

Medical Reserve Corps (MRC)

Presentation to ACHDHE
7/11/2023

Agenda

- MRC History & Overview
- MRC Response to COVID-19
- The MRC After COVID19
- The Future of MRC: Supporting Health Equity Initiatives

History of the MRC in Virginia

- The National MRC Program was created as part of the National Citizen Corps post 9-11-2001
- First MRC programs were started in Virginia with 12 units (Sep 2003)
 - All local programs
 - No dedicated funding
- Virginia Board of Health Declaration of Interest in the MRC Program (2005)
- Virginia Law providing MRC with Risk Management Liability coverage (2006)
- In 2006, the State Volunteer Coordinator position was established to try to standardize policies and processes and share resources across programs
- In 2014, the Virginia Volunteer Health System (VVHS) was launched as the statewide volunteer database.



Pre-COVID-19 MRC Readiness

- ~12,000 (7,633 Deployable) MRC Volunteers Statewide (as of March 2020)
 - Significant discrepancies between Registered and Deployable Volunteers
- Virginia Volunteer Health System (VVHS)
 - Statewide system in place prior to COVID
 - Was not primarily used by all MRC Units in Virginia
- MRC State Team Structure:
 - One State Volunteer Coordinator
 - No additional program or admin support
 - No Regional Coordinators
- MRC Unit Coordinators:
 - 20 Units, including 5 Units that covered multiple Health Districts
 - Several positions were only funded 50%
 - Some positions were 20 hour wage
 - Some positions were split between MRC and another project
 - Chronic turnover and position vacancies in some units
- MRC Volunteer utilization ranged significantly from unit to unit



COVID-19 Response

- Volunteer Surge from 7,633 deployable in March 2020 to 25,097 by Dec 2021
 - Expansion of MRC State Team from 1 individual to 13 Team Members
 - On-boarding and background investigation process revamped
 - Statewide Orientation and Training
- Unprecedented Volunteer Response!
 - 26,063 individual Volunteers deployed at least once during COVID
 - Over 800,000 volunteer service hours
- Issues/Challenges:
 - Some Units had long-term MRC Coordinator Vacancies during COVID
 - MRC Volunteers not utilized or underutilized in *some* Health Districts
 - Competition from contracted personnel and contract assets
- Result: Some MRC Units grew considerably, while a few Units stagnated
- Improvements and Enhancements to VVHS
 - \$150,000 from Immunizations grant for upgrades and enhancements
 - Improvements for Volunteer management, data management and reporting



MRC State Team Structure (As of April 2022)

State Volunteer Coordinator

Administrative Coordinator

Volunteer Liaison
Volunteer Application
Credentialer
Data Manager

Assistant State Coordinator

Northern Region MRC
Coordinator
Northwest Region MRC
Coordinator
Central Region MRC
Coordinator
Eastern Region MRC
Coordinator

Logistics Coordinator

MRC Training Consultant
OEP Training Coordinator

Communication Coordinator

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DEPLOYMENT ACTIVITY



26,063
DEPLOYED



12,184
MEDICAL



13,879
SUPPORT

Deployed = unique
volunteers deployed since Jan 2020

VIRGINIA MEDICAL RESERVE CORPS

The volunteer program of the Virginia Department of Health

VDH VIRGINIA
DEPARTMENT
OF HEALTH

Office of
Emergency
Preparedness

VA MRC DEPLOYMENT IMPACT

January 2020 - June 2022



838,814

Service and
Training Hours

86%

Service Hours
COVID Focus

224%

Deployable Growth



\$25.8MIL

Workforce Savings

VDH VIRGINIA
DEPARTMENT
OF HEALTH

*To protect the health and promote the
well-being of all people in Virginia.*

Post-COVID Issues and Challenges

- Ramping down state response and right-sizing the MRC state team
 - 7 positions, including 4 Regional MRC Coordinators (down from 13)
 - Permanent Regional Structure
- Long-Term Funding for Unit Coordinator Positions
 - 12 of 25 MRC Unit Coordinator positions currently “AT RISK” for:
 - Continued funding (past June 30, 2023) AND/OR
 - Retention (contract, wage, or part-time positions)
- Finding effective ways to keep MRC Volunteers engaged post-COVID
 - Other public health initiatives (Monkeypox, EVD, Opioid Response, Population Health)
 - Training & Exercises
 - Need Health District Leadership “Buy-In” for using MRC Volunteers



