



Tristate Medical Reserve Corps

Volunteers Building Strong, Healthy, and Prepared Communities

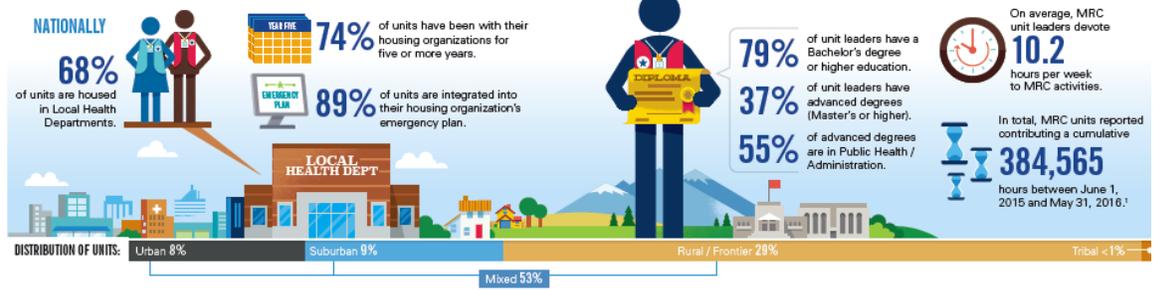
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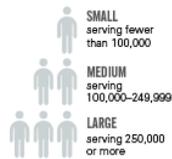
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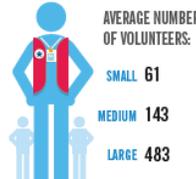
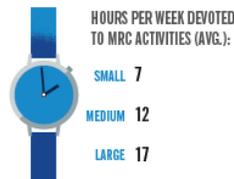
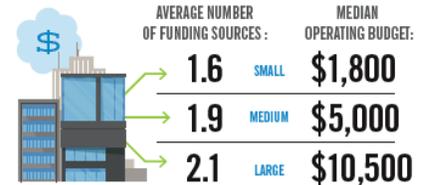
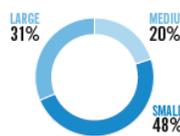
THE 2017 MRC UNIT SNAPSHOT



COMMUNITIES SERVED BY MRC UNITS:



PERCENTAGE OF MRC NETWORK:



2017 Network Profile of the MRC

15 Years of Volunteers Engaging to Meet Community Needs

Every year the National Association of City and County Health Officials (NACCHO) examines how the MRC Network has changed over time. Primarily their goal is to assess how the program has contributed to overall preparedness on a national level. With an overall 82% response rate to the national survey, the results are considered to be a highly accurate reflection of the nation's MRC Network.

A highlight of 2017 includes the reauthorization of the formal Letter of Agreement

between MRC and the American Red Cross outlining the collaboration between the two organizations to better prepare communities to withstand and recover from disasters.

2017 also marked the 15th anniversary of the MRC Network. Created in 2002, after the events of 9/11/2001, MRC marks the anniversary with nearly 200,000 volunteers and almost 1,000 MRC units. The Assistant Secretary for

Preparedness and Response (ASPR) Dr. Robert Kadlec states, "The MRC's work on a daily basis to improve preparedness capabilities, strengthen public health, and promote community outreach helps ensure that communities across America reach and maintain health security in the face of disasters.."

To learn more about the MRC Network after 15 years you may access the profile on the [NACCHO website](#).

For more winter weather preparedness information see the CDC's Winter Weather page.

Avoid, Spot, Treat: Frostbite & Hypothermia

When temperatures drop significantly below normal, staying warm and safe can be a challenge. Serious health problems can result from prolonged exposure to the cold, such as hypothermia and frostbite.

AVOID

Try to stay indoors. If you must go outside, dress properly making sure to protect your nose, ears, toes, cheeks, chin, and fingers. Know

who is most at risk:

- Older adults
- Outdoor workers
- Babies
- Individuals using alcohol and drugs.

SPOT

A victim is often unaware of frostbite because frozen tissue is numb. Signs/ Symptoms include: redness/pain (first sign), white/grayish skin, firm/waxy skin, or numbness. Some hypothermia signs include shivering, exhaustion, confusion,

memory loss, and drowsiness.

TREAT

1. Seek medical attention
2. Get into a warm room
3. Remove any wet clothing
4. Warm under dry layers of blankets and clothing
5. Place frost-bite affected areas in warm-to-touch water

If a person's temperature is below 95 degrees get medical attention immediately!

Public Health Preparedness News



Local health department (LHD) emergency planners have been busy revising and updating their local Emergency Response Plans (ERPs) under the direction of the Ohio Department of Health (ODH) as required in this year's Public Health Emergency Preparedness (PHEP) grant.

Planners at ODH created a planning rubric for LHDs across the state to use as a guidance document in revising their local plans.

These revisions included incorporating additional information on hazards and threats, planning for access and functional needs

populations, outlining response partner's roles and responsibilities, and expanding public health's concept of operations planning.

ODH will evaluate each LHD plan and make recommendations as needed ultimately resulting in adoption of the plan by LHD leadership.

