



The Pulse



Official Newsletter of the Maryland Responds Medical Reserve Corps

SPECIAL EDITION

DECEMBER 2014

INSIDE THIS ISSUE:

| | |
|---------------------------|------|
| Program Updates | 1 |
| Highlights from the Field | 2-4 |
| Responder Resources | 5 |
| Special Edition | 6-11 |
| Membership Counts | 12 |

Are you ready to deploy?
 Check your eligibility status here:
bit.ly/MDRMRCDeploy

The Pulse is brought to you by the Maryland Responds MRC State Program, Maryland Department of Health and Mental Hygiene, Office of Preparedness and Response.



Maryland Responders Shine at the Star Spangled Spectacular

From September 9-16, 2014, the City of Baltimore hosted the Star-Spangled Spectacular, a celebration of the 200th anniversary of the end of the War of 1812 and the penning of our national anthem. This was the largest and most complex planned special event in Maryland's history, drawing over an estimated 1.5 million visitors to the area, as well as over 800 dignitaries. Local, state, federal and the organizing committee spent the last two years planning for this historical event.

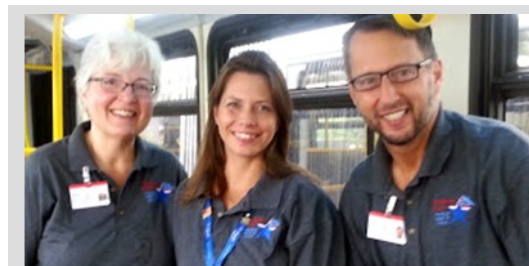
During this time, a multitude of events took place throughout the city, with focal points along the Inner Harbor and at Fort McHenry. Twenty Maryland Responders worked with the Baltimore City Fire Department (BCFD) Emergency Medical Services Division to run two first aid stations at the Baltimore Inner Harbor. At the start of their shift, volunteers were greeted by MDR staff and briefed by the BCFD Paramedics. Then, volunteer nurses, physician assistants, and physicians worked with the BCFD to provide triage, stabilization, treatment and disposition services to event attendees.

Behind the scenes, 21 medical and 9 mental health volunteers were on standby to deploy to one of four state shelter operations in the event of a mass evacuation. Thankfully, no disasters took place.

Double National Communications Awards

Contributed by Sara Luell, OP&R Public Information Officer.

The Maryland Responds MRC recently earned two nationally-recognized awards. Over 250 entries were received by the National Public Health Information Coalition. Our newsletter received a Silver Medal in the newsletter category (<http://www.nphic.org/awards-print-newsletters-winners>). The Maryland Responds Online Orientation Course received a Gold Medal in the Webcasts/Podcasts/Web-based training category: (<http://www.nphic.org/awards-internet-webcasts-winners>). Have you taken the online orientation yet? If not, find instructions for how to do so, here: <http://bit.ly/MDRonline-ori>.



Volunteers Teresa Laporte, RN, Murphrey Knox, RN, and Jonathan Ringo, MD, on their way to staff the first aid station.



Our shelter health station supply kits were stocked and ready to be deployed to shelters.

Thank you to the 50 dedicated nurses, physicians, physician assistants, EMTs and mental health volunteers who participated in the 2014 Star Spangled Spectacular. Your efforts are very much noticed and, most of all, appreciated! Your generous contribution of time and energy greatly enhanced the state's ability to ensure the safety of all residents and visitors to the Baltimore region during the event. To see the full slide show, visit: <http://bit.ly/mdrSSS14>.

Maryland Responds Advisory Council—Formed and In Action!

In an effort to strengthen the Maryland Responds MRC (MDRMRC) Network and to further engage volunteers and stakeholders, the Maryland Responds Advisory Council was established in September 2014.



An astounding 76 applications were received for the 2014-2015 application cycle. Appointed members were selected based on factors such as, but not limited to, match in council activities and applicant interests and diversity of backgrounds represented.

Our 2014-2015 Council members will provide guidance to the MRC state program on how to make the MDRMRC Network stronger. Volunteer Laura Ebner, M.D., captures the vision of Council members, “I see so many areas for positive change and have the drive and determination to build the Maryland Responds MRC.” This perspective is motivated by experiences like that of Jennie Wallace’s, “After volunteering during Katrina, I hope to help recruit and train new volunteers for what is needed.”

