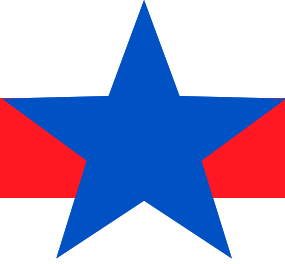


# Medical Reserve Corps (MRC)



# 2021 Deployment Readiness Guide





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# MRC Deployment Readiness

## Glossary of Terms & Acronyms

The following terms are referenced throughout the *MRC Deployment Readiness Guide*:

Term	Definition
<b>Activation</b>	MRC activation is the unit-specific process for a unit to notify volunteers of an event and the unit's response roles, including personnel and resources for public health activities and emergency operations.
<b>Demobilization</b>	The process of winding down a response, including tracking volunteers and equipment, and addressing responder needs and experiences after a deployment.
<b>Deployment</b>	The deployment phase starts after an emergency occurs, includes steps to activate volunteers and prepare them for an identified response mission, and identifies responsibilities during a deployment.
<b>Event</b>	A planned, non-emergency activity. The incident command system (ICS) can be used as the management system for events to practice and reinforce response plans. Event planning usually includes contingency plans that might occur during the event.
<b>Hot Wash</b>	A facilitated discussion that is held immediately following an exercise, planned event, or emergency response and should include participants from each functional area. The hot wash is an opportunity for participants to share opinions of the exercise. It is designed to capture feedback about any issues, concerns, or proposed improvements participants may have. This facilitated meeting allows players to participate in a self-assessment and provides a general assessment of how the jurisdiction performed.
<b>Incident</b>	An actual or impending hazard, caused by humans or by natural phenomena, requiring action by emergency personnel to prevent or minimize loss of life or damage to property and/or natural resources.
<b>Local vs. Non-Local Response</b>	Local responses are managed through the jurisdiction's emergency management agency in accordance with local emergency response plans. MRC Volunteers may be called upon to help support their local response plans. In some cases, MRC Volunteers may be asked to support an emergency response outside of their local jurisdiction as part of a mutual aid agreement or through the Emergency Management Assistance Compact (EMAC) system.
<b>Mission Set</b>	The term 'Mission Set' is used to describe a scalable response and recovery capability for MRC units and volunteers that is organized, developed, trained, and exercised prior to an emergency or disaster.
<b>MRC Volunteer Deployment</b>	The process by which MRC volunteers receive training, are assigned a job assignment, and support incident response activities within the ICS structure on behalf of their MRC unit. Deployments can be local, intrastate, or interstate functions.
<b>Post-Deployment</b>	The post-deployment phase begins once a deployment mission has been completed and includes activities to close out assigned mission response roles and administrative activities.
<b>Pre-Deployment</b>	The pre-deployment phase includes activities that happen during steady state to prepare volunteers or emergency responders for potential deployments.
<b>Public Health Emergency</b>	Public health emergencies occur every day across the United States. Tornadoes, hurricanes, wildfires, floods, infectious disease outbreaks, terrorist attacks, and other emergencies have the potential to impact the overall health of large populations of people and may require a coordinated emergency response.
<b>Rapid Deployment</b>	The rapid deployment phase includes activities that happen at the onset of emergencies that require expedited deployment.
<b>Reception Area</b>	A location, separate from staging areas, where resources report in for processing and out-processing. Reception Areas provide accountability, security, situational awareness briefings, safety awareness, distribution of Incident Action Plans (IAPs), supplies and equipment, feeding, and bed down.
<b>Staging Area</b>	Any location in which personnel, supplies, and equipment can be temporarily housed or parked while awaiting operational assignment.



# MRC Deployment Readiness

The following acronyms are referenced throughout the *MRC Deployment Readiness Guide*:

Term	Definition
ACS	Alternate Care Site
ASPR	Assistant Secretary for Preparedness and Response
CDC	U.S. Centers for Disease Control and Prevention
CERT	Community Emergency Response Team
COVID-19	The novel SARS-CoV-2 coronavirus
CRC	Community Reception Center
DHS	U.S. Department of Homeland Security
DMPH	Disaster Medicine and Public Health
EMAC	Emergency Medical Assistance Compact
EMS	Emergency Medical Services
EOC	Emergency Operations Center
ESAR-VHP	Emergency System for Advance Registration of Volunteer Health Professionals
FEMA	Federal Emergency Management Agency
HHS	U.S. Department of Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
IAP	Incident Action Plan
ICS	Incident Command System
IS	Independent Study
JITT	Just-in-Time Training
MRC	Medical Reserve Corps
MRP	Mission Ready Package
NACCHO	National Association of County and City Health Officials
NDMS	National Disaster Medical System
NIMS	National Incident Management System
OEM	Office of Emergency Management
PCR	Patient Care Report
PFA	Psychological First Aid
PHEM	Public Health Emergency Management
PIO	Public Information Officer
POD	Point of Dispensing
PPE	Personal Protective Equipment
SARS-CoV-2	Severe Acute Respiratory Syndrome Coronavirus 2



# MRC Deployment Readiness

## Introduction


### Overview of the MRC

The [Medical Reserve Corps](#) (MRC) is a national network of medical and non-medical volunteers, organized locally to improve the health and safety of their communities. The program is housed within the U.S. Department of Health and Human Services (HHS), Office of the Assistant Secretary for Preparedness and Response (ASPR).

MRC units and volunteers are committed to strengthening public health, reducing vulnerabilities, improving local preparedness, response and recovery capabilities, and building community resilience. They fill critical public health emergency response resource gaps and support the tiered model of emergency response, with support at the local level first, to help offset resource requests from the state and/or federal level.

### MRC Deployment Readiness Project Background

The National Association of County and City Health Officials (NACCHO) designed the MRC Deployment Ready Project in 2019 to support the MRC priorities outlined by the ASPR. The project was intended to support the integration and deployment of the MRC in local and multi-jurisdictional medical/public health emergency responses and identify or develop tools, resources, and recommendations for national standards for volunteer deployment readiness. NACCHO was assisted in the development of tools included in the initial *2019 Deployment Readiness Guide* by seven MRC units and members of the NACCHO MRC Advisory Group.



MRC units train their volunteers to meet standardized core competencies and mission specific emergency responses to support their local community needs. These training efforts:

- Support the integration of local MRC units into emergency preparedness, response, and recovery activities;
- Advance a unified and systematic approach to improve the health, safety, and resiliency of local communities, states, and the nation; and
- Reduce disaster risks by maximizing a community-wide approach to resource availability.

**NACCHO MRC Advisory Group:** The NACCHO MRC Advisory Group, which includes representation of the greater MRC network, provided invaluable contributions to the development of resources within this guide. They contributed to the development of Mission Sets and provided recommendations on volunteer deployment readiness tier levels, training courses to support the MRC core competencies, and the development of online short courses for volunteers to prepare for emergency response deployments.

# MRC Deployment Readiness

## MRC Deployment Readiness Resources

The MRC Deployment Readiness Guides each provide a common set of tools for MRC unit leaders to develop the capabilities of their MRC volunteers to support medical and public health emergency responses. Both the 2019 and 2021 guides, along with any future guides and novel deployment readiness resources, will be housed on NACCHO's MRC webpage ([bit.ly/NACCHOMRC](https://bit.ly/NACCHOMRC)).

The tools included in this guide provide a national recommended standard that can also be modified to fit the unique mission of individual MRC units. These standards can also be shared with emergency response partners to demonstrate the capabilities of MRC volunteers. The guide includes resources and tools to support the following deployment readiness activities:



### Volunteer Management

- MRC Deployment Readiness Volunteer Tier Levels
- MRC Unit Leader Deployment Readiness Checklists

### Develop Volunteer Capabilities

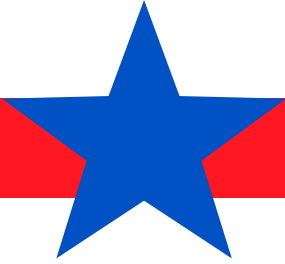
- MRC Core Competencies Training Plan
- MRC Volunteer Deployment Readiness eLearning Modules

### Develop Unit Capabilities

- Emergency Response "Mission Sets"

The *MRC Deployment Readiness Guide* and tools included in the guide are available on the NACCHO MRC webpage at [bit.ly/NACCHOMRC](https://bit.ly/NACCHOMRC).





# MRC Volunteer Management

## Deployment Readiness Volunteer Management Tools

Managing MRC volunteer activities to build response capabilities starts with the volunteer application process and continues with volunteer onboarding and integration into MRC unit activities. Understanding the activities, training, and administrative actions necessary to prepare volunteers for potential activations and deployments will help MRC unit leaders develop a plan to build their unit response capabilities. It is also important to understand a unit's capacity to respond based on the levels and training of the volunteers. This resource guide provides two tools for MRC unit leaders to manage their MRC volunteers from a deployment readiness perspective.

