

# THE PREPAREDNESS POST

UTAH DEPARTMENT OF HEALTH

## Volunteers Bring Value to Disaster Response

*By Stacy Sayre, Region 8 MRC Coordinator*



**MRC volunteers and DCHHS staff at work in the Ebola call center**

The Medical Reserve Corps (MRC) program was born in the aftermath of the terrorist attacks that occurred on September 11, 2001. An emergency room physician, Dr. Richard Hatchett, gathered with other community hospital medical staff at Ground Zero in New York. Their goal was to care for survivors.

Unfortunately, there weren't many, so they changed their focus to taking care of the many first responders who were working tirelessly in extremely hazardous conditions. Those attacks were followed by the anthrax mailings that forced a very large population of U.S. postal workers to receive prophylaxis to protect them from the disease. These incidents inspired the official adoption of the MRC model sponsored by the U.S. Department of Health and Human Services (HHS).

Since 2002, the MRC has grown to nearly 1,000 programs with more than 200,000 volunteers. Although terrorism was the catalyst for the program, MRC programs have become great assets in natural disaster response. Hurricanes Katrina and Rita highlighted the relationship between public health preparedness and resiliency. As a result, the MRC

national office began promoting Disaster Risk Reduction (DRR) which aims to reduce the impact the hazard has on society and the environment.


Communities that are healthy before a disaster fare much better during and after any disaster. MRC units started promoting public health campaigns such as vaccinations, suicide prevention, health screenings, and disaster preparedness to build resiliency within their communities and programs. These types of activities also allowed for MRC members to become more familiar with their colleagues and the vulnerable populations who tend to be impacted more by disasters. Programs have also sprung up in high schools where students are learning about preparedness and health promotion; one student even used the first aid he learned to save a life at a restaurant where he worked.

The first MRC in Utah was registered in 2003. Utah now has 14 MRC programs with more than 2,000 volunteers. In the last year, the MRC programs in Utah have contributed more than 4,706 hours at a value of \$123,328.38. MRC volunteers throughout Utah have supported community events such as marathons, disaster exercises, and mass vaccinations.

Since its inception, the MRC has been tested many times. Unfortunately the threat of disaster and terrorism has been seen in incidents such as the Boston Marathon bombing. On that day, more than 150 MRC members from around the Boston area staffed first aid stations along with hundreds of other volunteers. MRC members, thanks to their training, were able to quickly respond and pull together to provide emergency care for the survivors until they could be transferred to area hospitals.

MRC members also played key roles during infectious disease outbreaks such as flu, measles, HIV, and even Ebola in the Dallas/Fort Worth area of Texas. The Dallas County MRC, led by Jess Wade, was quickly activated once the Dallas County Health and Human Services Department (DCHHS) became overwhelmed. Volunteers helped develop custom and culturally sensitive information materials, staffed a call center for 22 days answering more than 600 calls, and on four

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## Volunteers Bring Value to Disaster Response (continued)

different days, performed neighborhood canvassing to interact with concerned residents and distribute information about Ebola. Ninety-five volunteers served a total of 641 hours. The estimated total economic volunteer impact amounted to \$13,392.00.

In the neighboring county, the Collin County MRC led by Rebecca Drekman donated 847 volunteer hours to the community response, running a call center to track 40 Collin County contacts who traveled on an airplane with nurse Amber Vinson who contracted Ebola. The majority of these contacts were children on a field trip and there was only one contact listed for all 40 children. It took 32 volunteers more than three days to find the parents' contact information.

Once that task was completed, the Collin County MRC shifted its focus from contact tracing to monitoring the contacts of Thomas Duncan and the first infected nurse, Nina Pham. Centers for Disease Control and Prevention (CDC) guidance recommended home visits, but given the high-risk nature of these cases, more than 25 MRC volunteers used smartphones to conduct active monitoring for 17 days using telemedicine. The economic value of the MRC contribution was greater than \$20,000.00.

