



Winter 2010

## MRC Volunteers Respond to H1N1 Flu Pandemic in Large Numbers

Since the onset of the H1N1 flu virus last spring, the Centers for Disease Control and Prevention (CDC), the Massachusetts Department of Public Health (DPH), local public health officials and the Medical Reserve Corps have worked tirelessly to respond to the pandemic. Starting in April 2009, there have been 1,977 diagnosed cases of the H1N1 flu virus, a novel influenza strain commonly referred to as the “swine flu.” In Massachusetts, the virus has hospitalized more than 400 people and killed 31. With the help of MRC volunteers around the state, public health officials have led a robust response focusing on public education and immunization. This response helped minimize the human suffering caused by the pandemic.

To combat the virus, the CDC worked with pharmaceutical partners to develop a vaccine in time for this year’s flu season. In August, the CDC allotted significant funding to DPH to begin planning public messaging and vaccination campaigns for the H1N1 flu pandemic. By November, DPH received weekly shipments of the H1N1 vaccine from the CDC. DPH distributed these shipments of vaccine to local boards of health, hospitals and licensed physicians to begin vaccinating populations at risk of hospitalization and death. Target groups included pregnant women, child caregivers, healthcare and emergency medical personnel, people aged 6 months to 24 years and anyone with preexisting health conditions with higher risks of medical complications from influenza. In January, when the supply of vaccine outpaced demand, distributors opened access for the vaccine to all groups.

With the H1N1 vaccine now readily available at doctor’s offices, hospitals and commercial pharmacies, state and federal public health officials strongly encourage everyone to get flu shots. On January 15, Governor Deval Patrick, DPH Commissioner John Auerbach, MA Health and Human Services Secretary Judy Ann Bigby and Health and Human Services Assistant Secretary Howard Koh held a press event to emphasize the need for universal vaccination. “Complacency is the single greatest threat we face,” said Governor Patrick. To help prove their point, Governor Patrick, Secretary Koh and Secretary Bigby lined up first to get their H1N1 flu shots at a vaccination clinic held after the press conference.



From left to right: DPH Commissioner John Auerbach, State Representative Peter Koutoujian, US Department of Health and Human Services Assistant Secretary Howard Koh, MA Health and Human Services Secretary Judy Ann Bigby, and Governor Deval Patrick.

### MRC Volunteers Staff Local Flu Clinics

Vaccinating thousands of Massachusetts residents in a matter of months was not an easy task. As the vaccine supply chain reached cities and towns, local boards of health heavily relied on their MRC volunteers to help staff a series of H1N1 flu clinics from November through February. “The partnership between the MRC and public health proved to be valued and indispensable,” said Sandy Collins, Upper Merrimack Valley MRC director. MRC volunteers covered a wide range of roles at flu clinics, from administrative duties to vaccinating patients. Volunteers greeted patients, filled out health information paperwork, managed waiting queues, directed traffic, provided behavioral health services and vaccinated thousands of Massachusetts residents and carried out innumerable tasks that made such a wide-scale vaccination

*continued on page 2*



### What is MRC?

The Medical Reserve Corps (MRC) system was founded by the federal government shortly after 9/11. The national system brings together people who have health care skills with citizen volunteers. MRC units are trained and prepared to respond as a team to emergencies in their communities. The members may provide education, outreach and various health services throughout the year.

campaign possible. When patients did not speak English, local public health officials relied on MRC volunteers with multi-lingual skills to communicate. MRC coordinators were kept busy organizing and communicating with volunteers, preparing Just-In-Time trainings and aiding local boards of health in the planning and implementation of numerous clinics.

Local boards of health and MRC units used a variety of organizing methods and locations for flu clinics. “All of the different approaches are good in my book, so long as people are getting vaccinated,” said Topsfield Regional MRC coordinator John Coulon. Many units worked with school nurses and ran H1N1 vaccination clinics in schools to vaccinate young children. Others ran clinics at local health centers, libraries, town halls, hospitals, malls and community centers.