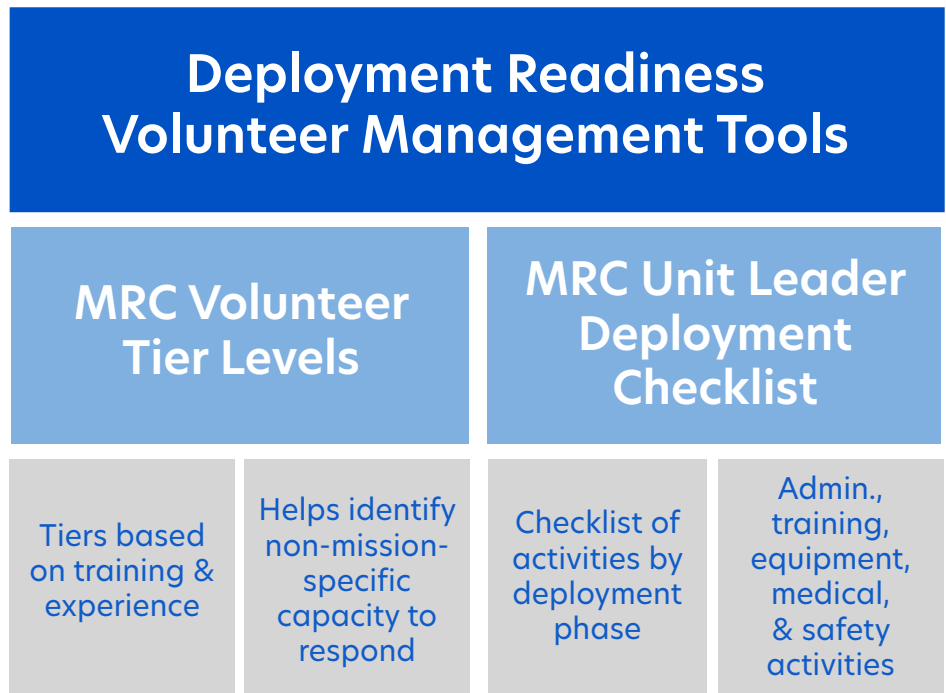
### MRC Volunteer Tier Level Structure

The MRC volunteer tier level structure provides a recommendation for standardizing MRC volunteer deployment readiness capabilities based on levels of emergency response experience, training, exercises, unit activities, and activations/deployments. MRC units can use these recommended levels to identify volunteers that meet the criteria by level to help them understand the capacity of their unit to respond to non-mission-specific responses. Role-specific training requirements would also be a factor to determine volunteer and unit capacity to respond.

MRC units should ensure that volunteers meet the appropriate administrative actions and just-in-time training (JITT) role-specific training required prior to volunteer activations or deployments.

### MRC Unit Leader Deployment Readiness Checklist

The MRC Unit Leader Deployment Readiness Checklist provides unit leaders with a checklist of activities that should happen during the phases of a deployment: Pre-deployment, Deployment, Rapid Deployment, and Post-deployment. The recommendations were compiled with input from the NACCHO MRC Advisory Group and the MRC Deployment Ready Pilot sites. This checklist is by no means exhaustive but covers a broad spectrum of topics including administration, liability coverage, screening, verification of medical licensure, safety and medical clearance, training, cultural competency, and response operations.





# MRC Volunteer Management

## MRC Volunteer Tier Level Structure

The following chart provides a recommendation for standardizing MRC volunteer tier levels based on level of emergency response experience, training, exercises, unit activities, and activations/ deployments. MRC units should also ensure that volunteers meet the appropriate administrative actions and JITT role-specific training required prior to volunteer activations or deployments.

MRC Volunteer Tier Levels			
Level	Deployable	Level Description	Training
<b>MRC Level 1</b>	<ul style="list-style-type: none"> <li>EMAC/Federal</li> <li>Intrastate</li> <li>Local</li> </ul>	<b>Level 1 Volunteers:</b> <ul style="list-style-type: none"> <li>Meet the standards for Level 2</li> <li>Demonstrated experience in non-emergency activations or emergency deployments</li> <li>Capable of serving supervisory roles</li> <li>Background check recommended &amp; may be required for EMAC deployments</li> </ul>	<b>Required:</b> <ul style="list-style-type: none"> <li>IS-200</li> <li>IS-800</li> </ul> <b>Recommended:</b> MRC Core Competencies Learning Paths <ul style="list-style-type: none"> <li>Volunteer Leadership</li> <li>Community Resiliency</li> </ul>
<b>MRC Level 2</b>	<ul style="list-style-type: none"> <li>Intrastate</li> <li>Local</li> </ul>	<b>Level 2 Volunteers:</b> <ul style="list-style-type: none"> <li>Meet the standards for Level 3</li> <li>Demonstrated experience through training/exercises</li> <li>Demonstrated participation in unit activities and non-emergency events</li> <li>Background check recommended</li> </ul>	<b>Required:</b> <ul style="list-style-type: none"> <li>IS-100</li> <li>IS-700</li> </ul> <b>Recommended:</b> MRC Core Competencies Learning Path <ul style="list-style-type: none"> <li>Volunteer Response</li> </ul>
<b>MRC Level 3</b>	<ul style="list-style-type: none"> <li>Local</li> </ul>	<b>Level 3 Volunteers:</b> <ul style="list-style-type: none"> <li>Limited training or participation in unit activities</li> <li>Background check recommended</li> </ul>	<b>Required:</b> <ul style="list-style-type: none"> <li>MRC Unit Orientation or JITT equivalent</li> </ul> <b>Recommended:</b> MRC Core Competencies Learning Path <ul style="list-style-type: none"> <li>Volunteer Preparedness</li> </ul>
<b>MRC Level 4</b>	<ul style="list-style-type: none"> <li>Local surge response only</li> </ul>	<b>Level 4 Volunteers:</b> <ul style="list-style-type: none"> <li>Registered with the MRC but have not completed MRC unit on-boarding process or orientation</li> <li>Can be deployable during a local emergency surge response, if they receive a JITT orientation, role-specific JITT, and meet rapid deployment on-boarding requirements.</li> </ul>	
<b>Unassigned</b>	<ul style="list-style-type: none"> <li>Non-deployable</li> </ul>	<ul style="list-style-type: none"> <li>Spontaneous or volunteers from other volunteer organizations</li> <li>Volunteers would need to register with the MRC unit and meet Level 3 requirements to be deployable</li> </ul>	





# MRC Volunteer Management

## MRC Unit Leader Deployment Readiness Checklists

This checklist of activities is designed to guide MRC Unit Leaders through the phases of a deployment: Pre-deployment, Deployment, Rapid Deployment, and Post-deployment. The following recommendations are by no means exhaustive but cover a broad spectrum of topics including administration, liability coverage, screening, verification of medical licensure, safety and medical clearance, training, cultural competency, and response operations.

### Pre-Deployment Checklist

The pre-deployment phase checklist includes activities that happen during steady state to prepare volunteers for potential deployments.

## PRE-DEPLOYMENT PHASE

### Administration

- Ensure all volunteers complete an MRC application that includes a minimum of the following items: address (physical and mailing), phone number, email, profession, and opt-in text notifications. Additional items, such as previous training, certifications, health profession status, health limitations, etc., may be included. See [sample application](#).
- Provide MRC policy and guidance documents with written volunteer acknowledgement.
- Document and ensure volunteers understand the notification process and deployment expectations. See [sample activation process](#).
- Ensure all volunteers have been issued an MRC badge and uniform.

### Liability Coverage

- Ensure volunteers sign local and/or state loyalty oath and/or the MRC unit's code of conduct agreement.
- Provide information on liability coverage. See [Centers for Disease Control and Prevention \(CDC\) Public Health Emergency Law \(PHEL\) Online Course \(Unit 2\)](#) or the [Emergency Law Inventory](#).

### Screening

- All volunteers should undergo background checks, as resources allow. Consult your legal counsel regarding standards and process.
- If your unit has deployment disqualification conditions, make certain each applicant is clear of those conditions. See [pre-deployment questionnaire](#).

### Verifying Medical Licenses

- Ensure health professional MRC volunteers are registered via [Emergency System for Advance Registration of Volunteer Health Professionals \(ESAR-VHP\)](#) or other credentialing software.
- Periodically verify all medical credentials. If a license is to expire soon (or within anticipated deployment date), flag for follow up prior to expiration.



# MRC Volunteer Management

## PRE-DEPLOYMENT PHASE (cont'd)

### Training

- MRC unit orientation. See [sample orientation presentation](#).
- Document all training activities including dates and duration. Recommended training includes IS-100, IS-700, CPR/First Aid/AED, Psychological First Aid (PFA), Stop the Bleed®, cultural competency, and personal protective equipment (PPE) training.
- For baseline volunteer training recommendations, please see [MRC Volunteer Tiers](#) (p. 8), [MRC Core Competencies](#) (p. 17), [MRC Core Competencies Volunteer Training Plan](#), and a [sample training plan](#).
- Conduct skills assessments as needed for specific roles (e.g., vaccinators).