Diverse experiences are reflected by the Advisory Council. While Anne Denicoff’s background is in hospitals and private practice, Connie Kline’s is in non-

profit federally qualified health centers. While some represent urban areas, others, like Kelly Brinkley, see the Council as, “an opportunity for the Eastern Shore of Maryland to have representation on a state-wide organization.”

Members of the Advisory Council are also well equipped to provide strategic guidance to the Maryland Responds MRC state program. While Connie hopes to increase awareness in the community, Martha Bartz wants to enhance the training curriculum, and Kelly looks to developing methods for engaging volunteers.

Join us in welcoming this dedicated team: Martha Bartz, Kelly Brinkley, Deborah Cantey, Anne Denicoff, Laura Ebner, Chas Eby, Tasha Henderson, Connie Kline, Jennie Wallace, and Dean King. Thank you for your dedicated service!

Visit the links below to learn more about the MDRMRC Advisory Council:

Maryland Responds MRC Advisory Council Bylaws
bit.ly/mdracBylaws

Advisory Council Organizational Chart
bit.ly/mdracOrgChart

Maryland’s Response to Ebola

Beginning late October, Maryland has been monitoring the health of all returning travelers from the countries of Liberia, Sierra Leone, Guinea, and most recently Mali, which are battling a serious Ebola outbreak. In his press release on October 27, 2014, Governor O’Malley stated, “We are monitoring comprehensively, and if someone does fall ill with Ebola, we have a plan in place to identify the condition, isolate the patient, provide care safely, and contain the spread of infection.” Read the full press release here: <http://1.usa.gov/1svf2YY>.

The Maryland Department of Health and Mental Hygiene makes contact with travelers through a new outbound call center and provides specific guidance, information, and 24-hour numbers for assistance. Monitoring occurs until 21 days following the last possible exposure when illness might develop. “Every day, public health workers in Maryland reach out to patients with such diseases as tuberculosis and meningitis,” said Dr. Joshua M. Sharfstein, Secretary of the Department of Health and Mental Hygiene. “Our plan for Ebola builds upon the strong and proven foundation.”

How does this impact the Maryland Responds MRC? Currently, the state administrators are among the supervisors of the call center operations. As this response will be ongoing into the new year, Maryland Responders may be activated for call center support. If you would be interested in this great public health experience, stay tuned to your email for the activation notification and take this time to make sure you are eligible for deployment: bit.ly/MDRMRCDeploy. To learn about the current Ebola situation in Maryland, visit <http://dhmh.maryland.gov/ebola>. For more Ebola information, visit: <http://www.cdc.gov/vhf/ebola/>.



Volunteers Help School-Aged Children with Immunizations

Contributed by Maggie Kunz, M.P.H., Carroll County Health Department, Carroll County Unit Administrator.

On August 2, 2014, the Carroll County Health Department held two mass vaccination clinics to provide free immunizations for children entering kindergarten and 7th grade.

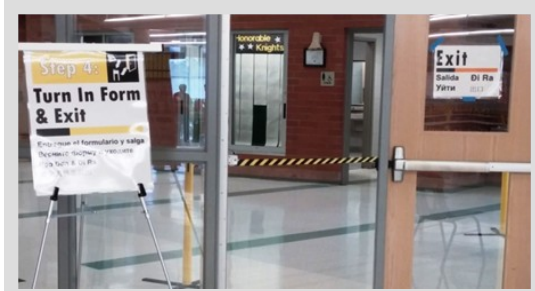
New state regulations require these children to receive additional vaccines or boosters: incoming kindergarteners need a second dose of varicella (chicken pox) vaccine, and incoming 7th graders require a dose of meningococcal vaccine and a Tdap booster.

Six volunteers helped staff the clinics, gave shots, and met public health staff. “The Health Department decided to use these two clinics as a chance to exercise our mass vaccination plan,” said Tierney Youngling, Community Health Nurse Program Supervisor, Public Health Preparedness and Response program.