MRC Core Competencies

Competency #7.0:
Demonstrate knowledge of principles and practices for the clinical management of all ages and populations affected by disasters and public health emergencies, in accordance with professional scope of practice.

Disasters can alter the emotional, cognitive, physical, and behavioral health of affected community members.

Some beneficial response methods you can implement in your behavioral health response include providing credible information, being a supportive listener, screening individuals for health effects, and referring those individuals to the

appropriate medical care and services they need.

Psychological First Aid, or PFA, is an effective tool for engaging, comforting, and stabilizing community members in the aftermath of disaster.

Being trained in PFA will help MRC Volunteers respond to survivors' initial reactions and immediate needs, and will enable them to connect

survivors to support systems in place in the community.

In addition, there will be different levels of care needed for various age groups and numerous populations during an emergency. It is important to understand that medical professionals must work within their licensure and scope of practice only after receiving approval from the MRC Unit.

What's New With Flu?

The 2017-2018 flu season is shaping up to be predominated by the influenza A (H3N2) virus and characterized by an early and rapid increase in influenza-like illness. The [CDC reported](#) widespread flu activity in 49 states for the week ending January 6, 2018.

All flu viruses are unpredictable and constantly changing, but H3N2 viruses evolve faster than others, allowing them to better evade immunity. H3N2-predominant seasons are

typically associated with more severe illness and lower vaccine effectiveness.

Still, vaccination remains the first and best way to protect against the flu. The CDC recently reported vaccination prevented 5.3 million flu cases in 2016-2017, another H3N2-predominant season. It's not too late to get vaccinated—flu season may be peaking in January but typically lasts several more months.

New this season, a cell-grown H3N2 reference virus, rather than an egg-grown

reference virus, was used to produce the H3N2 vaccine component. Check out the CDC's [What's New 2017-2018](#) fact sheet for more on this season's flu vaccine.



Mark Your Calendars!

Planning is underway for the 10th Annual Tristate Disaster Volunteer Summit!

This day of disaster training for area disaster volunteers is scheduled for Saturday, **April 28, 2018**.

Attendance is **free** and a continental breakfast and lunch will be provided.

Presentation and training topics include CPR, Psychological First Aid, "Hands-On Stop the Bleed",



Points of Dispensing (PODs), Narcan Distribution, and 2017 Hurricane Response.

More information, including how to register, will be released soon. The Summit will be held at the Receptions Conference Center in Erlanger, KY.

The TMRC Executive Steering Committee looks forward to seeing you at the Summit!

CHCMRC Leadership Team

The Cincinnati-Hamilton County MRC Leadership Team meets the second Tuesday of every month. It is comprised of 35 individuals from various backgrounds including a retired emergency response coordinator, a hospital administrator, several nurses, and many more! The diversity in professional backgrounds is a huge advantage when planning for volunteer events and gauging what trainings we should plan for

the upcoming year.

The leadership group has 5 pathways or focus areas they may pursue; community resilience, functional and access needs, leadership, PODs and volunteer engagement. These pathways were chosen based on our MRC's needs, the needs of the Cincinnati-Hamilton County community and the leadership team's interest. Every third

leadership meeting is a workshop meeting where the team has the opportunity to break into groups and brainstorm what initiatives we can work on and what training opportunities we can offer to support those initiatives.

The CHCMRC leadership team is newly underway and is already making headway in developing a strong MRC unit. Look forward to seeing what we will do in 2018!



Volunteers Building Strong, Healthy and Prepared Communities

MRC COORDINATOR SPOTLIGHT: Kelsie Rudell

Kelsie Rudell graduated from Ball State University in 2015 with a Bachelor's Degree in Environmental Management and with a concentration on Emergency Management. In the summer breaks of college she worked at the Hamilton County Health Department in Indiana as a Pool Inspector. While working at HCHD, she was an MRC volunteer. Now, she is excited to be the MRC coordinator! As well as doing work for MRC she also manages the POD program for Hamilton County. She is looking forward to improving her community and strengthening the volunteer network.



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Northern KY Health Department Responds to Hurricane

Responding to a disaster situation is the ultimate test of a nurse's dedication. After Hurricane Irma, there was a huge need for shelter nurses in Florida. Through the Emergency Management Assistance Compact (EMAC), requests were sent out from the State of Florida to assist and support their shelter operations. Four Northern KY Health Department nurses answered the call and were deployed on September 14th.

This Kentucky Nurse Strike Team had never before been called upon to deploy. After an assignment briefing in Frankfort, they made their way down to Florida.

Throughout their deployment, the nurses worked in four different

“medical needs” shelters located in Orlando, Kissimmee, and Naples. They were warmly welcomed by the exhausted staff.

Duties included addressing medical needs created by missing medical equipment and medications, in addition to providing emotional and psychological support to those affected by the disaster.

Total deployment length for the team was six days at which time they returned home. As in any real event there were after-action analyses conducted evaluating what went right and what could be improved upon for next time.

Kenton County's Health Center Clinic Manager, Tina Prince, said about the experience, “When you are a nurse, you know that every

day you will touch a life or a life will touch yours. I couldn't have asked for a better team coming from NKY Health.”

From Prince's perspective the trip was a success and the team was proud of what they done to help out in Florida.



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