### Safety and Medical Clearance

- Conduct risk assessments for ALL events and deployments, to include health risks. See [ICS-215A](#).
- Have all volunteers complete health/screening statements. This can take many different forms but is primarily intended to match volunteer roles appropriately with physical demands of deployment missions. See [sample safety survey](#) and [pre-deployment questionnaire](#).
- Volunteers should keep copies of immunization records, which may be requested prior to deployments.
- Ensure you have written policy for required immunizations and assessments, including disqualifying conditions, exceptions, and opt-out conditions. Consider alternate assignments if volunteers are disqualified.
- If immunizations and assessments are required, schedule regular opportunities for volunteers to receive them. Consider offering free screening and immunizations to parents/family members, if resources allow.
- Ensure PPE is available, volunteers are trained on donning and doffing procedures, and N95 fit testing has been completed.
- Ensure a safety briefing is included in all activities.
- See [this guide](#) from South Central MRC (PA) for more health and safety considerations.

### Cultural Competency

- Identify volunteers who self-report language competencies.
- Strengthen cultural competencies, including cultural health literacy and health equity, through [cultural humility training](#), [cultural competency training](#), etc.
- Consider additional training regarding ethics, sensitivity, “bedside manner,” and social media sensitivity in disaster settings.

### General Response Operations

- Provide a deployment checklist during orientation. Send supplements for specific incidents, if needed. Examples include:
  - [ReadyBrazoriaCounty App](#)
  - [Orientation Slides](#)
  - [Activation Email](#)
  - [Quick Series - Deployment Guide](#)
  - [Quick Series - PFA Field Operations Guide](#)
- Remind volunteers to have a completed family emergency plan in place.
- Remind volunteers to maintain a basic, personal go-bag and update it regularly. See [go-bag checklist](#).



# MRC Volunteer Management

## Deployment Checklist

The deployment phase starts after an emergency has happened and includes steps to activate volunteers, prepare them for an identified response mission, and assign responsibilities during a deployment.

### DEPLOYMENT PHASE

#### Administration

- Begin alert/activation procedures to notify volunteers. See [sample activation email](#) and [sample activation process](#).
- Document all volunteer activity during deployment including hours, signature, location, and date(s).
- Complete deployment tasks:
  - Identify mission number.
  - Send team activation notification to state and region. See [ICS-205A](#) and [ICS-204](#).
  - Complete rosters and numbers.
  - Maintain activity log: See [ICS-214](#).
  - Track volunteer participation with sign-in sheets.
  - Complete key documentation, including patient care reports (PCRs) and clinic operations report for the operational area (OA).
  - Send each team with a deployment binder.
  - Fill out an incident check-in list. See [ICS-211](#).

#### Liability Coverage

- Review your state's Good Samaritan laws. See [Oklahoma Good Samaritan Law](#), as an example.
- For mutual aid requests, obtain a resource request and/or mission assignment.
- Confirm volunteer liability coverage once activated. See the [Emergency Law Inventory](#).
- Re-verify the loyalty oath and any other credentials prior to leaving the staging area.
- Be aware that there may be laws enacted for additional liability coverage for volunteers during an emergency.

#### Screening

- Background checks are highly recommended for all volunteers. Establish a memorandum of understanding (MOU) with the police or sheriff's office in advance to complete expedited background screenings for immediate deployments.
- Re-verify and document professional licenses prior to activation or deploy as non-medical.



# MRC Volunteer Management

## DEPLOYMENT PHASE (cont'd)

### Safety and Medical Clearance

- Ensure all immunizations and assessments are complete and document or offer updates.
- Volunteers should maintain their own records.
- Maintain needed claims paperwork on-site in the deployment binder in the event of injury.
- Complete comprehensive risk assessment PRIOR to any deployment.
- Be on alert for any accidents or injuries. Have volunteers report up their chain of command.
- Ensure volunteers have PPE for specific mission.
- Be alert for accidents, injuries, and signs of stress or mental fatigue in volunteers.
- See [this guide](#) from South Central MRC (PA) for more health and safety considerations.

### Training

- Provide JITT MRC orientation as needed for new volunteers.
- Provide JITT for all responders to cover roles and mission response information.
- Provide deployment briefing to address specifics of the response including the current situation, objectives, expectations, and incident-specific policy. See following references:
  - [Orientation/Core Competencies](#)
  - [Examples of JITT](#)
  - [Activation Email](#)
- Provide volunteers with a deployment packet with [ICS forms](#), job action sheets, communications processes, and check-in/check-out process.
- Volunteers should be prepared to participate in situational briefings, as well as safety briefings (i.e., tour of work site, facilities, lodging), daily debriefs (i.e., documentation expectations), and hot wash.

### Cultural Competency

- Collect information about response areas before deploying (e.g., [Census data](#)).
- Include cultural challenges and strategies in briefings.
- Review cultural competency needs during the deployment and provide additional cultural competency training opportunities, if needed. See [MRC Core Competency 8.0](#) (p. 23) for suggested courses.
- Ensure all documents are available in common languages for survivors.
- Review each volunteer's past performance before deployment.



# MRC Volunteer Management

## DEPLOYMENT PHASE (cont'd)

### General Response Operations

- Ensure unit leaders receive incident management situational (sit) report and missions details. Share pertinent information with volunteers.
- Continue to attend briefings for situational awareness.
- Ensure necessary equipment/resources are available to perform duties and returned after use, including any necessary PPE, based on deployment criteria/roles.
- Understand staffing requirements and develop plans for shift coverage, including extended deployments or 24-hour operations.
- Provide deployment details to all deploying volunteers via the MRC coordinator.
- Ensure that all deployed volunteers are properly briefed before each shift. **See [ICS-201](#).**
- Maintain deployment rosters for check-in and check-out to ensure accountability and tracking of volunteer hours.
- Conduct daily or periodic operational briefings to maintain open communications and situational awareness.
- Have a plan for demobilization of volunteers for extended deployments.
- Consider adding a volunteer liaison at deployment sites to coordinate with unit leaders when they're not on site. **See [this Mission Set](#)** from Oklahoma Region 7, Tulsa MRC for an example of a volunteer coordinator liaison.



# MRC Volunteer Management

## Rapid Deployment Checklist

Rapid-deployment phase checklist includes activities that happen during not steady state to prepare new volunteers for potential rapid onboarding and rapid deployments.

### RAPID DEPLOYMENT PHASE

#### Administration

- Ensure all volunteers complete an MRC application that includes a minimum of the following items: address (physical and mailing), phone number, email, profession, and opt-in text notifications. Additional items, such as training, certifications, health professional status, health limitations, etc. may be included.
- Ensure all volunteers have been issued an MRC badge, vest, and/or uniform.
- Document all volunteer activity during deployment including hours, signature, location, and date.
- Complete deployment tasks listed in the [Deployment Checklist](#) (p. 11).

#### Liability Coverage

- Ensure volunteers sign local and/or state loyalty oath and/or the MRC unit's code of conduct agreement.
- Provide information on liability coverage.
- Confirm volunteer liability coverage once activated.

#### Screening

- Basic background checks are highly recommended for all rapid volunteers.
- Have all volunteers complete health/screening statements.

#### Verifying Medical Licenses

- Verify all medical credentials immediately prior to deployment. If a license is to expire soon (or within anticipated deployment date), flag for follow-up prior to expiration.

#### Training

- Provide JITT MRC orientation.
- Provide JITT for all responders to cover roles and mission response information.
- For baseline volunteer training recommendations, please see [MRC Volunteer Tiers](#) (p. 8) and [MRC Core Competencies](#) (p. 17).

#### Safety and Medical Clearance

- Conduct risk assessments for ALL events and deployments, to include health risks. See [ICS-215A](#).
- Ensure a safety briefing is included in all activities.
- Be on alert for any accidents or injuries. Ensure volunteers understand procedures for reporting injuries.

#### Cultural Competency

- Identify volunteers who self-report language competencies.
- Based on the need of each mission, consider additional JITT training regarding ethics, sensitivity, "bedside manner," and social media sensitivity in disaster settings.
- Include cultural challenges and strategies in briefings.

# MRC Volunteer Management

## RAPID DEPLOYMENT PHASE (cont'd)

### General Response Operations

- ❑ Provide volunteers with reporting details, ensuring they bring appropriate personal items (i.e., go-bag) for deployment.
- ❑ Provide volunteers with a deployment packet with [ICS forms](#), job action sheets, communications processes, and check-in/check-out process.
- ❑ Ensure necessary equipment/resources are available to perform duties and returned after use, including any necessary PPE, based on deployment criteria/roles.
- ❑ Conduct daily or periodic operational briefings to maintain open communications and situational awareness.
- ❑ Conduct daily or periodic hotwashes/debriefing to address an operational issue on-site and make appropriate changes.





