

The Medical Reserve Corps, Public Health, and American Red Cross Partnership Building Blocks

Mary Casey-Lockyer, Medical Reserve Corps

*Sharon A. R. Stanley, Chief Nurse and
Director, Disaster Health and Mental Health Services*

April Wood, Manager, Disaster Health Services, American Red Cross

May 13, 2010



Foundations to Build Upon



April 2, 2009- National Agreement Signed and local MOU Template released



Links to Documents

- Medical Reserve Corps links (public site)
 - http://www.naccho.org/topics/emergency/MRC/resources/upload/Joint_Memo_ARC-MRC-1.pdf
 - http://www.naccho.org/topics/emergency/MRC/resources/upload/mou_local_ARC-MRC-1.pdf
- American Red Cross links (requires user ID)
 - https://crossnet.redcross.org/chapters/services/disasters/Partners/ARC-MRC_JointMemo.pdf
 - https://crossnet.redcross.org/chapters/services/disasters/Partners/ARC-MRC_MOUtemplate.doc



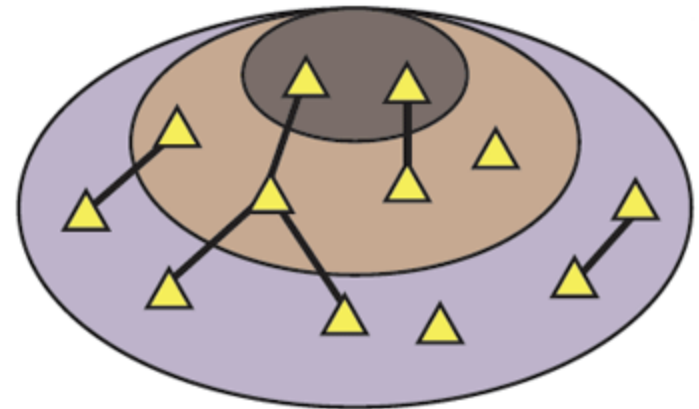
Overall Goal of Project

Seamless integration of MRC and Red Cross for disaster HEALTH assistance in community

(|sēm·ləs 'int·ə'grā·shən)

(computer science) The addition of a routine or program that works smoothly with an existing system and can be activated and used as if it had been built into the system when the system was put together.

Project anatomy.

