



2011—A Successful Year for Virginia Medical Reserve Corps

Over 13,000 Volunteers, 2,438 Recruited and \$635,500 in Volunteer Support

VAMRC 2011 Report Card	4th Qtr	EOY Total
Current # of Volunteers	13,017	13,017
Total # of Volunteers Recruited	633	2,438
Total # of Volunteers Withdrawn		819
# of Training/Exercise Opportunities	145	690
# of Volunteers Trained	1,068	5,048
Total Value of Volunteer Training Hours	\$56,883.86	\$266,885.13
# of Public Health Activities	156	491
# of Volunteers Supporting Public Health Activities	428	1,744
Total Value of Public Health Volunteer Hours	\$62,465.04	\$212,013.68
# of Emergency Response Efforts	0	28
# of Volunteers Supporting Emergency Response Efforts	0	273
Total Value of Volunteer Response Hours	0.00	\$57,818.39
# of Administrative Support Activities	172	609
# of Volunteers Providing Administrative Support	126	710
Total Value of Volunteer Administrative Support Hours	\$22,756.12	\$98,799.81
Total Value of Volunteer Hours	\$142,105.02	\$635,518.00
Alerting		
# of Alerts integrated into a HSEEP compliant EX	5	27
# of VVHS Alerts Sent	167	683

2011 Holiday Greeting and Video Reflection to celebrate the success of 2011 and provide a holiday greeting to our volunteers and supporters, a video greeting was created and posted on YouTube <http://www.youtube.com/user/vamrc>. The creative song was provided by a sister MRC unit in MA. Thank you to the units for great pictures of their volunteers in action!

VA MRC 2012 Vision... To Become Stronger, Faster and Awesomer!

Eastern Region MRCs provide Medical Services to the Homeless

Newport News, VA, Friday December 16, 2011. Peninsula, Norfolk, Portsmouth and Three Rivers MRC Coordinators Teresa Blakeslee, Linda Botts, Teresa Young, and Valerie Prince and MRC volunteers joined Peninsula and Portsmouth Health District staff to provide medical services to approximately 300 homeless individuals as part of a Homeless Outreach Collaborative Team (H.O.C.T.) Christmas event.

The medical services provided at this heart-warming event were made possible by 24 MRC volunteers from Peninsula, Norfolk, Portsmouth and Three Rivers MRC units. Services included Tdap and influenza vaccines, glucose testing and blood pressure screening, hygiene and body mass index health education, art therapy, STI testing, and podiatry and dental screening exams. The addition of 9 medical stations in 2011 was a success – in the past the only station provided was Blood Pressure Screenings. It has been identified that five lives may have been saved as a result of the skills and abilities of the medical staff providing the screenings.



The monetary value of MRC volunteer time committed to supporting this event was \$3,875.

Peninsula MRC Coordinator Teresa Blakeslee, who organized this outreach as a MRC ICS regional exercise, stated "it was truly amazing to see the integration of MRC, public health and 25 community agencies in motion and working together to provide needed services and to save lives."

This event was an HSEEP exercise. Below are observations from the AAR:



STRENGTH: A plan was developed for the event that coordinated all personnel, equipment and other resources needed for the health stations

STRENGTH: A plan was developed for the event that coordinated all of the MRC units assisting with the health stations.

STRENGTH: Volunteers were requested through their individual MRC units, and then were rostered as a region and assigned roles by the Incident Commander.

Once the event was set, information was sent to all four participating MRC units, who then forwarded the information to their volunteers via an alert utilizing the Virginia Volunteer Health System (VVHS).

Volunteers responded with their availability to their respective MRC Coordinators, who then forwarded that information to the Incident Commander. The IC then rostered the volunteers and assigned them roles based on their credentials. Job action sheets were created for each role at the event, and a JIT training was assembled. After signing in and setting up their respective health stations, volunteers were briefed and the event began. At the conclusion of the event, volunteers assisted with break down, completed an evaluation form, and signed out. Equipment and supplies were coordinated in a similar manner, as requests for specific items were sent out to the participating MRC units, who responded with their ability to provide items.

AREA FOR IMPROVEMENT: An ICS chart was provided to each volunteer, and Command Staff had FRS radios, with Operations having an 800 Mhz radio; however, communications were not redundant.



An excellent example of Volunteers Protecting the Health of their Community!

Jennifer E. Freeland
State Volunteer Coordinator

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