# MRC Volunteer Management

## Post-Deployment Checklist

This phase begins once a deployment mission has been completed and includes activities to close out assigned response missions and administrative activities for MRC volunteers and the MRC unit.

### POST-DEPLOYMENT PHASE

#### Administration

- Begin demobilization procedures and notify volunteers. See sample [demobilization process](#) and [demobilization email](#).
- Complete post-deployment administrative tasks including:
  - Collection of activity logs (i.e., [ICS-214](#)) and sign-in sheets.
  - Paperwork such as PCRs.
  - Rehab of equipment cache.
  - Team debrief and hot wash.
  - Volunteer evaluations.
  - Unit/responder recognition.
  - Collect volunteer hours and report these to the [MRC Unit Profile & Activity Reporting System](#).
- Capture all documentation developed during deployment and catalog/store for future use. Electronic data should be backed up and archived.
- Capture debrief data and conduct verbal and written debriefs to capture best practices/lessons learned.
- Apply best practices and lessons learned to update plans and procedures.

#### Liability Coverage

- If needed, follow up on any potential claims/cases and document updates.

#### Safety and Medical Clearance

- Have volunteers conduct self-assessments. See sample [post-deployment questionnaire](#).
- Hold a debrief to check in with volunteers via email/phone call after deployment and offer mental health support, if needed.
- Share self-care reminders and recommendations to deployed volunteers.
- Monitor responders for illness if there was an issue (e.g., Instruct volunteers to report any GI illness that occurred in last 48 hours).
- See [this guide](#) from South Central MRC (PA) for more health and safety considerations.

#### Cultural Competency

- During the debrief, ask about cultural competency strengths and areas for improvement.

#### General Response Operations

- Thank all volunteers for their service during a deployment (e.g., emails, calls, local news, social media, etc.).
- Hold a debrief/hot wash process with all deployed volunteers.
- Document deployment successes, challenges, and lessons learned in an after-action report and improvement plan.
- See [Tulsa \(OK\) MRC's post-deployment review](#).



# MRC Core Competencies

## Developing Volunteer Capabilities and Baseline Training Standards

Providing a solid training foundation is essential in building volunteer capabilities and ensuring they are ready for potential deployments. The MRC Core Competencies serve as the national training standard for MRC volunteers and provide a **“common language”** to communicate volunteer capabilities with other MRC units and partner organizations.

In addition, NACCHO has developed two eLearning modules for MRC volunteers to provide them with resources and tools to outline steps they can take to prepare for deployments and identify what to expect during and after a deployment.

### MRC Core Competencies Overview

The MRC Core Competencies were originally developed in 2006 to provide a set of skills and knowledge for MRC volunteers to be able to perform their volunteer responsibilities. In 2014, the MRC Core Competencies were updated to align with the **11 Core Competencies for Disaster Medicine and Public Health (DMPH) Competencies**, which serve as the core competencies for public health professionals.

These competencies represent a **baseline level of knowledge and skills that all MRC volunteers should have**, regardless of their role within the MRC unit. Each competency should be understood at a basic level, with the recognition that more information and skill can be gained in each competency with additional training and experience.

The competencies are aligned into **four MRC Learning Paths**: Volunteer Preparedness, Volunteer Response, Volunteer Leadership, and Volunteer Support for Community Resiliency.

### MRC Volunteer Core Competencies

#### LEARNING PATHS

#### Preparedness

- Personal & Family
- Safe Behaviors

#### Response

- Volunteer Roles
- Communicate Effectively
- Surge Capacity Responses
- Clinical Management

#### Leadership

- Situational Awareness
- Public Health for All Populations

#### Community Resilience

- Ethical Principles
- Legal Principles
- Recovery Considerations

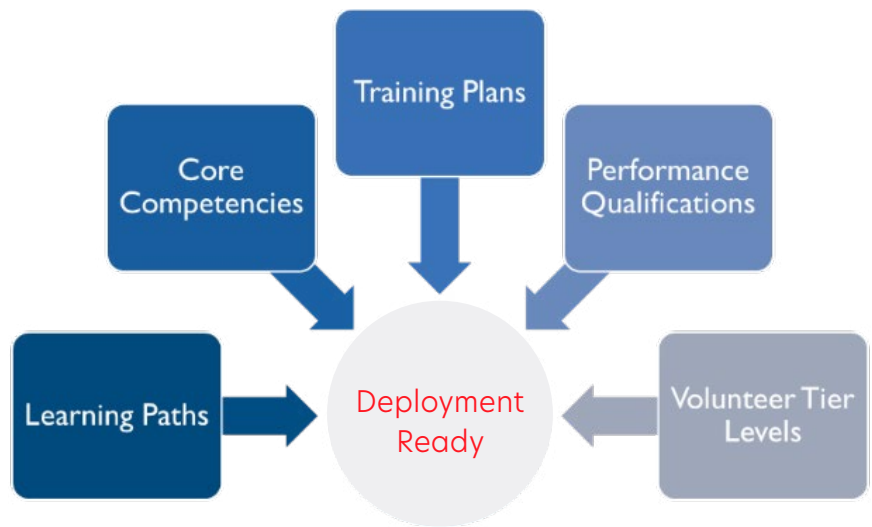
An [MRC Core Competencies Training Plan](#) is available for MRC unit leaders and volunteers to assist them in meeting the training requirements of the competencies. This training plan provides courses that are available through the MRC TRAIN platform and provides flexibility for MRC volunteers to take courses at their own pace. MRC units may also provide in-person courses or develop their own training plan to meet the competencies.

The **MRC performance qualifications translate the core competencies into measurable actions** that are relevant to the work of MRC volunteers.

# MRC Core Competencies

Like the core competencies, each of these performance qualifications can be met at a basic or advanced level.

MRC volunteers will have **varying levels of training, experience, and ability to deploy**. The 2021 MRC Core Competencies Training Plan includes recommendations for each of the DMPH Competencies by volunteer tier level. Using the recommended tier levels will help the MRC unit leader identify core competency training priorities based on local response needs. It also provides a structure for volunteers seeking additional training or levels of responsibility.



## MRC Volunteer Deployment Readiness eLearnings

NACCHO, with input from the contributors of the Deployment Ready Project, has developed two eLearning courses for MRC volunteers to prepare them for the different phases of deployments.

The **Pre-Deployment training** provides volunteers with an understanding of the phases of deployment, terms and acronyms used, personal and family preparedness, recommended training, and other activities they can take to be prepared in advance for potential emergency and non-emergency responses.

The **Deployment and Post-Deployment training** provides volunteers with understanding of the types of activities they can expect during and after a deployment. It also provides information on health and safety factors, equipment, supplies, training, and administrative and operational activities.

The MRC Volunteer Deployment Readiness eLearning courses are available on:

### MRC TRAIN ([www.mrc.train.org](http://www.mrc.train.org))

- MRC Volunteer Deployment Readiness: [Pre-Deployment Phase 1086867](#)
- MRC Volunteer Deployment Readiness: [Deployment and Post-Deployment Phases 1086868](#)

### NACCHO University (<https://www.pathlms.com/naccho>)

- Both courses can be found in the [Public Health Preparedness tab - Medical Reserve Corps](#).

# MRC Core Competencies

## MRC Core Competencies by Learning Path

Organized into four Learning Paths, the DMPH Competencies represent a baseline level of knowledge and skills that all MRC volunteers should have, regardless of their role within the MRC unit. Because the DMPH Competencies establish only a minimum standard, units may choose to expand on the competencies in order to train volunteers at a more advanced level.

### MRC Core Competencies Learning Paths

#### Preparedness

- Demonstrate personal and family preparedness for disasters and public health emergencies. 1.0
- Demonstrate knowledge of personal safety measures that can be implemented in a disaster or public health emergency. 5.0

#### Response

- Demonstrate knowledge of one's expected role(s) in organizational and community response plans activated during a disaster or public health emergency. 2.0
- Communicate effectively with others in a disaster or public health emergency. 4.0
- Demonstrate knowledge of surge capacity assets consistent with one's role in organizational, agency, and/or community response plans. 6.0
- 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. 7.0

#### Leadership

- Demonstrate situational awareness of actual/potential health hazards before, during, and after a disaster or public health emergency. 3.0
- Demonstrate knowledge of public health principles and practices for the management of all ages and populations affected by disasters and public health emergencies. 8.0

#### Community Resiliency

- Demonstrate knowledge of ethical principles to protect the health and safety of all ages, populations, and communities affected by a disaster or public health emergency. 9.0
- Demonstrate knowledge of legal principles to protect the health and safety of all ages, populations, and communities affected by a disaster or public health emergency. 10.0
- Demonstrate knowledge of short- and long-term considerations for recovery of all ages, populations, and communities affected by a disaster or public health emergency. 11.0

# MRC Core Competencies

## MRC Core Competencies Training Plan (as of January 2022)



The MRC Core Competencies Training Plan is a suggested guide for training MRC volunteers at the local level. It presents a “menu” of options to MRC unit leaders and volunteers composed of training courses that align with the DMPH Competencies. MRC units can choose training courses from the training matrix, use other training sources not listed in the matrix, or create their own unit-specific training based on the DMPH Competencies.

