large Scale Event Activation**

Whenever the local Emergency Management Director (EMD) deems it necessary to activate the members of the CERT through DESPP/DEMHS in the case of training or a large scale scheduled event, he/she will:

- Submit the request in writing to their respective Regional Coordinator **at least two weeks before the date of the proposed training or event.** Training or event activities submitted after the date may not be approved by DEMHS;
- If the request is submitted by fax, the EMD must provide the original documentation to the Regional Coordinator as soon as possible.

**REMEMBER**, in accordance with Title 28, some training may take place under the auspices of the Connecticut Department of Emergency Protection and Public Protection, the DESPP Division of State Police, or a municipal police department, rather than under the auspices of DESPP/DEMHS. Also, activities may not rise to the level of a DESPP/DEMHS activation (e.g., handing out brochures at a local fair or traveling to the annual state Citizen Corps or CERT conference. See DEMHS Advisory Bulletin No. 2009-1 for more details.)

The written request for DESPP/DEMHS approval shall contain:

- Date and anticipated times of the activation;
- Names of all CERT members anticipated to be involved;
- Reason for the activation or training request, including details of the activities to be taken;
- **Written name and signature of local EMD requesting activation.**

NOTE: After an activation, the local EMD must provide a roster of actual attendees with their participation start and end times.

If the EMD wishes to submit one form for multiple activities, specific information must be provided for each training activity.

By submitting the names of the Team members, the local EMD is certifying that these members have received appropriate training under the Local Citizens Corps organization, including any additional training necessary for the activation (e.g., ESF 11 Animal Response) and have been sworn in annually under Conn. Gen. Stat. §28-12, or are in training to be sworn in under that section.

The local EMD shall maintain a log (see attached sample) of all training or pre-planned event requests submitted to DEMHS, for review by either the Office of Attorney General and or by DESPP/DEMHS.

The local EMD will maintain a roster of current CERT members, including their names, contact information, and training received. Annually, by August 15<sup>th</sup>, the local EMD will provide an updated copy of this roster to the DEMHS CERT Teams Coordinator. Under §28-12, all CERT members must be sworn in annually.

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**Procedures for DESPP/DEMHS Staff To Follow in CERT Approval Process**

**1. DESPP/DEMHS Procedures in an Emergency Activation**

In an emergency situation, the DESPP/DEMHS Regional Coordinator shall:

- Review the request of the local EMD;

- Forward the request with a recommendation of approval or denial, based upon the information submitted by the local EMD, to the State Emergency Management Director. If the recommendation is to deny the request, the Regional Coordinator will provide a brief explanation.

Approval of routine emergency CERT activations has been delegated by the DEMHS Deputy Commissioner and the State Emergency Management Director to the DESPP/DEMHS Regional Coordinators. If a Regional Coordinator approves an emergency request of a local EMD, the Regional Coordinator shall forward the request, with the Regional Coordinator's approval, to the State Emergency Management Director.

It is also the responsibility of the DESPP/DEMHS Regional Office to:

- Notify the local EMD of the State Emergency Management Director's approval or denial of the activation request (see below);
- Obtain the original written request within 48 hours of approval;
- Supply the requesting EMD with a copy of the completed documentation;
- Maintain a log (see attached sample) of all requests submitted to that office.

The State Emergency Management Director shall:

- Approve or deny the request;
- Provide notification of the activation/denial to the appropriate DEMHS staff.

In the absence of the State Emergency Management Director, the request for approval may go to the Office of the DESPP/DEMHS Deputy Commissioner.

Within 48 hours, written paperwork to support the activation must be submitted by the local requester, through the DESPP/DEMHS Regional Office, to the State Emergency Management Director. His/her office shall forward fully executed copies to the DEMHS CERT Teams Coordinator within the DEMHS Training Unit, who will send a copy to the Regional Office, maintain the originals, and maintain a log of all emergency requests submitted to DESPP/DEMHS.

## **2. DESPP/DEMHS Procedures in a Training or Pre-planned Large Scale Event Authorization**

When the Regional Coordinator receives a request for DESPP/DEMHS CERT training or pre-planned large scale event authorization, s/he must:

- Review the request of the local EMD;
- Forward the request with a recommendation of approval or denial to the DEMHS CERT Teams Coordinator. If the recommendation is to deny the request, the Regional Coordinator will provide a brief explanation;<sup>1</sup>
- Supply the requesting EMD with a copy of the completed documentation;
- Make sure that original documentation is provided to the DEMHS CERT Coordinator for any request that has been faxed in for review;

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<sup>1</sup> In the absence of the DEMHS CERT Teams Coordinator, the DEMHS State Emergency Management Director may receive the request directly. The DEMHS State Emergency Management Director will approve or deny, with originals provided to the DEMHS CERT Teams Coordinator.

- Maintain a log (see attached sample) of all training and scheduled event requests submitted to that office.

The DEMHS CERT Teams Coordinator shall:

- Review the request;
- Recommend approval or denial. If the recommendation is to deny the request, the DEMHS CERT Teams Coordinator will provide a brief explanation;
- Forward the request to the State Emergency Management Director.