MRC State Team Structure (Since September 2022)

State Volunteer Coordinator
Mike Wagner



MRC Program Administrator
Lara Cash



MRC Admin Assistant
Karrie Carlsen



Northern Region MRC Coordinator
Madison Davis



Northwest Region MRC Coordinator
Rebecca Chester



Central Region MRC Coordinator
Abigail Hobbs



Eastern Region MRC Coordinator
Kate Bausman



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VA MRC OEP TEAM

State Coordinator

Michael Magnier

VA MRC Regional Coordinators

Central - Abigail Hobbs

Eastern - Kate Bausman

Northern - Madison Davis

Northwest - Rebecca Chester

VA MRC Admin Team

Lara Cash

Karrie Carlsen

Far Southwest Region

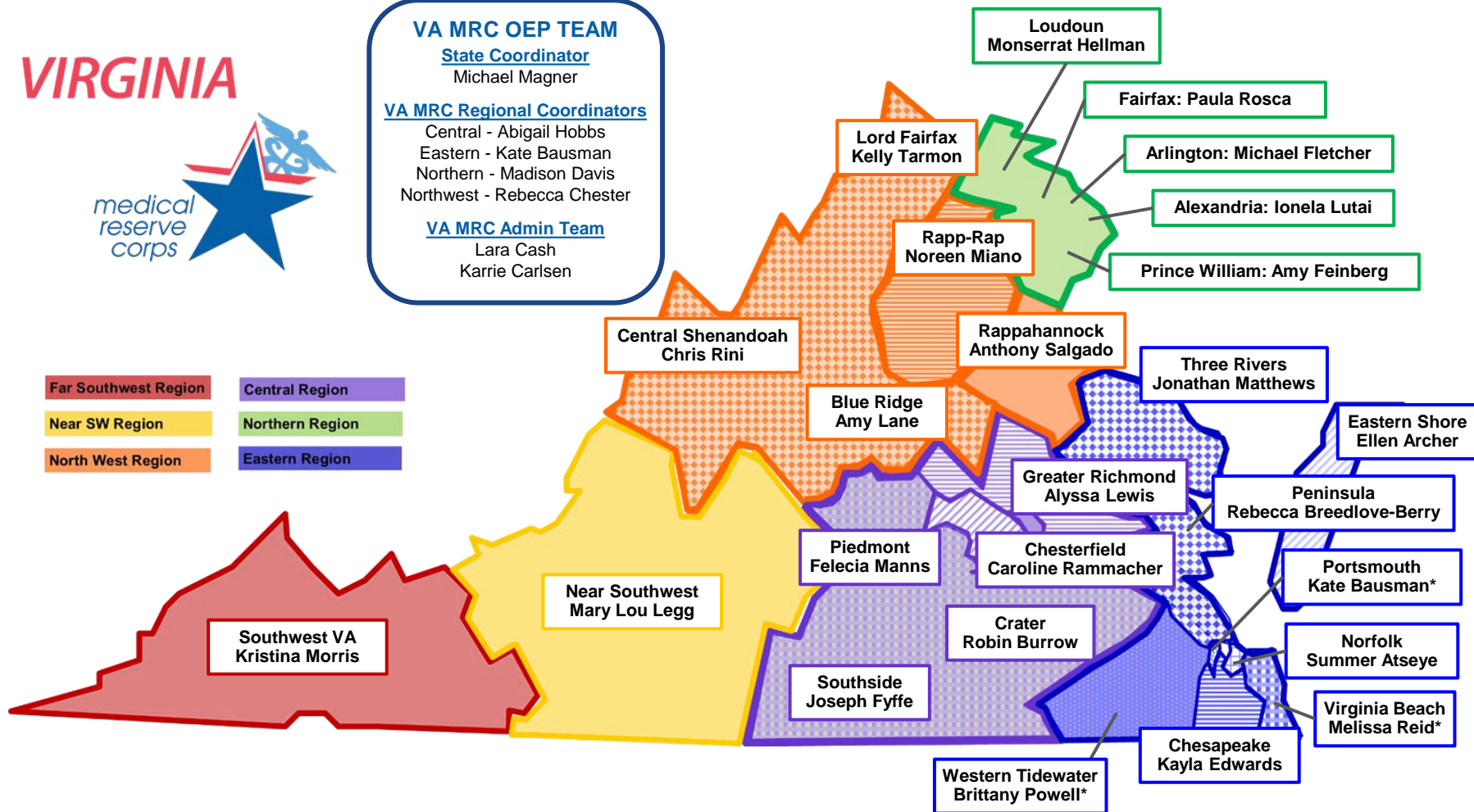
Central Region

Near SW Region

Northern Region

North West Region

Eastern Region



* - Interim Coordinator

November 4th, 2022

2021 MRC National Program Recognition

Community Response Award: Alexandria MRC (VA)

COVID-19
Logistics



ASPR

Saving Lives. Protecting Americans.

2

Community Response Award: Loudoun MRC (VA)

COVID-19
Testing



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1

Outstanding MRC Preparedness and Resilience Volunteer Award: Ann Jernigan, Southwest Virginia MRC (VA)



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Community Response Award: Three Rivers MRC (VA)

COVID-19
Community
Outreach



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Community Response Award Alexandria MRC (VA)

COVID-19
Call Center
Operations



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Outstanding MRC Preparedness and Resilience Volunteer Award: Richard Perry, Chesapeake MRC (VA)



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2021 MRC National Program Recognition Cont.