“We invited Maryland Responders to participate, because when a survey went out last fall, our volunteers said they wanted to participate in exercises,” said Cheryl Webb, Carroll County’s Unit Administrator.

“It was a great success. We gave 111 vaccinations. We appreciated having Maryland Responders to

work alongside our staff. We will include them whenever we can in our exercises and outreach events.”



Signage at the end of the mass vaccination clinic process.

Volunteers from many other counties also helped with school immunization vaccinations this year. Thank you to Anne Arundel, Howard and Washington County Maryland Responders for your contribution and time donated to assist local health departments deliver school immunizations. Students throughout Maryland are more prepared for this school year because of volunteers like you!

Baltimore County Super Saturday V: Mass Flu Vaccinations

Contributed by Terry Sapp, E.M.T., C.H.E.P., Baltimore County Health Department, Baltimore County Unit Administrator.

Early in October 2014, volunteers in Baltimore County received an activation notification from their unit administrator, Terry Sapp, asking for volunteers to help administer flu vaccinations or fill syringes. They would play an integral role supporting the Super Saturday event, the fifth annual mass vaccination operation.

Seven Maryland Responders gathered together one week prior to the event for an hour long training to prepare them to administer flu vaccinations via IM injection and intra-nasal mist.

On the day of Super Saturday V, the volunteers reported to seven different points of dispensing locations throughout Baltimore County. As described by Terry, “Everyone did a fantastic job -- and we received many compliments from the public and from our staff as well, who were very appreciative to have your help.” Maryland Responders and health department staff worked together to provide **3,654** flu vaccinations across the county! Thank you Baltimore County Maryland Responders for a job well done!



Howard County Prepares for Nuclear Terrorism

Contributed by the Howard County Community Emergency Response Network (CERN).

A nuclear terrorist attack in Washington, D.C., is classified as a low probability but a high impact event. The threat level for this type of catastrophe may be increasing.

The Howard County Community Emergency Response Network (CERN) was awarded a Federal Emergency Management Agency grant to fund two projects on regional impacts of nuclear bomb detonation in Washington, D.C. The first project, culminating in March 2013, brought experts from across the nation to discuss the threat of such an attack and to consider strategies to coordinate mitigation efforts from northern Virginia to Baltimore.

The second project examined (1) how to assess which buildings in a local county or city afford the “best” fallout protection and (2) how to protect children who are in school during this type of emergency. The project included a statewide meeting involving non-profit, government, business and military representatives.

“The science around survival on the heels of a terrorist nuclear strike has improved in recent years,” says Dr. Richard Krieg, former Chicago Commissioner of



Public Health and past Chairman of Howard County CERN, who served as principal investigator on both projects. “Our efforts in Howard County are intended to improve the resilience of local residents were this type of catastrophe to occur.”

“It has been gratifying to see that the community, first responders and public school officials have actively engaged this issue and are incorporating it in their all hazards planning,” says Dr. Krieg. “Beyond CDC efforts in Atlanta and work being done in Ventura County, California, few localities have grappled with survival strategies related to nuclear terrorism.”

For additional information on preparing for a nuclear attack, visit: <http://bit.ly/1sNi901>.

Expanding Language Access to Preparedness Information

Contributed by Sara Luell, OP&R Public Information Officer.

One barrier to staying safe during emergencies is limited access to information on how best to prepare for or respond to a disaster. This barrier is exasperated when a person’s primary language is not English.

Be Prepared - Other Languages

- Chinese - Traditional (中文)
- English
- French (Français)
- Haitian-Creole (Kreyòl Ayisyen)
- Korean (한국어)
- Russian (Русский)
- Spanish (Español)
- Tagalog
- Vietnamese (Tiếng Việt)

To fill this gap, the Office of Preparedness and Response (OP&R) developed fact sheets to help people learn about emergency preparedness. Some topics include emergency supply kit checklist, cold weather health issues, cooking without power, and pandemic and seasonal flu.

To ensure equal access to this vital information, OP&R had the fact sheets translated into 8 major languages in Maryland: Chinese, French, Haitian-Creole, Korean, Russian, Spanish, Tagalog and Vietnamese.