In the face of difficult logistics and high demand for the vaccine, local public health officers and MRC units developed innovative approaches to running more efficient clinics. In Newton, the Region 4A, Region 4B and Newton MRC units partnered with Newton-Wellesley Hospital. In addition to clinics held in schools and libraries, the partners set up a clinic in a hospital conference room to vaccinate target group members by appointment. The program, called “Collaborative Clinic,” allowed residents to make appointments for H1N1 shots either by phone or through the Region 4A website. The program succeeded because of consistent staffing by MRC volunteers, school nurses, hospital staff and public health nurses. “I am incredibly proud of our volunteers,” said Teresa Wood Kett, Newton MRC coordinator. “Without them, we wouldn’t have been able to run this operation.”

Other MRC units used new technologies to improve their vaccination efforts. The Boston MRC, coordinated by Steph Sharp, successfully incorporated Twitter and a records management system in their vaccination campaign. Every 30 minutes, Boston residents could check up on wait times at a flu clinic via Twitter. Clinic staff would update the Boston Public Health Commission’s Twitter page so Boston residents could come when the clinic was less crowded. The BPHC also used a records management system that tracked the zip codes of vaccinated Boston residents. With this information in hand, the BPHC could see what neighborhoods were well covered in their vaccination campaign and which neighborhoods need more outreach and additional flu clinics.

### **H1N1 Disparities**

Recently, DPH released data that shows a disproportionate burden of H1N1 disease and complex for racial and ethnic minorities. The rate of confirmed cases of H1N1 for Black, Hispanic and Asian residents was two to four times higher than the rate for white residents. Racial and ethnic minorities faced higher hospitalization and death rates. DPH’s report cited lower vaccination rates and increased burden of chronic disease among minority populations as possible factors behind the disparity.

In addition to promoting vaccination, Commissioner Auerbach used the January 15 event to announce a new DPH initiative designed to address H1N1 health disparities for people of color. DPH has dedicated over \$1 million in funding for community based organizations to reach out to populations hit disproportionately hard by the H1N1 flu. Michael Coughlin, MRC statewide coordinator, said that there will most likely be a role for MRC units in this initiative.

### **After-Action Reporting**

While some flu clinics are still being scheduled for February, many MRC coordinators have begun to write their after-action reports, which will help direct pandemic planning in the future. For example, DPH developed a training program that taught pharmacists, paramedics and dentists to administer the vaccine to help increase the pool of available vaccinators. DPH is currently contemplating continuing this program for regular seasonal flu clinics. In addition, although the pandemic never reached a level where volunteers were needed for epidemiological work, the Boston MRC is pursuing educational courses and trainings in influenza epidemiology for future pandemics.

In some cases, the coordinator’s experiences this winter signaled areas for improvement. Kathleen Conley Norbut, Western MA MRC Coordinator, noticed that school-based clinics should have standardized protocols to help Individuals Requiring Additional Assistance. “Some schools have measures in place to communicate with flu clinic staff about their special education students’ needs,” said Ms. Norbut. “However, we need to develop consistent protocols so that our volunteers know how to handle children and adults with special needs.” Ms. Norbut is committed to working with local public health, MRC units and schools to better communicate with people with special needs.

### **Volunteer Recruitment**

One unexpected benefit of the H1N1 response was a sharp increase in MRC membership across the state. Some local public health offices used federal funding to run advertisements for the MRC program, while other volunteers

*continued on page 4*



*Volunteers from the Greater Westfield and Western Hampden County Medical Reserve Corps staff a school based H1N1 vaccination clinic.*

## Volunteer Spotlight: Keon Diggs

Since he joined the Berkshire County MRC one year ago, Keon Diggs has brought a youthful and energetic dynamic to the unit. In a short time, Mr. Diggs has become one of the unit's Team Leaders, developed a growing group of student volunteers from Bard College at Simon's Rock and taken charge of organizing MRC activities in Great Barrington. "From the moment Keon inquired about joining the Berkshire Medical Reserve Corp, his enthusiasm was remarkable," said Berkshire county MRC coordinator Corinne McKeown. "I quickly learned that Keon could be counted on to participate in any activity that his schedule would allow. He is an inspiration to other members."