Picture of the Year Award:
Fairfax MRC (VA)



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Outstanding MRC State Coordinator Award:
Jennifer Freeland, Virginia



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Innovator Award:
Virginia MRC



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Honorable Mention:

- Community Response - COVID-19 Behavioral Health: Southwest Virginia MRC
- Community Response - COVID-19 Multi-Mission: Fairfax MRC
- Outstanding Sponsoring Organization: Three Rivers Health District
- Outstanding MRC Responder: William Moors, Three Rivers MRC

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2022 MRC National Program Recognition



13 Award Categories
21 Awardees
16 Honorable Mentions

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2023 MRC National Program Recognition

U.S. Department of Health and Human Services
ASPR Administration for Strategic
Preparedness & Response

2023 MRC Program Recognition Awards

MRC Program Office
Well Check Webinar
May 2, 2023

Community Preparedness and Resilience Awardee: Virginia Beach Medical Reserve Corps

- The Community Preparedness and Resilience Award honors an MRC unit that has demonstrated contributions at the community level aimed at reducing vulnerabilities, building resilience, and improving public health preparedness. This award category applies to all activities and unit efforts over the past year.



Mentor Awardee: Lara Cash, VA

- The Mentor Award honors an MRC leader who has successfully collaborated with other members of the MRC network over the past year to share practices, participate in activities, and carry out initiatives that have strengthened individual and collective groups of MRC units.