This month, the Resilience Committee within the Maryland Responds MRC Advisory Council discussed strategies to increase awareness of these resources. Help us disseminate emergency preparedness information to the community by sharing these fact sheets which can be accessed here:

<http://preparedness.dhmh.maryland.gov/SitePages/Be%20Prepared.aspx>.

Prepare Your Home for Winter Storms & Extreme Cold

Source: FEMA Individual and Community Preparedness e-Brief, December 11, 2014.

Just as you would add winter care items to your emergency kit to prepare for the upcoming season, your home can also use a winter makeover. Properly preparing your home for cold temperatures can keep you safe and warm, and lower your energy costs. Here are a few tips to follow as the mercury plunges:



- Run ceiling fans in reverse to help circulate warm air that gathers near the ceiling.
- Replace your furnace filter every two months.
- Make sure gutters and downspouts are clean and that water drains at least six feet from your home's foundation.
- Keep fire extinguishers on hand, and make sure everyone in your house knows how to use them. House fires pose an additional risk, as more people turn to alternate sources to heat their home.

- Hire a contractor to check the structural ability of your roof to sustain unusually heavy weight from the accumulation of snow or ice.

Get in the energy saving spirit by conducting a home energy assessment. See how much energy your home consumes and evaluate what measures you can take to make your home more energy efficient. Then,

check out "12 Days of Energy Savings" from the U.S. Department of Energy to learn how to stay warm while saving money this winter.

After you prepare your home for winter weather, visit America's PrepareAthon! for ways to prepare your family!

This is also a good time for you to review your family emergency communications plan and update your emergency supply kits for homes and vehicles. Visit <http://1.usa.gov/1iQWtwa> for more information .

Give the Gift of Preparedness

Contributed by Ginger Cooper, Public Health Emergency Planner, Anne Arundel Count Health Department, Anne Arundel County Unit Administrator.

Last holiday season was a rare treat for Ginger. Her three sons, all in their twenties, were home celebrating the holidays. Leading up to the day, Ginger thought long and hard about what special present she wanted to give her boys. And then a light bulb went off! It was practical. It was loaded. It was brilliant. She ran from store to store to gather supplies for this special present.

Early one crisp morning, her sons flew down the stairs towards three large, beautifully packaged gifts. Like school children, the grown men tore off the wrapping paper. They gasped. Their eye brows furrowed at their special present. One young man let out, "Mom... is this... an...an..." And another son completed, "...emergency supply kit??? Really?"

"Boys, this is because I care. You never know when an emergency will strike, and now, I can rest comfortably knowing that you have what you need to get through an emergency," Ginger replied.

As we enter this holiday season, consider gifting your family and friends with peace of mind during an emergency. Emergency supply kits are not difficult to assemble, and can be tailored to each person's lifestyle and needs. For a sample list of emergency supply items, visit FEMA here: <http://www.ready.gov/build-a-kit>.



Reflecting On Our Past to Build A Stronger Future

When we work together to help those in need, we can truly make a difference. That is the power of volunteering — it connects people from all walks of life, in small towns, in big cities and everywhere in between.



November 24, 2014 marked the Maryland Responds MRC's 10 year anniversary! In honor of this milestone, we have dedicated this section to taking a look back at what we have accomplished and to recognize the contributions of our members who are committed to helping their community prepare for and respond to emergencies. We hope you enjoy this Special Edition of the Pulse Newsletter that highlights the great work being done by our members in the name of teamwork, innovation and community service.

A Timeline of the Maryland Responds Medical Reserve Corps (MDRMRC)

2004 The Maryland Department of Health and Mental Hygiene established a group of health volunteers called the Maryland Professional Volunteer Corps.



KATRINA
11,016 HOURS

2005 Deployed 165 medical and mental health volunteers to Louisiana in response to Hurricane Katrina to operated 6 clinics in which over 6,200 patients received treatment. The total volunteer hours contributed during this event were approximately 11,016 hours.

2009 Transitioned to an online volunteer management system, the MDResponds Volunteer Registry.



IRENE
384 HOURS

2011 A total of 3 state shelters were activated from August 25th to August 28th. The MDRMRC deployed 32 medical and mental health volunteers to staff 3 state shelters in response to Hurricane Irene and its aftermath. The total volunteer hours contributed during this event were approximately 384 hours.