The Ebola response brought several critical issues to light, including the importance of conducting training when the threat first emerges rather than waiting until it is already present. The need for self-care and Psychological First Aid (PFA) was also evident as the response lasted more than a month and required nearly round-the-clock work for health department and emergency management staff. PFA was needed in the general community due to the fear associated with the disease; people weren't allowed to go to work and children were shunned in school. The atmosphere in Dallas was extremely tense and the community and economy suffered.

An important part of community wellness is connectedness, and the connections that the MRC builds strengthens not only the community's wellness (volunteers also live longer) but their ability to respond to and recover from a disaster. Although we all would prefer to think a disaster won't happen in our neighborhood, thank goodness there are people who are willing to give their time and expertise when it does.

For information about the MRC in Utah, please visit <http://www.utahmrc.org/>.

For information about the National Medical Reserve Corps program, please visit <http://www.medicalreservecorps.gov>.



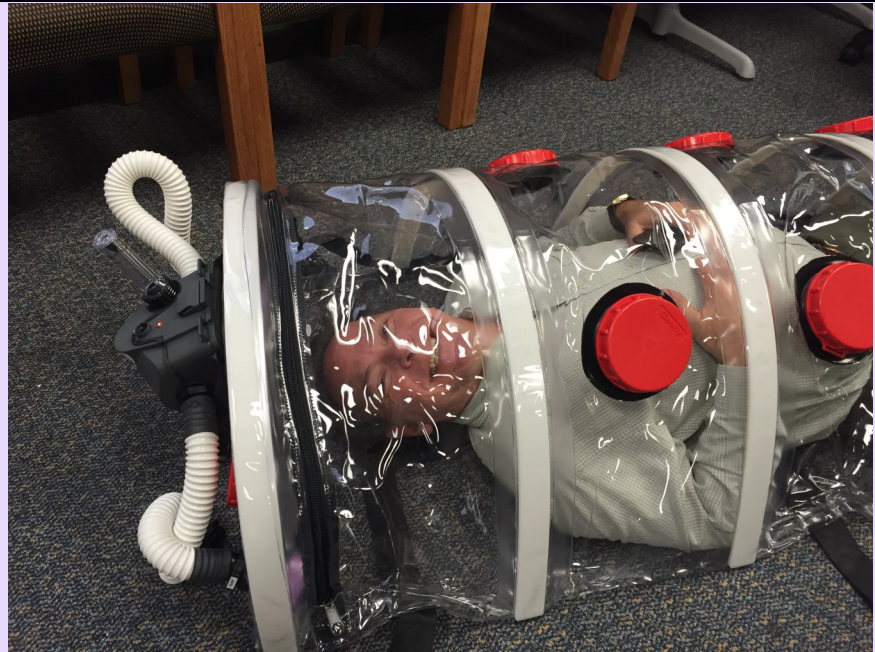
**Division of Emergency Management Training Calendar**

<http://dem.utah.gov/training-and-exercise/training/>



## Transporting Ebola Patients Safely

As Utah public health officials continue to investigate safe ways of dealing with potential Ebola patients, the Salt Lake County Health Department did some research and purchased some portable isolation pods. These pods would allow EMS personnel to safely transport biological, chemical, or radiation event victims to the hospital without worrying about possible exposure to health care workers.



Dr. Peter Taillac, state EMS Medical Director for the Bureau of Emergency Medical Services and Preparedness, is seen in these pictures demonstrating how a portable isolation pod is used. The pod is equipped with a filtered ventilation system that allows a patient to breathe freely while the virus or bacterial particles are filtered from entering the external atmosphere.



This would allow a first responder to dress in a more comfortable personal protective equipment (PPE) level. This is important because the higher levels of PPE required in full exposure situations is very cumbersome and quickly fatigues the staff during extended periods of long travel times. The use of this pod would alleviate the fatigue and make long trips much more tolerable for responders.