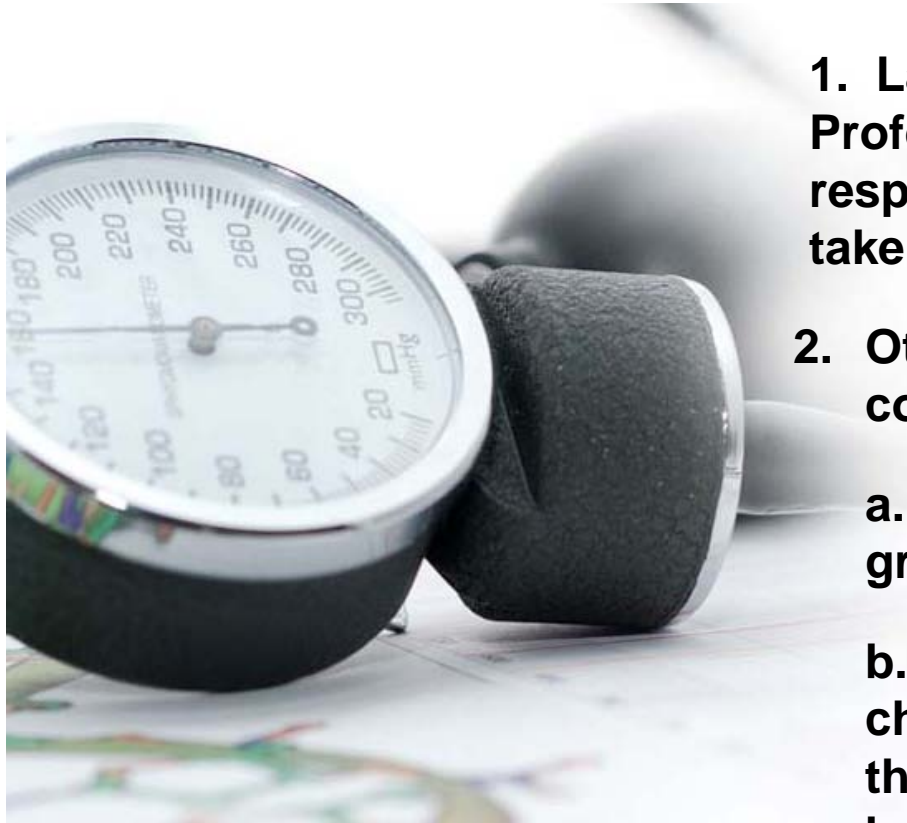


Reasoning Exercise: Post MOU 2010

- Specifically: Given a public health disaster response
 - If MRC can work as ARC;
 - If ARC can work as MRC; and
 - If MRC can work as MRC and ARC can work as ARC;

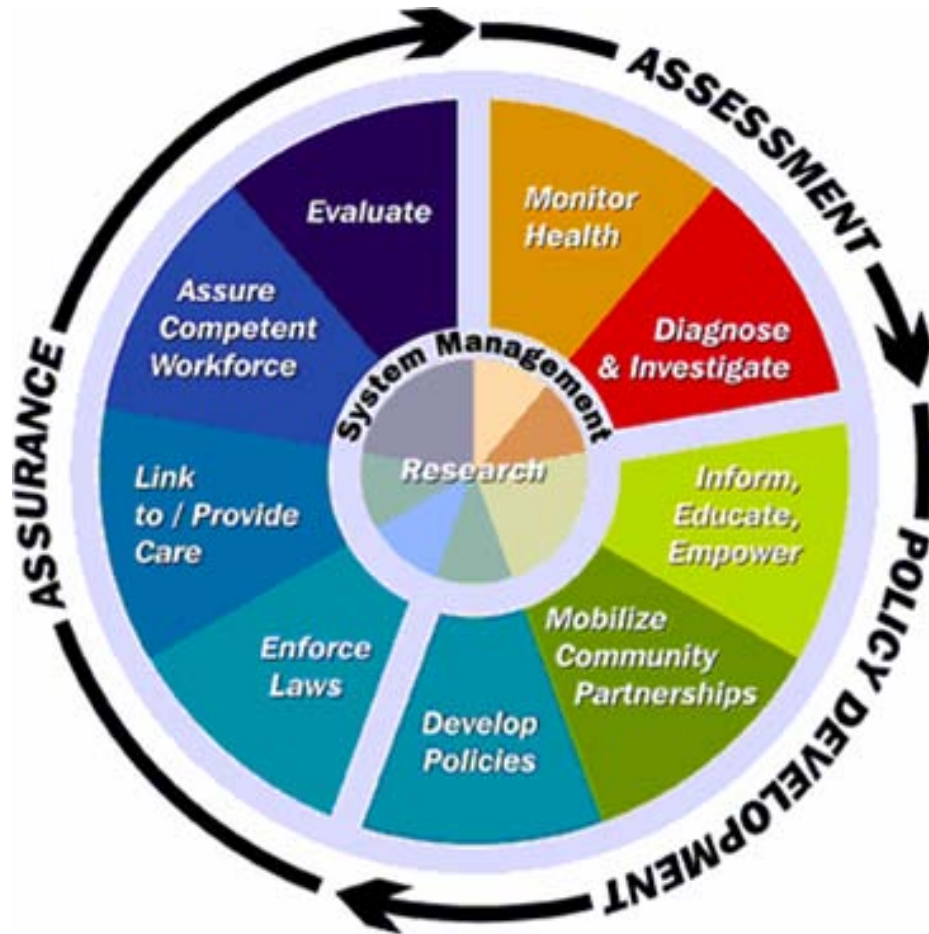
- THEN shouldn't ARC be able to work as ARC IN MRC and public health areas and MRC work as MRC IN ARC areas?

