

medical  
reserve  
corps



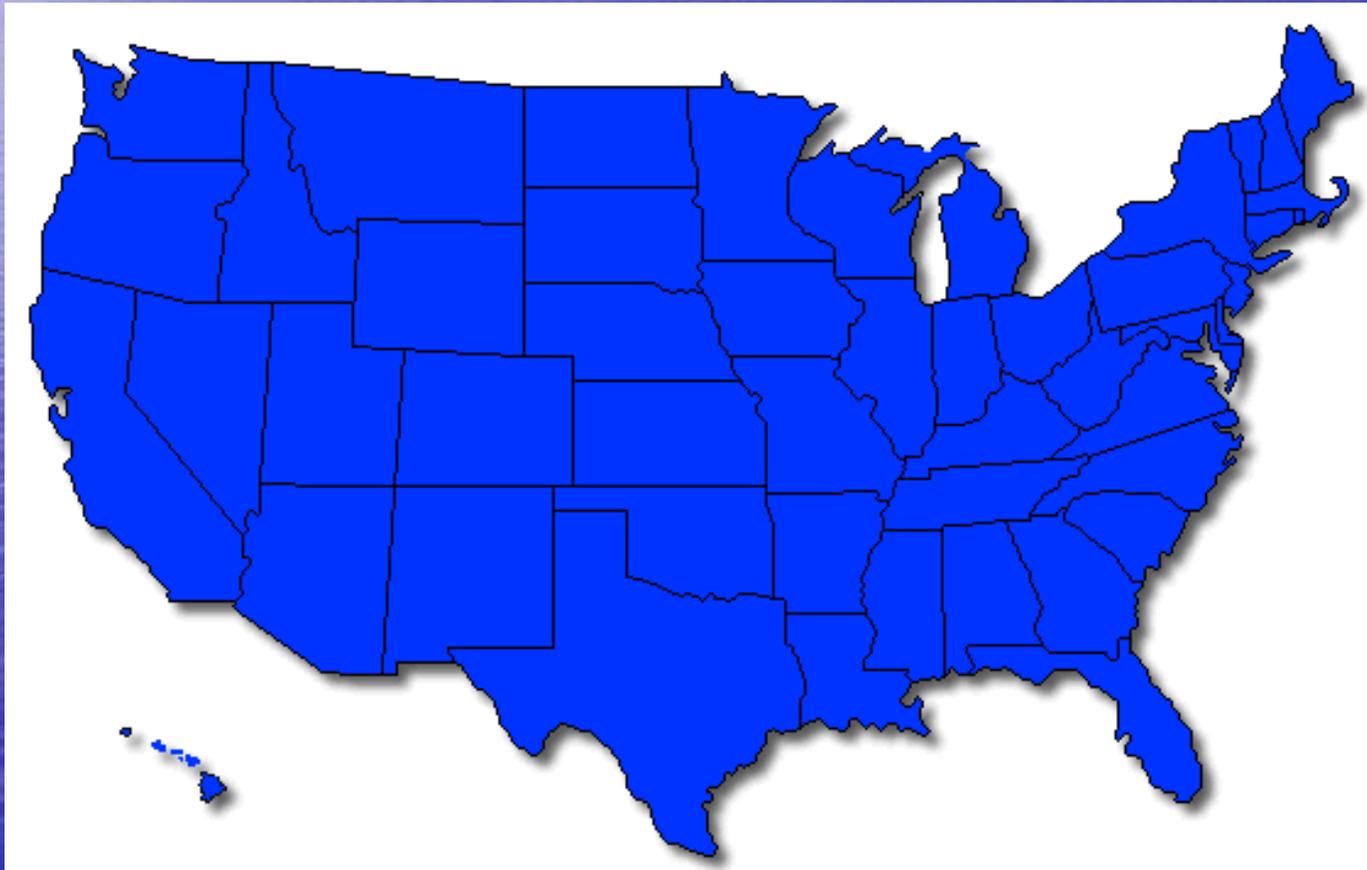
# DEVELOPING MRC'S REGIONALLY:

## How to Use Existing Resources to Develop and Sustain an MRC

Presented by:

