

# MRC Region II Round-Up: January 2009



*\*For reference/historical purposes, a copy of this newsletter, and subsequent newsletters, will be archived on the MRC website (Newsletters/RII).*

*\*\*Is there someone else you feel should be receiving this newsletter? Please send any/all names & titles to [Kristen.lepore@hhs.gov](mailto:Kristen.lepore@hhs.gov). These individuals will be added to an "Allied Leaders" list and will receive monthly newsletter posts.*

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2. New York City MRC (NY) Nurses Participate in Special Medical Needs Shelter Exercise
3. Ocean County MRC (NJ) Wraps Up Flu Clinics
4. Dutchess County MRC (NY) Volunteers Assist with Shelter Operations During December Ice Storm
5. Rensselaer County MRC (NY) Activated to Staff Special/Medical Needs Shelter
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## I. Unit Buzz

Recently activated? Send word to [Kristen.lepore@hhs.gov](mailto:Kristen.lepore@hhs.gov). Weekly MRC reports are developed by the federal program office highlighting your actions. Ensure your work is accounted for.

1. *Monroe County MRC (NY) Co-sponsors Blood Drive*: Monroe County MRC co-sponsored a blood drive with the Monroe County Department of Health on December 4, 2008.

2. *New York City MRC (NY) Nurses Participate in Special Medical Needs Shelter Exercise*: Ten New York City MRC nurses participated in NYC's Special Needs Shelter Exercise on December 4, 2008.

3. *Ocean County MRC (NJ) Wraps-Up Flu Clinics*: Ocean County MRC Volunteers assisted the Ocean County Health Department in staffing the last of seven flu clinics on December 7, 2008. The flu clinics were held across the county during November and December.

4. *Dutchess County MRC (NY) Volunteers Assist with Shelter Operations During December Ice Storm*: MRC volunteers assisted the Red Cross at two shelters from Friday evening December 12<sup>th</sup>, until Monday December 15<sup>th</sup>. The shelters were established because of an ice storm on December 12, 2008.

5. *Rensselaer County MRC (NY) Activated to Staff Special/Medical Needs Shelter*: The RCDOH MRC was activated to staff a special/medical needs Red Cross shelter beginning Friday December 12<sup>th</sup> through Monday, December 15<sup>th</sup>. In total 21 MRC nurse volunteers staffed the shelter 24hrs/day. Many of these individuals provided support despite being without power themselves.

6. *The City of Newark MRC (NJ) Holds HIV/AIDS Training*: The City of Newark MRC held a HIV/AIDS training on December 17<sup>th</sup> to promote a greater understanding of the epidemiology of HIV in Newark, and to discuss implications for PODs.

### News Clips:

- Schenectady County Executive Calls for More MRC Volunteers in the Wake of December Storms: [http://www.dailygazette.com/news/2009/jan/04/0104\\_stormlessons/](http://www.dailygazette.com/news/2009/jan/04/0104_stormlessons/)

## II. Spotlight: Scholarships to the 2009 Integrated Training Summit Available. Apply Now.

In an effort to promote MRC unit leadership, training, and organizational development, OCVMRC, through its cooperative agreement with NACCHO, is offering scholarships to cover the travel and lodging costs for one attendee from every eligible MRC unit. Eligible MRC units are those that 1) are officially registered with the Office of the Surgeon General/OCVMRC (i.e. listed on the MRC Website and 2) have updated their unit profile on the MRC Website within the past three months (prior to the scholarship due date).

The appropriate attendee (i.e. the MRC unit coordinator or director, or their designee) should complete the scholarship application by February 5, 2009. Once confirmed, the scholarship recipient will receive an email message from NACCHO with details about travel and hotel arrangements (by February 11, 2009).

For further information regarding the scholarships for the Integrated Training Summit, please visit: <http://www.naccho.org/topics/emergency/MRC/integratedsummit.cfm>

\*\*\*Registering for the Integrated Training Summit is separate from the travel scholarship application process. All Integrated Training Summit attendees (including individuals who are not eligible for the travel scholarship) are required to register for the conference. Registration is expected to go live in Mid-January (registration link: <http://www.hhstrainingsummit.org/registration.php>).

## III. News & Notes

1. MRC Website Improvements Offer MRC Leaders Expanded Capabilities

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In seeking to improve the information and resources available to units the MRC Member Resources section, on the MRC Website (<http://www.medicalreservecorps.gov>), had been expanded. This upgrade provides unit leaders (users who are registered as either MRC Director or Coordinator) with the capability to run MRC unit reports. These reports allow leaders to create a directory of MRC units based on various fields, including: Unit Name, Address, City, State, Zip, Region, Date Established, Contact Name, Volunteer Counts (by type and total), Sponsor Organization, Sponsor Organization Type, Jurisdiction Type, Unit Focus, and Unit Leader Type. In addition, leaders will be able to filter the results by State or Region.