The Answer: Readily Available in 2010 – No. Movement Toward Answers: Yes.



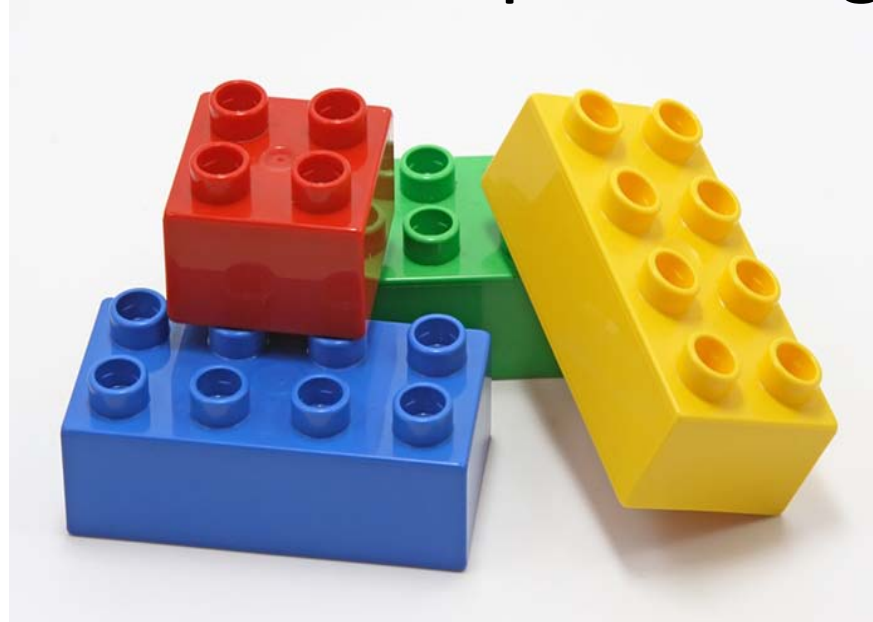
1. **Largest Factor seems to be: Professional Liability and what the respective system is (is not) willing to take on**
2. **Other impediments are less system controlled:**
 - a. **Turf issues: e.g., an individual or group mindset change**
 - b. **Procedures/processes that can be changed or at least controlled through pre-understanding: e.g., background checks**

Last Word on Public Health Fit



- Shelter populations are communities
- Disaster affected populations are an at-risk community
- Shelter and temporary living conditions provide communicable disease challenges

The Medical Reserve Corps and American Red Cross Partnership Building Blocks



Building Blocks

- Getting Started
- Reaching Out
- Breaking Down Silos



Red Cross and Medical Reserve Corps FAQs

- Questions and answers from both volunteer groups.
- Asset for planning together.
- Available on :

<http://www.medicalreservecorps.gov/HomePage>

and

<https://crossnet.redcross.org/index.asp>



Thorny issues



- Liability
- Background Checks
- Scope of Practice

Linkages

- **Cross-training**

Incident Command

Ready RN

Psychological First Aid

- **Exercise Together**



Local Partnerships

Disaster Response

- Sheltering
- Outreach
- Public Health Education



Local Partnerships – San Luis Obispo



American Red Cross
San Luis Obispo County Chapter



Public Health
Prevent. Promote. Protect.



American Red Cross

Local Partnerships



The H1N1 vaccination campaign included public health, MRC units and ARC chapters all over the country.

Finding the Key

- Get to know each other's assets and capabilities BEFORE the event
- Encountering open, cracked, or locked doors



Entering



- Why are the differences important?
 - Licensure
 - Liability
 - Training
 - Experience

Building the Bridge



- Local- Points of Dispensing, Mass Vaccination, Sheltering
- State- Planning
- Federal- Deployment to a large scale disaster
- Cross-training
- Joint exercises

Endless Opportunities

- Forging lasting partnerships
- Improving the health of our communities
- Making a difference



Questions About Training and Working Together???