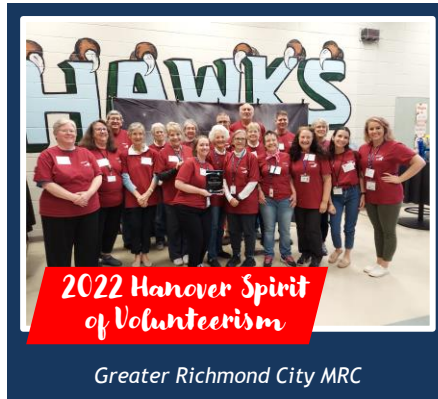
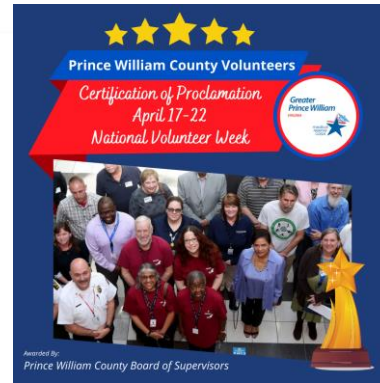
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12 Award Categories - 12 Awardees - 0 Honorable Mentions

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Additional Volunteer/Program Awards



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MEDICAL RESERVE CORPS

January 2022-December 2022 Impact Report

NEARLY
28K

APPROVED
VOLUNTEERS

87%

DEPLOYABLE
VOLUNTEERS

\$2.2
MILLION

WORKFORCE
SAVINGS

OVER
14K

VOLUNTEER
DEPLOYMENTS

72K

HOURS OF
SUPPORT

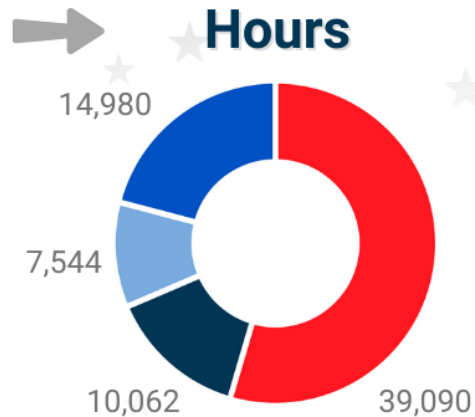
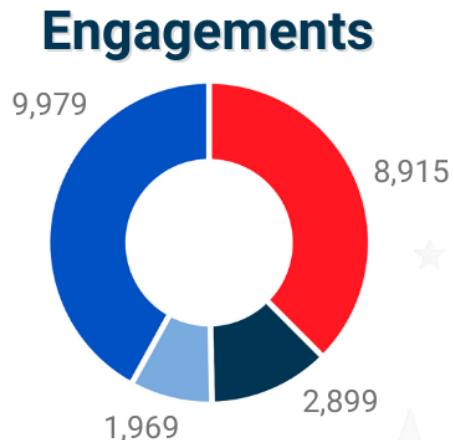
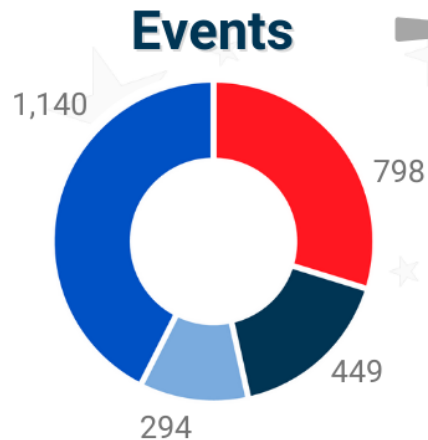
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VIRGINIA MEDICAL RESERVE CORPS

January 2022-December 2022 Impact Report

Volunteer IMPACT BY MISSION TYPE



■ Training/Exercise ■ Emergency Response ■ Administration ■ Public Health

MRC Programmatic Concerns as of Dec 2022

- Must Maintain the sustained funding already in place for:
 - 2x MRC State Level Positions (State Volunteer Coordinator and Program Administrator) (PHEP)
 - Virginia Volunteer Health System (50% PHEP/50% HPP)
- Must Find long-term reliable, sustained funding for:
 - MRC Unit Coordinators
 - 12 of 25 MRC Unit Coordinator positions currently “AT RISK” for:
 - Continued funding past June 30, 2023, AND/OR
 - Retention (contract, wage, or part-time positions)
 - Four Regional MRC Coordinators
- Increase MRC Volunteers utilization in ongoing, routine public health efforts