In order to run the report, you must first log in to the Member Resources site. To resolve any technical issues with running these reports, individuals may contact the MRC Webmaster ([MRCWebmaster@z-techcorp.com](mailto:MRCWebmaster@z-techcorp.com)), or the Office of the Civilian Volunteer Medical Reserve Corps with all other questions ([MRCcontact@hhs.gov](mailto:MRCcontact@hhs.gov) or 301.443.4951).

### **2. NYS Governor Outlines Plans to Combat Childhood Obesity in 2009 State of the State Address**

Governor Patterson singled out childhood obesity as a public health priority in his 2009 State of the State address. More information on Governor's five-point plan to fight obesity in New York State is available at [http://www.ny.gov/governor/press/factsheet\\_0107091.html](http://www.ny.gov/governor/press/factsheet_0107091.html).

### **3. Resolve to Be Ready 2009 Campaign Kicks Off**

The U.S. Department of Homeland Security's (DHS) Ready Campaign is reminding Americans to Resolve to be Ready in 2009. *Resolve to be Ready* is a nationwide effort designed to encourage individuals, families, businesses and communities to take action and prepare for emergencies in the new year. More information is available at [www.ready.gov](http://www.ready.gov).

### **4. Revised National Incident Management System (NIMS) Released by DHS**

On December 18, 2008 the Department of Homeland Security (DHS) released a revised NIMS. NIMS expands on the original version released in March 2004 by clarifying existing NIMS concepts, better incorporating preparedness and planning and improving the overall readability of the document. The revised document also differentiates between the purposes of NIMS and the National Response Framework (NRF) by identifying how NIMS provides the action template for the management of incidents, while the NRF provides the policy structure and mechanisms for national-level policy for incident management. Additionally the revised document places greater emphasis on the role of preparedness and has reorganized its components to mirror the progression of an incident, and expands on the integration of private sector partners and NGOs in incident response.

A summary document outlining changes to NIMS is attached. The full document is available [here](#).

### **5. HHS Releases Guidance for Use and Stockpiling of Antiviral Drugs for Pandemic Influenza**

For a copy of the guidance visit [www.pandemicflu.gov](http://www.pandemicflu.gov).

### **6. RAND Releases Paper on Measuring Preparedness**

On December 29, 2008 the RAND Corporation released a paper titled "The Problem of Measuring Emergency Preparedness: The Need for Assessing 'Response Reliability' as Part of Homeland Security Planning". The paper focuses on prospectively assessing preparedness by looking at the reliability of response systems in tandem with other measures. Such an assessment would be based on the nature of the system of response organizations, capabilities, and resources and the factors that shape how well it responds.

A copy of the paper, and the executive summary, are attached as well as available [here](#).

## **IV. Tools You Can Use**

### **1. CDC SNAPS Tool Provides Profiles of Local Communities**

SNAPS, a tool release by the CDC on January 5<sup>th</sup>, provides local-level community profile information nationwide. It can be browsed by county and state and searched by zip code. SNAPS serves as a valuable tool when responding to public health

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emergency events at the state, Tribal, and local levels. It provides a "snap shot" of key variables for consideration in guiding and tailoring health education and communication efforts to ensure diverse audiences receive critical public health messages that are accessible, understandable, and timely.

To access SNAPS click on the following link: <http://emergency.cdc.gov/snaps/>.

### 2. RAND Quality Improvement Toolkit for Pandemic Influenza Programs Now Available

The *PREPARE for Pandemic Influenza: A Quality Improvement Toolkit* is intended to help state and local health departments of all sizes incorporate quality improvement (QI) methods and promising improvement strategies into their current emergency preparedness activities. This toolkit was developed with the input of health departments from across the country. Unlike other improvement approaches, the toolkit focuses on building agency capabilities rather than assessing agency capacity for future action. Also emphasized are efforts that improve both day-to-day public health activities and preparedness.

To obtain a copy of the toolkit please visit [http://www.rand.org/pubs/technical\\_reports/TR598/index.html](http://www.rand.org/pubs/technical_reports/TR598/index.html).

### 3. UNC Unveils 2009 Preparedness Training Series

The University of North Carolina North Carolina Center for Public Health Preparedness is pleased to offer the 2009 Preparedness Training Series with a certificate of completion for registered participants who complete 12 online training modules on preparedness topics during the 2009 calendar year. Courses are free and open to the public. More information on the training series and individual courses is available at [http://nccphp.sph.unc.edu/prep\\_training/index.htm](http://nccphp.sph.unc.edu/prep_training/index.htm).