### How to Use the MRC Training Matrix

The MRC Core Competencies Training Plan is organized using the following categories:

- **Learning paths** are groups of competencies related to certain topics that align with volunteer motivations. The four learning paths are Volunteer Response, Volunteer Preparedness, Volunteer Leadership, and Volunteer Support for Community Resiliency.
- **DMPH Competencies** serve as the foundational competency set for MRC volunteers and represent a baseline level of knowledge and skills that all MRC volunteers should have, regardless of their role within the MRC unit.
- **MRC performance qualifications** break down the DMPH Competencies into measurable, MRC-specific qualities (i.e., knowledge, skills, and attitudes) and actions that a volunteer should have or be able to perform in order to be considered competent in an area.
- **Suggested training/tools** are recommended resources and courses, most of which are available online and free of cost, that will enable volunteers to meet the competencies. The training list is not comprehensive; rather, it is a starting point for unit leaders to consider. The courses are accessible through MRC-TRAIN. (*\*The DMPH Competencies have an associated training series that are eligible for Continuing Medical Education (CME) or Continuing Nursing Education (CNE) credit. These courses are denoted with an asterisk in the matrix.*)
- **Time** is the estimated length of time required to complete the training.
- **Volunteer tier level** applies to the level of training (introductory, intermediate, or advanced) and the appropriate volunteer tier level.
  - **Tier Level 1:** Advanced level of knowledge for volunteers serving in a specialized or supervisory response role
  - **Tier Level 2:** Intermediate level of knowledge for volunteers wishing to expand their skills and abilities
  - **Tier Level 3:** Introductory level of knowledge that all volunteers should have
  - **Tier Level 4:** Volunteers who have registered but have not completed MRC orientation
  - **Unassigned:** New volunteers who have not completed registration or orientation

# MRC Core Competencies

## Accessing and Registering for Courses on MRC-TRAIN

MRC-TRAIN is an online training platform that allows MRC unit leaders and volunteers to access, register, and share MRC-related, public health, and emergency preparedness courses. Use the following instructions to access MRC-TRAIN and the course recommendations listed below:

1. Login to MRC-TRAIN at [www.train.org/mrc](http://www.train.org/mrc).
2. Search for courses by keyword or Course ID #.
3. To register for a course, click on the course title and then click the **+Register** tab. Next, select your credit (if applicable) and click **Launch**. The course will open in a new window.
4. The 2021 MRC Core Competencies Training Plan can be found at [www.train.org/mrc/training\\_plan/4101](http://www.train.org/mrc/training_plan/4101).

MRC Core Competencies Training Plan				
Learning Path: Volunteer Preparedness				
DMPH Competency	MRC Performance Qualifications	Suggested Training and MRC-TRAIN Course Number	Time	Volunteer Tier Level
<b>1.0</b> Demonstrate personal and family preparedness for disasters and public health emergencies.	Complete a personal and family preparedness plan.	• Personal and Family Preparedness* - <a href="#">MRC-TRAIN 1081145</a>	25 minutes	Level 3
		• Animal Emergency Preparedness - <a href="#">MRC-TRAIN 1025307</a>	1 hour	Level 2
<b>5.0</b> Demonstrate knowledge of personal safety measures that can be implemented in a disaster or public health emergency.	Demonstrate safe behaviors during MRC activities.	• Personal Safety* - <a href="#">MRC-TRAIN 1081353</a>	40 minutes	Level 3
		• Workforce Resiliency 2: Individual and Organizational Preparedness - <a href="#">MRC-TRAIN 1021348</a>	2.25 hours	Level 3
		• Blood-borne Pathogen Overview - <a href="#">MRC-TRAIN 1040544</a>	10 minutes	Level 3
		• CDC Project Firstline: What is PPE? - <a href="#">MRC-TRAIN 1096546</a>	4 minutes	Level 3
		• Personal Protective Equipment (PPE) for Healthcare Settings - <a href="#">MRC-TRAIN 1099936</a>	1 hour	Level 2
		• Disaster Responder Health and Safety - <a href="#">MRC-TRAIN 1037220</a>	6 hours	Level 1

\*DMPH Competencies have an associated training series that is eligible for CME or CNE credit. These courses are denoted with an asterisk in the matrix.

# MRC Core Competencies

## Learning Path: Volunteer Response

DMPH Competency	MRC Performance Qualifications	Suggested Training and MRC-TRAIN Course Number	Time	Volunteer Tier Level
<b>2.0</b> Demonstrate knowledge of one's expected role(s) in organizational and community response plans activated during a disaster or public health emergency	Follow procedures to successfully activate, report, and demobilize.	<ul style="list-style-type: none"> <li>Expected Roles in Organizational &amp; Community Response Plans During a Disaster or Public Health Emergency* - <a href="#">MRC-TRAIN 1081338</a></li> </ul>	40 minutes	Level 3
	Follow policies and procedures related to professional and ethical representation of the MRC.	<ul style="list-style-type: none"> <li>FEMA IS-100.C: An Introduction to the Incident Command System - <a href="#">MRC-TRAIN 1078825</a></li> </ul>	1-2 hours	Level 2
		<ul style="list-style-type: none"> <li>FEMA IS-700.B: An Introduction to the National Incident Management System - <a href="#">MRC-TRAIN 1078831</a></li> </ul>	1-2 hours	Level 2
	Describe the chain of command (e.g. NIMS, ICS, EMS) during MRC activities.	<ul style="list-style-type: none"> <li>IS-200.C: Basic Incident Command System for Initial Response - <a href="#">MRC-TRAIN 1084004</a></li> </ul>	1-2 hours	Level 1
		<ul style="list-style-type: none"> <li>IS-800.D: National Response Framework, an Introduction - <a href="#">MRC-TRAIN 1091330</a></li> </ul>	3 hours	Level 1
<b>4.0</b> Communicate effectively with others in a disaster or public health emergency	Describe the chain of command (e.g. NIMS, ICS, EMS) during MRC activities.	<ul style="list-style-type: none"> <li>Communication* - <a href="#">MRC-TRAIN 1081351</a></li> </ul>	1 hour	Level 3
		<ul style="list-style-type: none"> <li>Risk Communication in Public Health Emergencies - <a href="#">MRC-TRAIN 1009201</a></li> </ul>	3 hours	Level 2
		<ul style="list-style-type: none"> <li>FEMA IS-242.B: Effective Communication - <a href="#">MRC-TRAIN 1052535</a></li> </ul>	Self-paced	Level 2
<b>6.0</b> Demonstrate knowledge of surge capacity assets consistent with one's role in organizational, agency, and/or community response plans	Describe how MRC serves the community.	<ul style="list-style-type: none"> <li>Surge Capacity* - <a href="#">MRC-TRAIN 1081356</a></li> </ul>	25 minutes	Level 3
		<ul style="list-style-type: none"> <li>PODs (Points of Dispensing): Public Health Training for Staff and Volunteers - <a href="#">MRC-TRAIN 1037506</a></li> </ul>	30 minutes	Level 3
		<ul style="list-style-type: none"> <li>SNS Overview Course - <a href="#">MRC-TRAIN 1093663</a></li> </ul>	1 hour	Level 2
<b>7.0</b> 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	Identify the impact of an event on the behavioral health of the MRC member and their family, team, and community.	<ul style="list-style-type: none"> <li>Clinical Management Principles* - <a href="#">MRC-TRAIN 1081357</a></li> </ul>	40 minutes	Level 3
		<ul style="list-style-type: none"> <li>Psychological First Aid: A Minnesota Community Supported Model - <a href="#">MRC-TRAIN 1050404</a></li> </ul>	45 minutes	Level 3
		<ul style="list-style-type: none"> <li>Protecting Your Physical and Mental Health: Before, During, and After a Disaster - <a href="#">MRC-TRAIN 1091366</a></li> </ul>	1 hour	Level 3
	Describe how MRC serves the community.	<ul style="list-style-type: none"> <li>Disaster Behavioral Health - <a href="#">MRC-TRAIN 1021342</a></li> </ul>	1 hour	Level 2
		<ul style="list-style-type: none"> <li>ACEs (Adverse Childhood Experiences) - <a href="#">MRC-TRAIN 1079049</a></li> </ul>	1.25 hours	Level 2
		<ul style="list-style-type: none"> <li>Nurses on the Front Line: Preparing for and Responding to Emergencies and Disasters - <a href="#">MRC-TRAIN 1013008</a></li> </ul>	Self-paced	Level 1/2

\*DMPH Competencies have an associated training series that is eligible for CME or CNE credit. These courses are denoted with an asterisk in the matrix.