Brookline Massachusetts MRC  
Massachusetts Region 4b MRC

~ 3000 Local Public Health  
Agencies in US



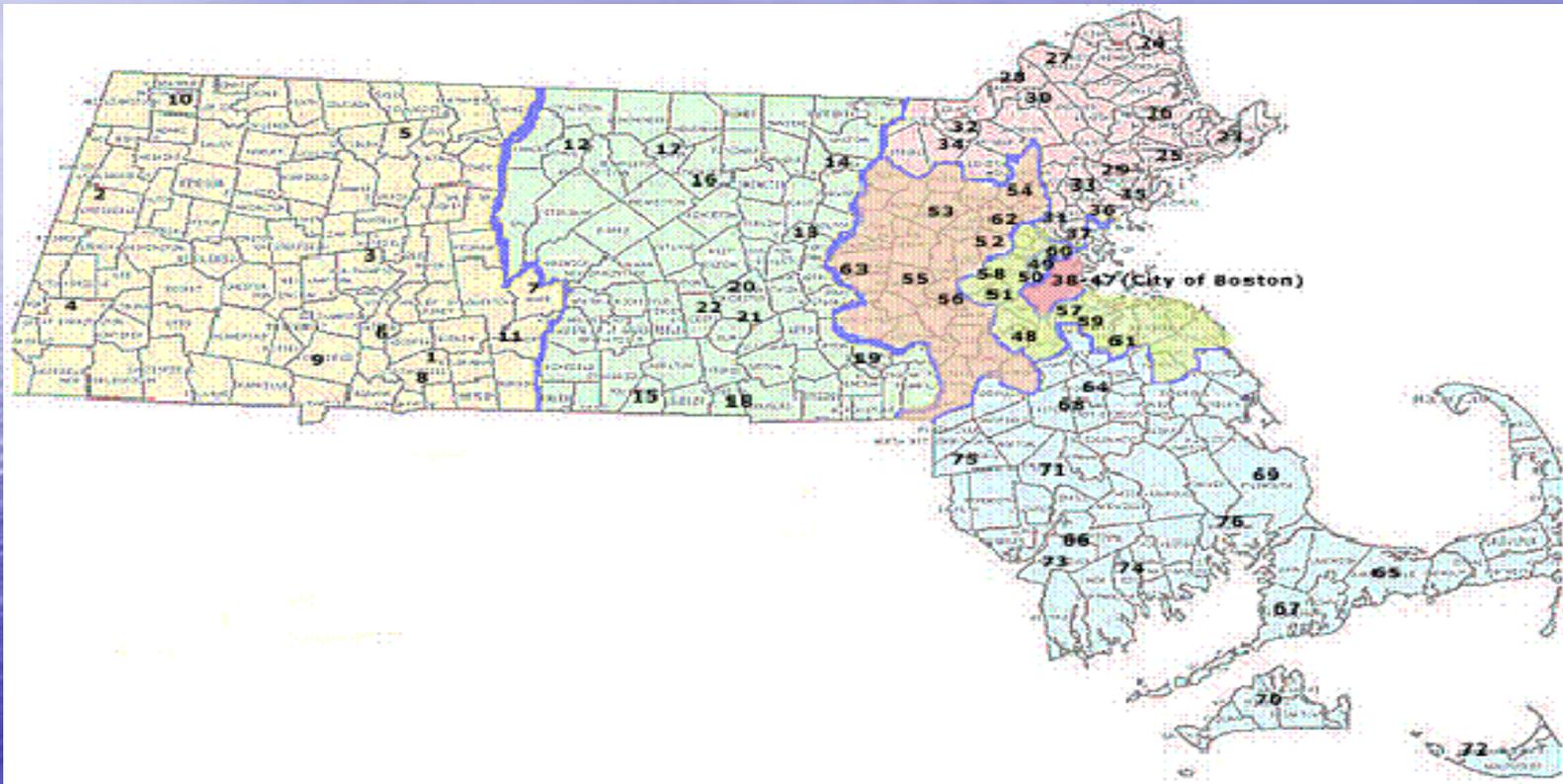
**12% of them are in Massachusetts**



**352** cities and towns

**352** local health agencies

# PH Emergency Preparedness Regions





# 4b Organization

- 27 Communities
- Population: 981,386
- Host Agency: Cambridge Public Health Department, Advanced Practice Center for Emergency Preparedness
- Funding Sources
- Partners: MDPH, NACCHO, Coalition for Local Public Health, others

# Sub-Regions

1. Cambridge, Chelsea, Everett, Revere, Somerville, Winthrop
2. Arlington, Belmont, Brookline, Newton, Watertown
3. Canton, Dedham, Milton, Needham, Norwood, Wellesley, Westwood
4. Braintree, Cohasset, Hanover, Hingham, Hull, Norwell, Quincy, Scituate, Weymouth

# Brookline Medical Reserve Corps

- Population 57,000, adjacent to Boston
- Received funding, October 2004
- Developed focus groups, MRC plan developed and implemented
- Brookline MRC leadership committee formed
- Brookline MRC materials developed
- Members recruited
- MRC trainings (began September 2005)

# Why start a Regional MRC???



# Steps to Developing a Regional MRC

- 27 communities agree to participate, Fall 2005
- Application submitted to National MRC and approved, January 2006
- Sub-committee established to develop goals, objectives and plans for Regional MRC
- Forms written and SOP being developed
- Developed database system, trainings and credentialing





# “Nuts and Bolts” Issues for a Regional MRC

- Liability
- Credentialing/Badging
- Training
- HHAN/Notification System
- Funding
- CORI Checks
- Database Input and Management