2012 The County Maryland Responds Unit Initiative re-organized volunteers by counties.



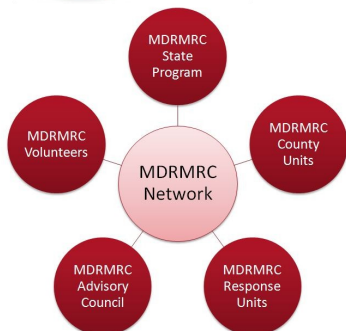
SANDY
540 HOURS

2012 Deployed 45 medical and mental health volunteers to staff 4 state shelters in response to Hurricane Sandy and its aftermath. The total volunteer hours contributed during this event were approximately 540 hours.

2013 Published the MDR MRC Online Orientation Course.



2014 Established the MDRMRC Network.



2014 The MDRMRC Celebrates 10 years of service!



A timeline of the Medical Reserve Corps



2002 The office of the Surgeon General announces a demonstration project to establish the Medical Reserve Corps (MRC), a program for medical, public health, and other volunteers interested in local health and preparedness.

2002-2006

166 communities were chosen as a part of the demonstration project.



2005 Following Hurricanes Katrina and Rita, over 6,000 MRC Units supported the response and recovery efforts. These volunteers spent countless hours helping people whose lives had been upended by these disastrous events.



2006 The MRC Program Office joins forces with NACCHO through a cooperative agreement to promote, support, and build capacity within the MRC network.



2006 The MRC reaches 500 units nationwide, including all 50 states, Washington DC, Guam, Palau, Puerto Rico, and the U.S. Virgin Islands.



The MRC network brings individuals from all backgrounds, skills and experiences to strengthen communities and build resilience in the people and Places it reaches. Unit leaders screen, conduct credential and background checks, and train all volunteers prior to any community disaster so volunteers are able to answer the call when needed. Time and time again, units and volunteers assist communities in need of emergency help within and beyond their geographic borders.

Since its inception in 2002, the integration of the MRC into local public health, emergency management planning, and disaster response has contributed to a healthier and more resilient nation for all.



2008 More than 1,500 MRC volunteers from 63 MRC Units across 14 states volunteered over 30,000 hours in response to Ike and Gustav and Tropical Storm Hanna.

2006 Congress Passed the Pandemic and All-Hazards Preparedness Act (PAHPA), which formally authorized the MRC network to support emergency response at all levels.



2009 Pandemic flu preparedness plans were called into action for MRC units during the H1N1 influenza outbreak. Nearly 50,000 MRC volunteers in 600 units served in over 2,500 immunizations, flu prevention, and flu care activities related to H1N1.



2009 The MRC and American Red Cross issue a joint letter to improve coordination and cooperation between their organizations in order to better prepare and protect communities.



2010 The number of MRC Volunteers reached 200,000.



2012 In response to the West Nile Virus outbreak, 22 MRC units participated in education campaigns and vector control efforts, serving more than 60,000 people in the Southwest United States.



2013 Congress passed the Pandemic and All-Hazards Preparedness Reauthorization Act (PAHPRA), which continued the authorization for the MRC, but moved authority and responsibility of the program to the Assistant Secretary for Preparedness and Response (ASPR). A Memorandum of Understanding allows for continuation of operations within OSG and strategic oversight by ASPR.



2012 The Waldo Canyon Fire, the most destructive in Colorado history, burned for a month in late June 2012. The Medical Reserve Corps of El Paso County, Colo. Responded by donating 1,644 hours of volunteer services.

2012 The MRC celebrates 10 years of supporting public health and emergency preparedness activities across the country.



This information was prepared by NACCHO.

Maryland Responds to Hurricane Katrina

On August 29, 2005, Hurricane Katrina hit the Gulf Coast states, which was followed by a levee break at Lake Pontchartrain. This caused the largest natural disaster this country has sustained. Over 1.5 million people were left homeless.



Louisiana requested resources from Maryland through the Emergency Management Assistance Compact (e.g., personnel, equipment, supplies). The Maryland Department of Health and Mental Hygiene partnered with the MD Defense Force and American Red Cross to deploy 165 medical and mental health volunteers to Louisiana. Together, these volunteer physicians, nurses, pharmacists, social workers, and behavioral health professionals operated 6 clinics in which over 6,200 patients received treatment.