# MRC Core Competencies

## Learning Path: Volunteer Leadership

DMPH Competency	MRC Performance Qualifications	Suggested Training and MRC-TRAIN Course Number	Time	Volunteer Tier Level
<b>3.0</b> Demonstrate situational awareness of actual/potential health hazards before, during, and after a disaster or public health emergency.	Describe how MRC serves the community.	<ul style="list-style-type: none"> <li>Situational Awareness* - <a href="#">MRC-TRAIN 1081343</a></li> </ul>	25 minutes	Level 3
		<ul style="list-style-type: none"> <li>You Are the Help Until Help Arrives - <a href="#">MRC-TRAIN 1069847</a></li> </ul>	25 minutes	Level 3
		<ul style="list-style-type: none"> <li>Public Health's Role During a Hurricane - <a href="#">MRC-TRAIN 1093428</a></li> </ul>	1 hour	Level 3
		<ul style="list-style-type: none"> <li>Environmental Health Issues in Disasters - <a href="#">MRC-TRAIN 1009200</a></li> </ul>	2 hours	Level 3
		<ul style="list-style-type: none"> <li>Role of Public Health and Volunteers in Emergencies - <a href="#">MRC-TRAIN 1040537</a></li> </ul>	4 minutes	Level 3
		<ul style="list-style-type: none"> <li>Radiation Preparedness: Community Reception Centers and the MRC - <a href="#">MRC-TRAIN 1052705</a></li> </ul>	45 minutes	Level 3
		<ul style="list-style-type: none"> <li>Core Information Needs for Situational Awareness and Response Management - <a href="#">MRC-TRAIN 1056914</a></li> </ul>	20 minutes	Level 1/2
<b>8.0</b> Demonstrate knowledge of public health principles and practices for the management of all ages and populations affected by disasters and public health emergencies.	Demonstrate cultural humility during MRC activities.	<ul style="list-style-type: none"> <li>Public Health Principles* - <a href="#">MRC-TRAIN 1081358</a></li> </ul>	1 hour	Level 3
		<ul style="list-style-type: none"> <li>Disability and Disaster - <a href="#">MRC-TRAIN 1052223</a></li> </ul>	1 hour (webinar)	Level 3
	Describe how MRC serves the community.	<ul style="list-style-type: none"> <li>Cultural Awareness: Introduction to Cultural Competency and Humility - <a href="#">MRC-TRAIN 1062987</a></li> </ul>	30 minutes	Level 3
		<ul style="list-style-type: none"> <li>Cultural Competency - <a href="#">PowerPoint slides</a></li> </ul>	n/a	Level 3
	Identify the role of public health in the community.	<ul style="list-style-type: none"> <li>IS-505: Religious and Cultural Literacy and Competency in Disaster - <a href="#">MRC-TRAIN 1063152</a></li> </ul>	4 hours	Level 3
		<ul style="list-style-type: none"> <li>Cultural Competency for Community Management of Special Needs Patients in Disaster - <a href="#">MRC-TRAIN 1045488</a></li> </ul>	4 hours	Level 3
		<ul style="list-style-type: none"> <li>The Role of Health Literacy in Disaster Preparedness - <a href="#">MRC-TRAIN 1013551</a></li> </ul>	2 hours	Level 1

\*DMPH Competencies have an associated training series that is eligible for CME or CNE credit. These courses are denoted with an asterisk in the matrix.

# MRC Core Competencies

## Learning Path: Volunteer Support for Community Resiliency

DMPH Competency	MRC Performance Qualifications	Suggested Training and MRC-TRAIN Course Number	Time	Volunteer Tier Level
<b>9.0</b> Demonstrate knowledge of ethical principles to protect the health and safety of all ages, populations, and communities affected by a disaster or public health emergency.	Follow policies and procedures related to professional and ethical representation of the MRC.	<ul style="list-style-type: none"> <li>Ethical Principles* - <a href="#">MRC-TRAIN 1081360</a></li> </ul>	40 minutes	Level 3
	Demonstrate cultural humility during MRC activities.	<ul style="list-style-type: none"> <li>Ethics and Public Health: How Public Health Reacts Ethically in a Disaster - <a href="#">MRC-TRAIN 1042347</a></li> </ul>	4 hours	Level 3
<b>10.0</b> Demonstrate knowledge of legal principles to protect the health and safety of all ages, populations, and communities affected by a disaster or public health emergency.	Demonstrate safe behaviors during MRC activities.	<ul style="list-style-type: none"> <li>Legal Principles* - <a href="#">MRC-TRAIN 1081361</a></li> </ul>	1 hour	Level 3
	Follow policies and procedures related to professional and ethical representation of the MRC.	<ul style="list-style-type: none"> <li>Public Health and the Law: An Emergency Preparedness Training Kit - <a href="#">MRC-TRAIN 1050167</a></li> </ul>	30 minutes	Level 3
	Demonstrate cultural humility during MRC activities.	<ul style="list-style-type: none"> <li>Public Health Emergency Law Course:                             <ul style="list-style-type: none"> <li><i>Unit 1</i>—Introduction to Emergency Management Systems Preparedness and Response - <a href="#">MRC-TRAIN 1084118</a></li> <li><i>Unit 2</i>—Protection of Persons, Volunteers, and Responders - <a href="#">MRC-TRAIN 1084126</a></li> <li><i>Unit 3</i>—Emergency Powers: Management and Protection of Property and Supplies - <a href="#">MRC-TRAIN 1084130</a></li> </ul> </li> </ul>	1 hour 1 hour 1 hour	Level 2
<b>11.0</b> Demonstrate knowledge of short- and long-term considerations for recovery of all ages, populations, and communities affected by a disaster or public health emergency.	Identify the impact of an event on the behavioral health of the MRC member, their family, team and community.	<ul style="list-style-type: none"> <li>Short- and Long-term Considerations for Recovery* - <a href="#">MRC-TRAIN 1081365</a></li> </ul>	20 minutes	Level 3
		<ul style="list-style-type: none"> <li>Social Media and Long-term Recovery - <a href="#">MRC-TRAIN 1052242</a></li> </ul>		Level 3
	Demonstrate cultural humility during MRC activities.	<ul style="list-style-type: none"> <li>Caring for Older Adults in Disasters: A Curriculum for Health Professionals - <a href="#">MRC-TRAIN 1059666</a></li> </ul>	30-120 minutes	Level 2
		<ul style="list-style-type: none"> <li>Long Term Recovery Basics (4-part webinar) - <a href="#">MRC-TRAIN 1052226</a></li> </ul>	2-4 hours	Level 2

\*DMPH Competencies have an associated training series that is eligible for CME or CNE credit. These courses are denoted with an asterisk in the matrix.



# MRC Mission Sets

## Mission Sets

The term 'Mission Set' describes a scalable response and recovery capability for MRC units and volunteers that is organized, developed, trained, and exercised prior to an emergency or disaster for local, state, and/or regional deployment purposes.

Mission Sets are designed to be a planning and training tool for MRC unit leaders to build response capabilities for their local or state emergency response requirements. They serve as a foundation to build capabilities for common response missions, rather than listing out exact resource specifications for a particular response. Mission Sets also serve as a means for MRC unit leaders to demonstrate their unit capabilities and as potential resources for state emergency managers to develop a Mission Ready Package (MRP).

The following information was modeled after the [2019 Deployment Readiness Guide](#) and features the same core content, but has been updated to reduce redundancies and include information on the novel SARS-CoV-2 coronavirus (COVID-19) pandemic response.

## Developing an MRC Mission Set

Fundamentally, developing a Mission Set involves determining the appropriate staffing, resources needed, responsibility of partnering parties, and expectations of volunteers during deployments. Since Mission Sets are a planning tool to support response activities, they should always be developed in collaboration with response partners. This will ensure there is alignment of response roles and resources required. NACCHO's Mission Set Template is available for [download here](#) and on NACCHO's [MRC Deployment Readiness Resources website](#).



## MRC Mission Set Examples

This guide provides information and examples of Mission Sets that were developed by MRC unit leaders in response to the COVID-19 pandemic as well as many other common response missions that MRC units have supported. The Mission Sets described in this guide along with others can be found on the [Medical Reserve Corps page of NACCHO's website](#). These Mission Sets are intended to serve as examples that can be adapted based on local or state mission requirements.