# Liability

- MA Department of Public Health (DPH) lawyer working on legislative initiatives to protect volunteers
- General liability guidance sheet written by MA DPH legal department (See Handout)
- Brookline is using MGL 258 Tort Claims Act, Region 4b will follow suit (See Handout)

# Credentialing/Badging

- Utilizing sample from UMV MRC following FIPS standards
- Working with MA DPH on MSAR and MRC coordination
- Region 4b MRC will revise badges if needed

# Trainings

- A master list of possible MRC trainings has been developed (See Handout)
- Regional trainings will supplement local trainings and will begin in Sept. 2006 (See Handout)
- CEU's for nurses, physicians and EMT's (CEU's for social workers-pending) will be given at all trainings

# HHAN/Notification System

- All volunteers will be activated via HHAN system
- Brookline MRC members have been trained on and are registered to use the HHAN system
- Training offered regionally to all Region 4b MRC members, so that everyone is trained and registered to use the HHAN system

# Funding



- Region 4b is using State CDC BT money to hire an admin.
- Working with MA DPH to secure funding for MRC's from the state utilizing a portion of the \$2 million allocated from the CDC
- Region 4b is asking local health depts. to give back some of their local allocations to help fund Regional MRC work

# CORI Checks

- Brookline's Human Resources Department does CORI checks for volunteers
- Region 4b will be conducting CORI checks through their Human Resources Department for all other communities in the region

# Database Input and Management

- Region 4b will set up and manage a regional database using Brookline's existing format
- New volunteer applications will be sent to Region 4b MRC coordinator from all 27 communities
- Each community will have the ability to look at their own volunteer list and to enter any new volunteers into the database

# Database Input and Management (Continued)

- State CDC BT money used to hire admin. who will input volunteer data, keep track of CORI checks and perform license checks.
- Volunteer application will also be available on the Cambridge Public Health Department's website, linked directly to database
- Waiting for MSAR procedures to be developed

# Mutual Aid

- The Region 4b MRC will serve as a companion to mutual aid agreements
- Gives the region ability to call on neighbors for help, just like Mutual Aid



# Regional MRC Successes

- Regional forms have been produced and a regional database has been prepared, using existing resources (See Handouts)
- An MRC sub-committee has been established and meetings have been scheduled

# Regional Successes (Continued)

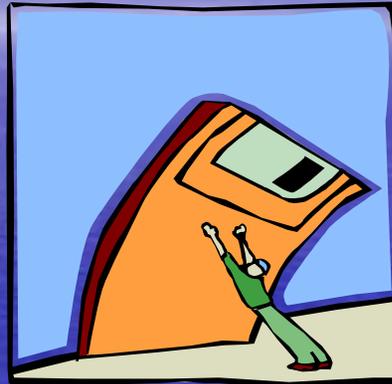
- Funding through State CDC BT money
- Regional structure makes it easy to roll out the MRC slowly, one sub-region at a time, one community at a time
- Everyone wins!

# Regional Challenges

- Meeting small town vs. city needs
- Sustaining funding
- Each community in the region is at different points in their emergency planning efforts
- Different funding sources

# Regional Sustainability

- Funding
- Partnerships
- MRC statewide coordinator
- Use of VISTA volunteers, senior volunteers, CHNA, MRC volunteers and CERT volunteers



# Be Creative, Think Outside the Box!

“Creativity can solve almost any problem.  
The creative act, the defeat of habit by  
originality, overcomes everything.”

-George Lois



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# Region 4b MRC Goal [Return](#)

- The Goal of the Region 4 B Medical Reserve Corps (MRC) is to recruit, train, mobilize, and coordinate a group of community-based volunteers, known as the Medical Reserve Corps, who can serve locally and/or regionally during an emergency health situation and assist with local and/or regional public health needs throughout the year.

# Region 4b MRC Objectives

- To develop an MRC recruitment letter and application before February 28, 2006.
- To gather list (by regional interns) of professionals for each community (Board of registration lists) prior to March 31, 2006
- To complete mailings to first group identified in each community to potential volunteers by May 31, 2006
- To organize and host MRC informational meetings in individual communities or regionally in May and June 2006.
- To work with local town counsels on issues of liability for volunteers utilizing Brookline and state information prior to May and June 2006.

# Region 4b MRC Objectives

[RETURN](#)

- To implement database plan developed for compiling volunteer information and CORI procedure by March 31, 2006
- To develop and pilot Credentialing system organized for all volunteers before July 2006.
- To train all MRC members about the HHAN system and have them signed on, so that they can be alerted in an emergency by the fall 2006.
- To conduct regional MRC trainings organized for fall 2006—schedules mailed by August 15, 2006.
- To maintain database of all volunteers and contact regularly to keep them interested and involved in MRC. Ongoing