Mr. Diggs, Residence Director and Community Service Coordinator at Bard College at Simon's Rock, has shown a passion for organizing student groups and encouraging young adults to become active in their community. His efforts have led to a more robust response to the H1N1 flu pandemic and support a strong, well-prepared MRC in Berkshire County.

Mr. Diggs interest in the Medical Reserve Corp stems from a family that values volunteerism. His brother works for Serve DC, an agency working out of the Washington, D.C. Mayor's Office that organizes volunteer programs such as the Medical Reserve Corps. Through his brother's work at Serve DC, Mr. Diggs discovered the Medical Reserve Corps. Mr. Diggs's interest in national security also motivated him to volunteer.



Keon helped promote the Berkshire MRC with fellow volunteers, from left to right, Arthur Dutil, Jay Choone and Beth Van Ness

"Living in D.C. during the 9/11 attacks and the anthrax scare, I've always been interested in working with Homeland Security. Witnessing those events made me want to get involved with the response and try to help people," said Mr. Diggs. The Medical Reserve Corps provided the perfect outlet for Mr. Diggs.

Mr. Diggs has been engaged in a wide variety of activities. He has participated in Train-the-Trainer courses, taught the MRC 101 course, participates in the region's Disaster Animal Response Team (DART), organized a group of Bard College students to volunteer for flu clinics and

*continued on page 4*

## Greater Fall River MRC Partners with Local Boy Scout Troop

This fall, Kieran Murray, a fifteen-year-old Boy Scout, undertook a public service project to connect the preparedness motto of the Boy Scouts of America and the preparedness priorities of the Medical Reserve Corps. To advance to Eagle Scout, Mr. Murray had to develop a project that would engage and benefit his community of Somerset, Massachusetts. With the H1N1 pandemic featured prominently in the media, Mr. Murray reached out to his local public health director and offered his help. The Fall River Health and Human Services Department connected Mr. Murray with the Greater Fall River Medical Reserve Corps's coordinator, Alvin McMahon.

Mr. Murray, Mr. McMahon and local public health staff worked together to develop a community outreach project that would help increase MRC membership and educate the public on the H1N1 flu virus. With the help of his Boy Scout troop, Mr. Murray planned, advertised and staffed a public meeting. The late September meeting served as an information session on the H1N1 virus and vaccination plans for the community as well as an opportunity for the local MRC unit to recruit new volunteers. To increase attendance, Mr. Murray and his fellow scouts distributed flyers at local grocery stores and staffed booths at two major town events, Public Safety Day and the Spirit of Somerset Day. They also reached out to the Somerset



Kieran Murray spoke about the need for MRC volunteers and the importance of getting vaccinated at a September public meeting held by the Greater Fall River MRC.

and Swansea school district superintendents to distribute handouts in the schools.

At the meeting, Mr. Murray delivered a speech on the dangers of the H1N1 flu virus and spoke about the need for volunteers to help staff vaccination clinics. Lisa Crowner, a health educator for the Department of Public Health, discussed the history of influenza pandemics, social distancing techniques to prevent the spread of the virus (such as coughing into your elbow and frequently washing your hands) and the details behind the Department of Public Health's vaccination campaign.

*continued on page 4*

discovered their local unit simply through attending clinics. In Massachusetts, MRC coordinators have seen a total increase of over 2,000 MRC volunteers since last April.

“One of the lessons from this year’s H1N1 response was that every MRC-related activity is an opportunity to continue the cycle of recruitment, education and training,” said Ms. Norbut. “Even when we are deploying our volunteers over the course of a flu season, we still need to run our units.” The added volunteers were critical for communities who needed

more staffing capacity to help run such extensive vaccination campaigns.