## Overview of COVID-19 Response Mission Sets

The Mission Sets described in this section were developed by recipients of NACCHO's 2020 [MRC Operational Readiness Awards \(ORA\)](#) and [2020 COVID-19 ORA](#). The COVID-19 ORA was designed to fund MRC units in developing COVID-19 response specific Mission Sets. Mission Sets developed through these awards are available in full on the [NACCHO website](#).

The COVID-19 response Mission Sets featured in this guide can be grouped into the following six categories. Click on each category or continue to pages 27 through 29 to review the example Mission Sets.

- 1. Points of Dispensing (PODs)** - These Mission Sets describe plans and considerations for deployments to a variety of PODs including drive through immunization, influenza immunization, and mass dispensing scenarios. The documents contain resources and templates for both units that are new to providing POD support and those that are looking to strengthen that capacity. While all were developed during the COVID-19 pandemic, they remain valuable planning tools in non-pandemic times and to prepare for future infectious disease outbreaks.
- 2. COVID-19 Testing** - These Mission Sets cover plans to deploy MRC volunteers to test individuals for the virus that causes COVID-19. The Mission Sets include considerations and resources for clinical and non-clinical volunteers serving at fixed open testing sites, door-to-door testing operations, and mobile saliva testing units.
- 3. Medical Surge** - These Mission Sets provide examples of planned deployments of clinical and non-clinical MRC volunteers to ease medical surge conditions in healthcare settings and long-term care facilities. Such deployments should always be done in coordination with local facilities, and thus these Mission Sets provide starting points for other units to discuss with their local partners.
- 4. Risk Communications** - These Mission Sets plan for the deployment of MRC volunteers to participate in public messaging following emergencies and disasters as well as to staff a COVID-19 hotline.



# MRC Mission Sets

5. **Targeted Outreach** – The Mission Sets in this section describe efforts to conduct targeted outreach to senior citizens and those at risk of consuming misinformation during the COVID-19 pandemic. The models in these Mission Sets may be adapted to plan for outreach to other vulnerable populations during and after the COVID-19 pandemic.
6. **Personal Protective Equipment (PPE) Fit Testing** – This Mission Set plans for the deployment of MRC volunteers to conduct PPE fit testing and train-the-trainer session for health care personnel during the COVID-19 pandemic. This Mission Set may be adapted for other settings, as needed.

## COVID-19 Response Mission Sets:

### 1. Points of Dispensing (PODs)

- a. **Comprehensive POD Support** – This Mission Set features comprehensive resources for planning for the integration of MRC volunteers with local health department staff to facilitate the dispensing of medical counter measures to community members. The document, created by Livingston County MRC in New York, includes job descriptions, job action sheets, just in time training, online training links, and specialized training resources.
- b. **Basic POD Support** – Developed by Yates County MRC in New York, this Mission Set provides a basic example of POD support for MRC units in smaller jurisdictions that are looking to integrate their units into local PODs.
- c. **COVID-19 Drive Through Vaccination POD Support** – Developed by Johnson County MRC in Iowa, this Mission Set provides a flexible template for use during open or closed COVID-19 vaccine PODs. The document also contains a POD workflow chart and various job action sheets as additional resources.
- d. **Influenza Immunization PODs During the COVID-19 Pandemic** – Developed by Ventura County MRC in California, this Mission Set provides plans for safe immunization accessibility by incorporating COVID-19 safety guidelines into influenza immunization POD procedures. This plan provides proof of principal and prepares a unit for other deployments during the pandemic, including anticipated COVID-19 immunization PODs and wildfire or earthquake events. This Mission Set also features numerous resources for running influenza immunization PODs as appendices.
- e. **Mass Point of Dispensing** – The mass dispensing model described in this Mission Set has the flexibility to be used in a variety of public health emergencies, including infectious disease testing, vaccination, and distribution of critical supplies. Developed by the New Orleans MRC in Louisiana, this Mission Set outlines the various personnel, training, and equipment needed to run an efficient, non-clinical, walk-through or drive-through mass dispensing site.



# MRC Mission Sets

## 2. COVID-19 Testing

- a. **COVID-19 Testing Support** - Developed by the Three Rivers MRC in Virginia, this Mission Set was designed to integrate MRC volunteers into the COVID-19 testing operations of the local health district. The document features training requirements and job action sheets for a variety of clinical and non-clinical roles.
- b. **Micro Mobile SARS-COV-2 Diagnostic Testing (Door-to-Door)** - This Mission Set was developed by the Loudoun County MRC in Virginia to plan for the deployment of MRC volunteer teams to conduct residential COVID-19 testing with a focus on apartment complexes in medically underserved communities. Comprehensive job action sheets for each role are included as additional resources.
- c. **COVID-19 Saliva Testing Mobile Unit** - This Mission Set was developed by the MRC of Greater Kansas City, Missouri for the deployment of MRC volunteers to a mobile COVID-19 saliva testing unit. The document has thorough descriptions of the types of volunteers needed, equipment needed, and pre-planning considerations.

## 3. Medical Surge

- a. **Code Triage Response (Emergency Department Support)** - This Mission Set was developed by San Bernardino County MRC in California to assist with decompressing emergency departments (EDs) in hospitals experiencing patient surges. The document outlines how communications, logistics, administrative, medical, and medical support teams would coordinate to support efforts to minimize unnecessary ED visits by treating low acuity patients and/or those seeking COVID-19 vaccination.
- b. **Clinical and Non-Clinical Healthcare Settings Support** - This Mission Set provides a template for integrating an MRC into a healthcare setting to provide clinical and non-clinical support. Developed by Douglas County Health Department MRC in Illinois, this Mission Set provides a great foundation that other units can further develop to include elements such as job descriptions in coordination with their local healthcare facilities.
- c. **Long Term Care Facility Support** - This Mission Set was developed by El Paso County MRC in Colorado to outline safe practices for supporting long term care facilities experiencing staffing shortages and residents infected and exposed to infectious diseases such as COVID-19.

## 4. Risk Communications

- a. **Risk Communication and Messaging** - This Mission Set was developed by Wachusett MRC in Massachusetts to train MRC volunteers to write messages that will be incorporated into emergency planning, response, and recovery phases for a variety of natural disasters and emergencies. The document contains a job description and public messaging JITT.
- b. **COVID-19 Hotline - Phone Call Triage/Assessment** - Developed by the Sacramento MRC in California, this Mission Set provides plans for a team of medical MRC volunteers to staff a COVID-19 hotline. It is worth noting that this Mission Set focuses on medical volunteers, which may not be applicable to other MRC units.

## 5. Targeted Outreach

**a. Senior Citizen Resiliency** - This Mission Set employs the positive impact of creativity and connection on health and wellbeing in deploying MRC volunteers to build the resilience of senior citizens. Franklin MRC in Massachusetts matched volunteers with seniors to guide creative expression-based activities proven to improve quality of life by building a sense of connectedness with self/others, providing a link with the world, and preventing negative physical and mental health consequences of social isolation and loneliness. The document features a diversity of resources aimed at building resiliency and meeting the needs of senior citizens during emergencies and disasters.

**b. COVID-19 Education & Misinformation** - This Mission Set was created to build an educational platform that allowed trusted individuals in the community to deliver accurate information to communities afflicted by misinformation related to COVID-19. Black Belt MRC volunteers in Alabama, including those with medical, non-medical, communications, and media experience, delivered live and/or pre-recorded sessions related to COVID-19 and disease prevention. The activities were designed to engage participants and allow them to ask questions in an effort to combat misinformation and prevent the spread of COVID-19 in two rural communities.

## 6. Personal Protective Equipment (PPE) Fit Testing

**a. Personal Protective Equipment (PPE) Fit Testing** - This Mission Set outlines how trained South Central PA MRC teams in Pennsylvania provided PPE fit testing and fit test site training to healthcare personnel. In addition to outlining the equipment and resources necessary to conduct fit testing, the Mission Set also discusses best practices for implementing train-the-trainer sessions.

## Overview of Other Common Mission Sets

The Mission Sets described in this section were originally featured in the [2019 Deployment Readiness Guide](#) where they can still be found in full, as well as on the [NACCHO website](#). These Mission Sets can be grouped into the following eight categories. Click on each category below or continue to pages 30 through 33 to review the example Mission Sets.

1. **Sheltering Operations**
2. **Alternate Care Sites (ACS)/ Medical Surge**
3. **Volunteer Coordination**
4. **Disaster Behavioral Health**
5. **Animal Response**
6. **Emergency Auxiliary Communications**
7. **Radiation Community Reception Centers (CRCs)**
8. **Responder Rehab Support**

### Other Common Mission Sets:

#### 1. Sheltering Operations

**a. Medical Sheltering Management Team** - As an all-hazards plan, this Mission Set aims to ensure all citizens have access to a shelter that is safe, secure, and has basic sanitation requirements regardless of the size, scope, and type of work. Developed by Calcasieu MRC in Louisiana, this Mission Set includes tasks, roles, and responsibilities necessary for operating a single or dual shelter and executing a point-to-point transfer. The plan will ensure volunteers are capable of being deployed on a local, state, and national level.