## V. Research in Brief

### 1. Communicating with the Public about Emerging Health Threats

Wray RJ, Becker SM, Henderson N, Glik D, Jupka K, Middleton S, Henderson C, Drury A, Mitchell EW. *Communicating with the Public about Emerging Health Threats: Lessons from the Pre-Event Message Development Project*; Am J Public Health. 2008 Dec;98(12):2214-22. Epub 2008 Apr 1

Abstract –

**OBJECTIVES:** We sought to better understand the challenges of communicating with the public about emerging health threats, particularly threats involving toxic chemicals, biological agents, and radioactive materials. **METHODS:** At the request of the Centers for Disease Control and Prevention, we formed an interdisciplinary consortium of investigative teams from 4 schools of public health. Over 2 years, the investigative teams conducted 79 focus group interviews with 884 participants and individual cognitive response interviews with 129 respondents, for a total sample of 1013 individuals. The investigative teams systematically compared their results with other published research in public health, risk communication, and emergency preparedness. **RESULTS:** We found limited public understanding of emerging biological, chemical, and radioactive materials threats and of the differences between them; demand for concrete, accurate, and consistent information about actions needed for protection of self and family; active information seeking from media, local authorities, and selected national sources; and areas in which current emergency messaging can be improved. **CONCLUSIONS:** The public will respond to a threat situation by seeking protective information and taking self-protective action, underlining the critical role of effective communication in public health emergencies.

### 2. The Risk of Seasonal and Pandemic Influenza: Prospects for Control

Monto AS. *The Risk of Seasonal and Pandemic Influenza: Prospects for Control*; Clin Infect Dis. 2009 Jan 1;48 Suppl 1:S20-5.

Abstract –

Seasonal influenza is an underappreciated cause of morbidity and mortality in the United States. Seasonal vaccination of individuals in groups at high risk of complications has long been recommended. However, there has been a gradual

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expansion of the recommended groups for annual influenza immunization in order to reduce the incidence of uncomplicated infection, to alleviate the impact of seasonal influenza on health care, and to simplify the application of recommendations. The threat of an influenza pandemic, heightened by recent cases of highly pathogenic avian influenza in humans, requires continued efforts in preparedness. Strategies for the control of pandemic influenza must include vaccines, antiviral drugs, and nonpharmaceutical interventions like school closure and voluntary quarantine around cases. The prophylactic efficacy of neuraminidase inhibitors, previously observed in household studies, suggests that they will be a useful adjunct to voluntary quarantine. Stockpiles of antiviral drugs are being established for therapeutic and perhaps preventive use for pandemic influenza.

### 3. Health Effects of Relocation Following Disaster: A Systematic Review of the Literature

Uscher-Pines L. *Health Effects of Relocation Following Disaster: A Systematic Review of the Literature*; Disasters. 2009 Mar;33(1):1-22. Epub 2008 May 21

Abstract –

This paper reviews the literature on the effects of post-disaster relocation on physical and mental health, and develops a conceptual framework to guide future research. Forty articles were selected for full-text review and incorporation into the conceptual framework. Twenty-four articles were reviewed for results and methodology. These overwhelmingly tracked mental health outcomes. Only four (16 per cent) focused on physical health. Eight of ten showed an association between relocation and psychological morbidity. Certain outcomes (such as mortality, injury and cardiovascular disease risk factors) revealed inconsistent results, but these were rarely studied. Despite the frequency of post-disaster relocation and evidence of its effect on psychological morbidity, there is a relative paucity of studies; the few examples in the literature reveal weak study designs, inconsistent results, and inattention to physical health impacts and the challenges facing vulnerable populations. Further research guided by theory is needed to inform emergency preparedness and recovery policy.

### 4. How Can We Strengthen the Evidence Base in Public Health Preparedness?

Nelson CD, Beckjord EB, Dausey DJ, Chan E, Lotstein D, Lurie N. *How Can We Strengthen the Evidence Base in Public Health Preparedness?* Disaster Med Public Health Prep. 2008 Dec;2(4):247-50

Abstract –

The lack of frequent real-world opportunities to study preparedness for large-scale public health emergencies has hindered the development of an evidence base to support best practices, performance measures, standards, and other tools needed to assess and improve the nation's multibillion dollar investment in public health preparedness. In this article, we argue that initial funding priorities for public health systems research on preparedness should focus on using engineering-style methods to identify core preparedness processes, developing novel data sources and measures based on smaller-scale proxy events, and developing performance improvement approaches to support the translation of research into practice within the wide variety of public health systems found in the nation.

## VI. Dates to Watch Out For

2/5/09	Deadline for Scholarship Applications for 2009 Integrated Summit
2/9/09	Poster Presentation Deadline for 2009 Integrated Summit
2/18/09 – 2/20/09	2009 Public Health Preparedness Summit (San Diego, CA)
3/15/09	Early Registration Deadline for NJ Emergency Preparedness Conference
4/4/09 – 4/8/09	2009 Integrated Medical, Public Health, Preparedness and Response Training Summit (Dallas, TX)
5/4/09 – 5/8/09	2009 New Jersey Emergency Preparedness Conference (Atlantic City, NJ)