MRC volunteers showed incredible commitment as they repeatedly took time out of their schedules to staff clinics. Mr. Coughlin thanked volunteers and coordinators alike: “MRC units across the state were an indispensable part of the H1N1 response,” said Mr. Coughlin. “I cannot express how grateful DPH is for the hard work of MRC volunteers and coordinators alike.”

---

**Volunteer Spotlight**, continued from page 3

delivered presentations on disaster preparedness.

Mr. Diggs emphasized the importance of getting younger people involved in the community. “We have a great opportunity to reach out to these kids and get them involved in community service at an early age,” said Mr. Diggs. “On top of their course load, they find time to volunteer with energy and enthusiasm. I’m really proud of them.”

Mr. Diggs takes satisfaction in his MRC experiences for many reasons. He enjoys the free trainings, the sense of community and networking opportunities. But mostly, he loves the inclusive nature of the MRC program. “A lot of volunteer groups request people with specific skill sets, but

anyone can come as they are and help out their MRC unit,” said Mr. Diggs.

With the H1N1 pandemic beginning to slow down, Mr. Diggs remains proactive. He is in the preliminary stages of coordinating his unit’s relief efforts for Haiti. In addition, Mr. Diggs, a member of his local Community Emergency Response Team, is looking into better integrating the two programs in his area. Finally, Mr. Diggs will continue to recruit and organize Bard College students for the Berkshire County MRC, serving as a role model for future generations of MRC volunteers.

---

**Fall River MRC**, continued from page 3

Michael Coughlin, the state MRC Coordinator and an original founder of the Greater Fall River Medical Reserve Corps, praised the new Eagle Scout, “Kieran’s project is a great example of how a volunteer’s involvement in their community benefits everyone.” Mr. Coughlin thanked the audience members for attending and encouraged them to join the Greater Fall River MRC to assist in the local response to the H1N1 pandemic.

When Mr. McMahon and Mr. Murray had initially set goals for the project, they had hoped for a 10 percent increase in MRC volunteers for the Greater Fall River unit. The event’s resulting recruitment numbers far exceeded such expectations. More than 100 local residents attended the meeting. Sixty attendees filled out applications to join the Fall River MRC. Since the meeting, many of these applicants have already had their applications processed and begun training.

Cheryl Bushnell, the Bristol County MRC Coordinator, recognized Mr. McMahon as one of the driving forces behind the project’s success. “Alvin’s astute ability to recognize opportunities for outreach and recruitment in the community benefitted the MRC in the Greater Fall River Subregion,” said Ms. Bushnell. Mr. McMahon, in turn, acknowledged the hard work of Mr. Murray and his fellow Boy Scouts, “Kieran and his boy scout troop were great to work with. Their efforts made the event a success.”

Mr. McMahon believes this project could serve as a model for other MRC units. He has begun working with other communities within the unit to develop a similar recruitment project. “This is a project that could be done in any city or town,” said Mr. McMahon. “These partnerships make for a better prepared community.”



**For More Information**

or to view a video about Massachusetts MRC units, please visit the website at:  
[www.mamedicalreservecorps.org](http://www.mamedicalreservecorps.org)

For more details, please contact:  
Regan Checchio  
Regina Villa Associates  
51 Franklin Street, Suite 400  
Boston, MA 02110-1310  
Telephone: 617-357-5772  
[rcheccio@mamedicalreservecorps.org](mailto:rcheccio@mamedicalreservecorps.org)

For more information about starting a MRC unit in your community, please contact the Region I (New England) USDHHS MRC Coordinator:  
Jennifer Frenette,  
BS NREMT-I, I/C  
Regional Office:  
JFK Federal Building, Room 2100  
Boston, MA 02203  
Telephone: 617-565-1492  
[jennifer.frenette@hhs.gov](mailto:jennifer.frenette@hhs.gov)

[www.mamedicalreservecorps.org](http://www.mamedicalreservecorps.org)