Maryland Responder, Susan Futeral, L.C.S.W.-C, PhD, recounts her initial reaction upon first hearing of the devastation caused by Katrina: “The images on TV were haunting and I felt the need to do something.” Susan was one of the many brave and dedicated volunteers who deployed on the Katrina Mission. “I left work, my family, my animals, and my clients and my regular life,” said Susan. “Maybe it’s just helping others, helping God, or having a social conscience, but I felt that I could not live with myself if I did not do something! I believe this is what we do, what we are trained to do.”

To read a full account of Susan's deployment experience, visit: <http://bit.ly/MDRroles-MHI>.



Volunteer Response to Lebanon Repatriation

Contributed by Cathy O'Neill, OP&R Emergency Operations Specialist.

In Spring 2006, Hezbollah was at war with Israel, resulting in a destabilization of Lebanon. Given an evacuation order, U.S. citizens were loaded onto flights for the U.S. Four points of entry to our country were established and the respective states notified (Maryland, Georgia, Pennsylvania, and New Jersey).

The Department of Human Resources, the lead agency, tasked us with providing mental health services to those stepping off the plane. DHMH quickly sent an activation notification to volunteers. Shoulder to shoulder with DHMH staff, volunteer nurses, physicians, and mental health practitioners filled “on-call” shifts to greet incoming flights.

We assessed and triaged. We even gave coloring books and stuffed animals to children and health education fact sheets to adults. Anyone who needed additional intervention was provided a list of resources.

After 10 days and 19 flights, over 5,050 people repatriated through BWI Airport. Maryland was the only point of entry that did not request additional assistance from the federal government. Without our volunteers, we would not have been able to accomplish such a feat.



A Multi-Pronged Approach to



Contributed by Chas Eby, M.A., Branch Manager, MD Emergency Management Agency, Baltimore City unit volunteer.

In May 2009, Governor Martin O'Malley declared a state of Emergency in Maryland. A new strain of Type A (H1N1) influenza had been identified in North America, including in the United States. Commonly referred to as "Swine Flu," H1N1 symptoms in humans include fever, cough, sore throat, runny or stuffy nose, aches, chills, and fatigue. For over one year, emergency responders, including many Maryland Responders, worked hard to protect the public's health.



At first, call centers were opened and staffed by Maryland Responders who received just in time training to prepare for commonly asked questions. From 9 to 5, shifts of Responders took calls about H1N1 and provided health education over the phone to the community.

Maryland also tapped into the Strategic National Stockpile. Nearly 2.5 million courses of antiviral medications were received by Maryland. OP&R took responsibility in receiving and distributing these antivirals to pharmacy and health center sites that dispensed them.

By Fall 2009, mass vaccination clinics opened. Maryland Responders helped local health departments vaccinate the community. Alongside health department staff, some volunteers helped with administrative tasks, like line control and registration. Others vaccinated our high priority populations.

H1N1 response efforts lasted well over one year. During this time, many partners came together to help prevent the spread of illness and care for the sick. Today, flu.gov considers H1N1 a seasonal flu virus.

Why Maryland Responders Volunteer

On our travels throughout the State, we asked Maryland Responders why they chose to volunteer. Read the testimonials below (continued on the next page) for their inspirational answers to this question.



It has been one of the most rewarding things I have done in my 42 years as a nurse and it will keep me active in my retirement.

**-Kathleen Vito,
Advanced Practice Nurse**



As a professional who works primarily with individuals and families, I wanted to provide support on a greater level, as well as during emergencies and disasters.

**-Rebecca Bergeron,
Social Worker**



I want to help on a larger scale.

**- Ana Gamero,
Pharmacist**



As a Red Cross nurse, participation with Maryland Responds helps me maintain training and collaborative partnerships.

**-Phillip Bovender,
Registered Nurse**

Why Maryland Responders Volunteer (con'd)



To help neighbors near and far. I want to give, because I hope someone will be there if my family needs help.

**-Betty Smith,
Registered Nurse**



Community service; familiarize with other medical professions in case of emergency.