The State Emergency Management Director-- or in his/her absence, the DEMHS Deputy Commissioner--shall approve or deny the request and return the paperwork to the DEMHS CERT Teams Coordinator, who shall:

- Notify the Regional Coordinator (who shall notify the requesting jurisdiction);
- Send a fully executed copy of the documentation to the Regional Coordinator;
- Maintain the original paperwork in a log of all CERT training/pre-planned large scale events.

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**Filing a Claim for Workers’ Compensation:**

In the event that a CERT volunteer member is injured in either a pre-approved training or real emergency event, the following procedures will be followed to file a claim with the State of Connecticut Workers’ Compensation Commission:

The local EMD will immediately make sure that the CERT member is treated for any medical issue and take all reasonable efforts to prevent further injury to the CERT member or other members.

Once the immediate medical situation is stabilized, the local EMD will notify the DESPP/DEMHS Regional Coordinator of the details of the accident/ injury to the member(s) of the CERT. In addition, the local EMD will contact the third party administrator for the State of Connecticut using the following injury reporting hot line: **1-800-828-2717**.

The DESPP/DEMHS Regional Coordinator will immediately notify the DEMHS State Emergency Management Director, the Operations Manager, and the CERT Teams Coordinator of the accident/ injury. The DEMHS CERT Teams Coordinator will then notify the Office of the DEMHS Deputy Commissioner of the injury.

The DEMHS CERT Teams Coordinator will be the initial primary point of contact between the State of Connecticut and the local EMD in assuring that the proper paperwork relating to the accident/injury is completed by the CERT member, as well as by the supervisor of the local CERT.

\_\_\_\_\_  
State Emergency Management Director

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Brenda M. Bergeron  
Deputy Commissioner  
Division of Emergency Management and Homeland Security  
Department of Emergency Services and Public Protection

\_\_\_\_\_  
DATE

**Connecticut Department of Emergency Services and Public Protection  
Division of Emergency Management and Homeland Security**

**Approval of Activation of Community Emergency Response Teams (CERT) Under Title 28**

**Activation for: Emergency / Training / Pre-planned Event (Circle one)**

Requested By: \_\_\_\_\_ (Be sure to include first and last name, title, and town requesting)

Date of Emergency/Training/Event: \_\_\_\_\_

Starting Time of Emergency/Training/Event: \_\_\_\_\_ Ending Time of Emergency/Training/Event: \_\_\_\_\_

Location of Emergency/ Training/Event: (street address, town, state, zip code)

\_\_\_\_\_

Reason for the Emergency/Training/Event:

\_\_\_\_\_

\_\_\_\_\_

Specific details of the proposed activities to be taken (If activation is as a Radiation Professional Volunteer (RPV), DPH must sign below as well):

\_\_\_\_\_

\_\_\_\_\_

The individual(s) activated here have been trained to perform the functions of an RPV:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of EMD: \_\_\_\_\_ Date: \_\_\_\_\_ Corrine Rueb, Health Program Assistant II CT Department of Public Health

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_: RECOMMEND: YES NO (Circle One) If training or event.  
Signature of DESPP/DEMHS CERT Team Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_ If no, please explain: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_: RECOMMEND: YES NO (Circle One) Regional Coordinator may  
Signature of Regional Coordinator \_\_\_\_\_ Date: \_\_\_\_\_ approve emergency activation if authority has been delegated.  
If no, please explain: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_: \_\_\_\_\_  
Signature of State Emergency Management Director: \_\_\_\_\_ Date: \_\_\_\_\_

**Approve**                       **Disapprove**

**Connecticut Department of Emergency Services and Public Protection  
Division of Emergency Management and Homeland Security**

Team members that are participating in activation/training include:

Name Last	Name First	Street Address	City	State	Phone number

**SIGNATURES**

\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ : \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ :  
 Local Emergency Management Director:                      Date                      DESPP/DEMHS Deputy Commissioner/ State EMD: Date

By signing the names of the Team members, the local EMD is certifying that these members have received appropriate training under the Local Citizens Corps organization, including any additional training necessary for the activation (e.g., ESF 11 Animal Response) (for RPVP, CT DPH also certifies training), and have been sworn in under Conn. General Statute 28-12 or are in training to be sworn in under that section. If the request is an imminent emergency, the local EMD will orally request the approval of the Regional Coordinator and then follow up with a written request as soon as possible but not more than 24 hours after the initial request is made. The local EMD will maintain a log of all requests submitted to DEMHS for review. After activation, local EMD will submit roster of actual participants with participation start and end times.

**Connecticut Department of Emergency Services and Public Protection  
Division of Emergency Management and Homeland Security**

Log-CERT:

Town Requesting Approval for CERT Activation/Training: \_\_\_\_\_

<b>Town</b>	<b>Activation</b>	<b>Training</b>	<b>Date</b>	<b>Time Submitted</b>	<b>Requested by</b>	<b>Approved</b>	<b>Disapproved</b>	<b>Comments</b>