## Pharmacy Dispensing in a Pandemic

Rapid and efficient antiviral dispensing and vaccine administration will be key components of mitigating exposure and spread of an illness during a pandemic. Since that's what pharmacies do on a daily basis, it seemed important to test how the process might work during a time of crisis. On Sunday, August 30, 2015, a full-scale pandemic influenza vaccination exercise was held at the Maceys grocery store in West Jordan. This exercise was one of only two conducted nationally to collect data to help form the development of the Centers for Disease Control and Prevention (CDC) guidance on pandemic influenza



vaccination by community pharmacies. The exercise was sponsored by the CDC, developed by the National Association of County and City Health Officials (NACCHO), and locally coordinated by the Salt Lake County Health Department (SLCoHD) and Associated Food Stores (AFS). Since partnerships with community pharmacies in medication/vaccine dispensing for biological emergencies are still in the early stages, AFS developed policies, procedures, and protocols to guide their pharmacy operations, patient triage, and workflow during a pandemic. Those plans were tested during the exercise.



The exercise was designed to determine how many patients could be safely served in an hour. Elements included infection control and customer service. Thirty-five community volunteers served as "patients" seeking services in three categories: pandemic vaccine only, filling/refilling routine prescriptions, or a combination of both. Numerous scenarios were acted out by the volunteers providing a wide range of potential problems that pharmacy staff would be confronted with in a real event. Exercise staff consisting of controllers, evaluators, and timekeepers, were joined by

SLCoHD Emergency Preparedness Bureau staff, representatives from the Utah Department of Health, emergency managers from six other Utah local health departments, hospital emergency managers, and other community pharmacists.

Conclusions and recommendations are not yet available, but the ASF internal assessment identified some changes that would enable the plans to expand or contract based on the need of each of its pharmacies.

## Calendar

## 2016 Training

Date	Event	Location	Information
Jan. 13-14	UEMA Conference Utah Emergency Management Association	Viridian Center 8030 So 1825 West West Jordan, UT	<b>\$89 membership</b> Hugh Daniels, UEMA Pres. 435-615-5185 hdaniels@parkcity.org <a href="http://uemaonline.com/conference">http://uemaonline.com/conference</a>
Jan. 20  11:00 a.m. to 1 p.m.	Lunch & Learn: Social media for the Techno Challenged	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1060580
Feb. 1-5  8 a.m. to 5 p.m.	Framework for Healthcare Emergency Management	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1059930
Feb. 3-4	MGT-341 TEEEX Disaster Preparedness for Hospitals & Healthcare Organizations within the Community Infrastructure	Utah County Health Department 151 S. University Suite 2500 Provo, UT	<b>FREE</b> Jan Rogers jrogers@utahcounty.gov UTRAIN: #1060872
Feb. 11  8 a.m. to 5 p.m.	Basic Medical Moulage	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1055917
Feb. 18  8 a.m. to 5 p.m.	Technical Medical Moulage	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1060758



## Calendar

## 2016 Training

Date	Event	Location	Information
Feb. 27	Uintah Basin Medical Care Conference Uintah Basin Healthcare Coalition	Uintah Conference Center Vernal, UT	<b>FREE</b> Julianne Ehlers jehlers@utah.gov <a href="http://emergencyconference2016.evenbrite.com">emergencyconference2016.evenbrite.com</a>
March 11	Southeast Utah Burn Conference		<b>FREE</b> Robbie Donaldson - rdonaldson@utah.gov
March 23 11 a.m. to 1 p.m.	Lunch & Learn: CANINE FIRST AID	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1060766
April 4-5 8 a.m. to 5 p.m.	Medical Prep & Response to Bombings Incidents	Intermountain Center for Disaster Preparedness (ICDP) 3rd Floor North 8th Avenue C street Salt Lake City, UT	<b>FREE</b> Barb Clark Phone:(801) 408-7061 barb.clark@imail.org UTRAIN: #1060763
April 11—13	UPHA Pre-Conference & Conference Utah Public Health Association	Sheraton Hotel 150 West 500 South Salt Lake City, UT	<b>TBD</b> Dean Penovich Phone: 801-273-6656 dpenovich@utah.gov <a href="http://www.upta.org/conference">www.upta.org/conference</a>
May 20-21	Public Safety Governor's Summit Division of Emergency Management & Public Safety	St. George, UT	Judy Watanabe judywatanabe@utah.gov Patrice Thomas pthomas@utah.gov Link to Register: <a href="http://publicsafety.utah.gov">publicsafety.utah.gov</a>

Newsletter produced by Charla Haley



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