**-Jane Teichner,
Veterinarian**



Keep me connected, mentally prepared, and my skills polished to work with vulnerable populations.

**-Toni Gilstrop-Claiborne,
Registered Nurse**



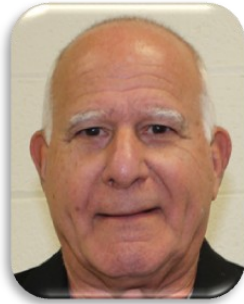
I volunteer to learn the tools and perspectives to be competently trained to respond to public health emergencies.

**-Chad Morris, MPH
candidate and Pharmacist**



To use my expertise to help and serve people who are in need.

**-Eugenia Caternor,
Nurse Practitioner**



Because I should.

**-Phillip Weiner,
Pharmacist**



Opportunity to fulfill the mission of my profession.

**-Sharon Wilson,
Pharmacist**



My passion is to serve others.

**-Tandra Chisolm,
Social Worker**



To give back to the community just for the sake of helping someone in need of help.

**-Anthony Gesualdo,
Pharmacist**

To help by contributing my skills as a social worker to those in need of the services in emergencies as a way of giving back to my community
-Ibiyinka Kolawole, Social Worker

To aid with the assistance of individuals who are at high risk of hurt, harm, and hazard.
-Kristin Young, Professional Counselor

In an emergency, I want to be part of the solution, not the problem.
-Julia Frank, Psychiatrist

Looking Forward: What's Next for Maryland Responds

Contributed by Stephanie Parsons, M.S.P.H., State MRC/ ESAR-VHP Coordinator.

Maryland Responds has a lot to celebrate these days! In November we celebrated our 10th anniversary of promoting and protecting the health of our communities. We also launched the Maryland Responds Medical Reserve Corps Network (MDRMRC) with the intent of building a strong and collaborative network of MDRMRC Units serving all jurisdictions in Maryland.

What we have accomplished in the past ten years is remarkable, and the direction we are moving in promises another ten years of growth and transformation. I am proud of our achievements, the accolades our program has received, our award winning Newsletter and Online Orientation Course and the live trainings we offer. However, what I am most proud of is the positive impact Maryland Responders and our Unit Administrators have on their communities.

Maryland Responders donate their time, energy, experience and expertise to keep our communities safe. They give of themselves both day and night, during hurricanes and tropical storms. From providing first aid to patients at state shelters to assisting with sectional flu clinics, Maryland Responders are ready and willing to respond when called upon.

MDRMRC Unit Administrators are committed identifying local volunteer opportunities that prepare Maryland Responders for responding to local emergencies. Unit Administrators, both at the State and County Programs, are constantly seeking new strategies to develop meaningful initiatives that support community medical and public health volunteerism and service.

As an organization we have never stopped evolving, responding not only to emergencies but also to the ever changing public health needs of our communities. Our vision for the future is to build a strong and collaborative network of MDRMRC Units in every county in Maryland that builds resilient communities and reduces the impact of disasters for Maryland residents.

It is in the spirit of our continued evolution and growth that I am pleased to announce that the Maryland Responds MRC Network Strategic Action Plan will be published by the end of the first quarter. We initiated the strategic action planning process to identify the strategies necessary

Stephanie Parsons being interviewed on the MRC Challenge Award at the 2013 NACCHO conference.



to achieving our vision and to guide the direction of the MDRMRC Network for the years 2015 – 2017.

The Plan will outline five broad goals we have identified to focus on over the next three years:

1. Develop and support MDRMRC Units and Unit Administrators.
2. Administer and maintain the *MDResponds* Volunteer Registry (ESAR-VHP).
3. Supplement local training and exercise plans.
4. Supplement local recruitment and retention efforts.
5. Increase the representation and sustainability of the MDRMRC Network.