Virginia MRC Funding as of July 2023

- Public Health Emergency Preparedness (PHEP) Grant:
 - State Volunteer Coordinator
 - MRC Program Administrator
 - 12 MRC Unit Coordinator positions (full or partial funding)
- Public Health Workforce Development Grant (WDG) funding extended through June 2024:
 - 10 MRC Unit Coordinators & 1 Assistant MRC Coordinator
 - 4 MRC Regional Coordinators
- Public Health Infrastructure Development Grant funding:
 - 4 MRC Coordinators (July 2024 - Jun 2028)
- Local Funding:
 - 5 Unit Coordinators and 1 Assistant Coordinator
- MRC - State, Territory and Tribal Nations, Representative Organizations for Next Generation (MRC-STTRONG) Grant (\$1.5 million):
 - Gap Funding for 10 MRC Coordinators & 1 Assistant through Jun 2025

MRC-STTRONG Project Goals (July 2023 - Jun 2025)

- Strengthen programs for specific units that struggled before, during and after COVID-19
- Utilize MRC Volunteers to address the needs of at-risk populations, reduce resource gaps, and mitigate health disparities throughout Virginia through targeted outreach events.
 - Train and certify at least 5 MRC Volunteers in each MRC unit as REVIVE trainers in Virginia by December 2023, and have them conduct at least 2 REVIVE training events in the community per unit per year of the project period.
 - Train and certify at least 1 MRC Volunteer in each MRC unit as “Stop The Bleed,” “Until Help Arrives,” or CPR/AED trainers in Virginia by May 2024, and conduct 2 such training events in the community per unit per year of the project period
 - Utilize volunteers to conduct community health education and outreach (i.e., health fairs, health screening events, immunization drives, etc.) - at least 1 per unit per year
 - MRC Units will form partnerships with external organizations to assist at-risk individuals, close resource gaps and reduce health disparities (RAM, local food banks, FQHCs, AHA, etc.)

MRC-STTRONG Project Goals (July 2023 - Jun 2025) (Cont).

- Utilize MRC Volunteers to address the needs of at-risk populations, reduce resource gaps, and mitigate health disparities throughout Virginia through targeted outreach events.
 - MRC Units will partner with their Population Health team within their health districts to conduct specific events within their communities to improve the health of the population, reduce health disparities and address resource gaps - at least 1 event per unit per year of the project period
 - Build a team of MRC members that are representative of the at-risk populations in their localities. The teams' mission will be to provide targeted outreach to combat the community's hesitancy to utilize public health programs. Non-English-speaking Volunteers led by a Bilingual MRC Volunteer. (1 Unit will serve as a pilot project.)
- Build State Level Teams:
 - RadHealth Response Team
 - Statewide Amateur Radio Communications Team
 - Central Office Augmentation Team
 - Statewide Behavioral Health MRC Unit

Other MRC-STTRONG Projects

- New Enhancements to the Virginia Volunteer Health System (VVHS)
- Training for MRC Unit, Regional and State Coordinators
- Additional MRC Volunteer Training



Virginia Behavioral Health Medical Reserve Corps (VBHMRC)

- Department of Behavioral Health & Developmental Services (DBHDS) has a Disaster Behavioral Health Team (DBHT) of volunteers that can deploy in response to an increased need for BH capabilities
- VDH is partnering with DBHDS to convert the DBHT into the VBHMRC
 - This will allow DBHDS to use the existing MRC infrastructure (VVHS)
 - Transitioning from “Break Glass” emergency response program to more proactive use of BH volunteers
- This is one of many initiatives under Governor Youngkin’s “Right Help, Right Now” program

Conclusions

- The MRC program has grown and evolved over the past 21 years
 - Initial focus on “break glass” response to an Anthrax or Smallpox event
 - All Hazards Response
 - COVID-19 Response
 - Building Resilient Communities by reducing Health Disparities