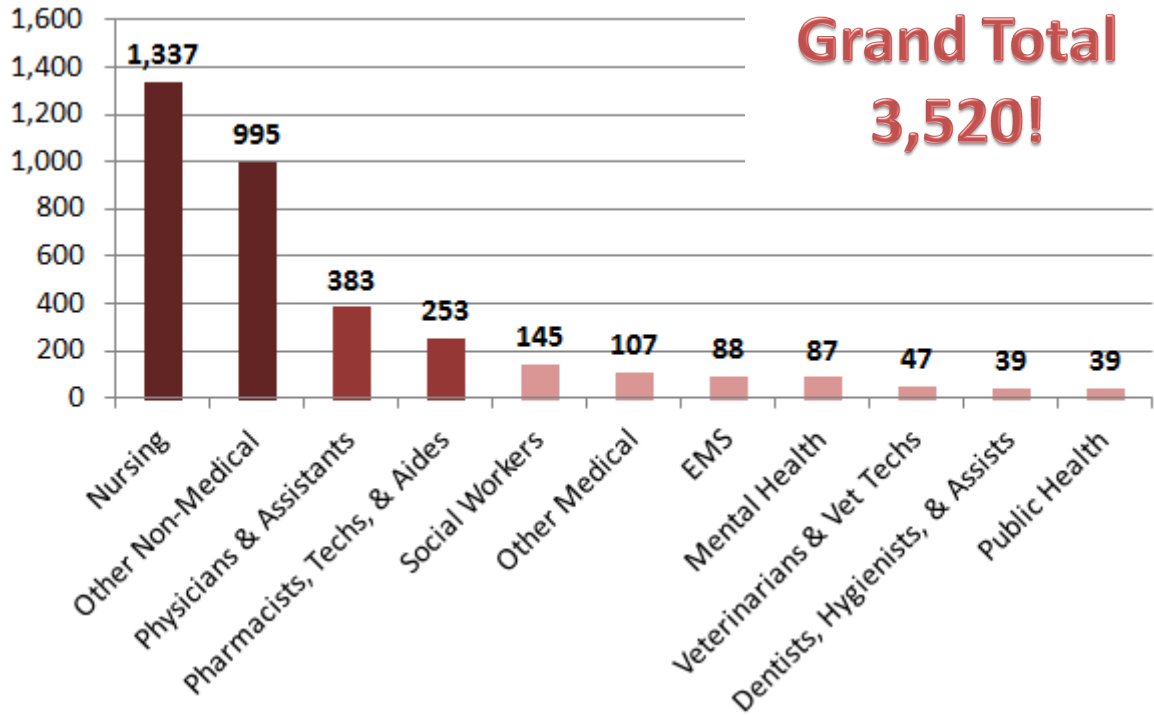
To sharpen the focus of these goals, the Plan will define objectives and strategies for achieving each goal. The Plan is currently being reviewed by the MDRMRC Advisory Council, and, upon gaining their approval, will be disseminated to all of our members and stakeholders.

As State Coordinator of the Maryland Responds MRC, I am truly humbled by the selfless dedication inherent to our members. Maryland Responders, you inspire and motivate me every day.

As we take this giant leap into the next ten years we do so together knowing our work is necessary and critical to the lives of the people we help and in the communities we serve. I look forward to maintaining the momentum of the Maryland Responds MRC Network and its dedicated Responders, Unit Administrators and stakeholders.

YOU COUNT! Membership Totals as of 12-21-14

Maryland Responders by Professional Group



Maryland Responders by County Unit

| County | Percent of Total Membership | County | Percent of Total Membership |
|----------------|-----------------------------|----------------|-----------------------------|
| Allegany | 2.26% | Harford | 4.28% |
| Anne Arundel | 8.00% | Howard | 6.92% |
| Baltimore | 15.79% | Kent | 1.80% |
| Baltimore City | 9.03% | Montgomery | 16.50% |
| Calvert | 1.36% | Prince Georges | 9.40% |
| Caroline | 0.56% | Queen Annes | 1.64% |
| Carroll | 2.95% | Saint Mary's | 0.90% |
| Cecil | 1.40% | Somerset | 1.52% |
| Charles | 1.40% | Talbot | 2.42% |
| Dorchester | 1.05% | Washington | 2.33% |
| Frederick | 4.65% | Wicomico | 2.39% |
| Garrett | 0.59% | Worcester | 0.87% |

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<http://bit.ly/MDRlinkedin>

Feedback

What can we do better?
 Do you have any suggestions?
 E-mail us at:
Mdresponds.dhnh@maryland.gov