**b. Non-Medical Emergency Shelter Management, Operations, and Donations Management Teams** - Developed by Brazoria County MRC in Texas, these Mission Sets outline the requirements for deploying Shelter Management, Operations, and Donation Management Teams to non-medical shelters. These Mission Sets feature both primary and secondary roles that MRC units can fulfill as well as thorough descriptions and considerations.

## 2. Alternate Care Sites (ACS)/ Medical Surge

- a. Basic Alternate Care Site** - Developed by Manasota MRC in Florida, this Mission Set was developed to plan for the establishment of an ACS or aid station by MRC volunteers to reduce the number of patients being transported and seen at hospitals following an emergency or disaster. The document outlines the responsibilities and requirements of a Team Leader, Support Team, and Logistic Support Personnel. This Mission Set provides a great template for use by MRC units that are newer to ACS deployments.
- b. Alternate Care Sites/Co-located Medical Clinics** - This Mission Set was developed by Contra Costa MRC in California to build the unit's capabilities to include all operational aspects of running an ACS. The ACS Medical Team described in the document provides health assessments, medical services, and public health protection at the appropriate level of care based upon resources available and setting. This Mission Set is most appropriate for use as a template by MRC units that have ACS deployment experience and are looking to further develop that capability.
- c. Pharmacy Management Liaison/Pharmacy Cache for ACS** - Developed by Contra Costa MRC in California, this Mission Set details the role an MRC unit can play in assisting with refilling pharmaceuticals after a disaster and includes a pharmacy cache list based on data collected during the 2015-2018 California wildfires. This Mission Set can be assigned as a stand-alone mission or as a role within an existing medical team/task force working in a shelter or ACS. The document includes a link to [Contra Costa MRC's library of resources](#) and is a thorough model of a longer-term deployment.
- d. Medical Surge Teams** - This Mission Set describes how MRC volunteers could provide both clinical and non-clinical support to hospitals and clinics after a disaster. The teams and single resources identified could be deployed as requested (e.g., one Communication Team with a Telecommunicator and an Operations Center Technician OR three nurses to work on a Triage Team). Developed by Snohomish MRC in Washington, this Mission Set also contains training resources, job action sheets, and JITT for various roles associated with medical surge deployment.
- e. Family Assistance Center Task Force** - This Mission Set was developed by the NACCHO MRC Workgroup to plan for the deployment of a Family Assistance Center Task Force after a mass casualty incident. The team would consist of professionals such as behavioral health providers and support staff. The Mission Set contains an assortment of resources for family assistance center operations and mass casualty support.



# MRC Mission Sets

## 3. Volunteer Coordination

**a. Medical Volunteer Coordination** - Developed by Contra Costa MRC in California, this Mission Set lays out a framework for multiple units to combine resources to fill staffing gaps and provide better operational coordination for the local Department Operations Center (DOC) and the regional coordinator. The Medical Volunteer Coordination Lead role described in this document is an ideal mission task for an MRC Coordinator. If an MRC team or multiple teams deploy, the MRC Coordinator can oversee the team operations and serve as the Volunteer Agency Liaison coordinating with the DOC/Emergency Operations Center, potentially alleviating this role from the operational area. This Mission Set is more appropriate for extended field deployments to ensure supervision is provided.

**b. Volunteer Coordinator Liaison** - This Mission Set was designed by the Oklahoma Region 7, Tulsa MRC to provide MRC leadership for events, trainings and exercises, and responses when the local unit coordinator is unavailable. This Mission Set focuses on developing MRC volunteers to provide leadership support during short term (i.e., one day) deployments or activities. The document also features various training resources, job action sheets, and pre- and post-deployment questionnaires.

## 4. Disaster Behavioral Health/Resiliency

**a. Disaster Behavioral Health/Resiliency** - This Mission Set was developed by Snohomish MRC in Washington to plan for the deployment of a team of volunteers to provide behavioral health support in the field (e.g., shelters, family assistance centers, reunification centers). The document outlines the personnel, training, and equipment necessary to staff Behavioral Health Teams, including job action sheets and JITT.

## 5. Animal Response

**a. Animal Response** - Developed by Oklahoma Region 7, Tulsa MRC, this Mission Set plans for the deployment of an Animal Response Team to house and care for animals in disasters and emergencies. This team can set up or augment an Emergency Animal Shelter for unowned animals due to natural or man-made disasters and can also care for owned animals during and after a disaster when the animals are unable to stay with their owners at their alternate housing locations. The document contains a comprehensive list of equipment and resources to plan for a successful deployment.

## 6. Emergency Auxiliary Communications

**a. Emergency Auxiliary Communications** - This Mission Set was developed by Midland Public Health Reserve Corps in South Carolina to outline the deployment of Federal Communications Commission (FCC) Licensed Amateur Radio Operators to a variety of scenarios including POD operations, hurricane response, and other miscellaneous exercises and training events. While this type of deployment is not the primary function of MRC units, this Mission Set may be useful to those units with the unique resources necessary to fill this role.



# MRC Mission Sets

## 7. Radiation Community Reception Centers (CRCs)

**a. Radiation Nuclear Response Team for Community Reception Center** - This Mission Set was developed by the NACCHO MRC Workgroup using resources from the Rocky Mountain MRC of Colorado, MRC Georgia East Metro (GEM), and Philadelphia MRC to plan for the deployment of a Radiation Nuclear Response Team to CRCs. While the focus of this document is radiation response, this model can be used for other response efforts as well. The Mission Set also contains various considerations and resources for planning for both radiation response and CRC operations.

## 8. Responder Rehab Support

**a. Firefighter Rehab Response Team** - Developed by Manasota MRC in Florida, this Mission Set provides plans to deploy a trained team to supplement firefighter rehabilitation operations activities under leadership provided by the local jurisdiction. The team would provide rehabilitative cooling of firefighters and others presenting with heat-related illness symptoms until either released for return to duty or transferred to appropriate level of care. This Mission Set can be adapted by other units to meet the responder rehabilitation need of their jurisdiction.



# MRC Mission Sets

## Additional Resources

The following resources and training links have been compiled to support Mission Set and volunteer capability development.

### Volunteer Training

- [MRC Core Competencies Training Plan](#)
- [PFA and Skills for Psychological Recovery \(SPR\)](#)
- [PFA for MRC Field Operations Guide](#)
- [Bloodborne Pathogens](#)
- [Basic Life Support \(BLS\)](#)
- [De-escalation](#)

### Shelter Operations

- Capital Area MRC, New Hampshire Regional Shelter Plan and Annexes Template: This plan was developed through the NACCHO MRC Challenge Award and is adaptable for regional or local jurisdictions. It includes

comprehensive templates to build multi-partner shelter response plans, including job action sheets, shelter inventory lists, operations tasks list, pet sheltering operations, and forms. [View these instructions](#) on accessing the shared site and downloading the document.

- CDC's [Interim Guidance for General Population Disaster Shelters During the COVID-19 Pandemic](#)
- American Red Cross [Sheltering Handbook](#)
- FEMA and American Red Cross [Sheltering Field Guide](#)
- FEMA [Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters](#)



# MRC Mission Sets

## ASPR TRACIE Topic Collections

The [HHS ASPR Technical Resources, Assistance Center, and Information Exchange \(TRACIE\) Topic Collections](#) offer key resources under specific health and medical preparedness topics. The Topic Collections include peer-reviewed and other publicly- and privately-developed materials (e.g., fact sheets, technical briefs, articles, toolkits, webinars, plans).

Suggested Topic Collections to support Mission Set development include:

- [Access and Functional Needs](#)
- [Alternate Care Sites \(including shelter medical care\)](#)
- [Communication Systems](#)
- [Veterinary Issues](#)
- [Influenza Epidemic/ Pandemic](#)
- [Family Reunification and Support](#)
- [Fatality Management](#)
- [Mass Distribution and Dispensing of Medical Countermeasures](#)

- [Mental/Behavioral Health \(non-responders\)](#)
- [Patient Movement and Tracking](#)
- [Pharmacy](#)
- [Responder Safety and Health](#)
- [Volunteer Management](#)
- [Social Media in Emergency Response](#)

## Other Resources:

- CDC's [Natural Disasters and Severe Weather page](#)
- CDC's [Center for Preparedness and Response](#)
- CDC's [Caring for Children in a Disaster page](#)
- CDC's [Preparedness and Safety Messaging for Hurricanes, Flooding, and Similar Disasters](#)
- [FEMA Mobile App and Text Messages](#)





## Conclusion and Acknowledgments

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Both the 2019 and 2021 MRC Deployment Readiness Guides and many of the tools included in the guides are available on the NACCHO MRC webpage at [bit.ly/NACCHOMRC](https://bit.ly/NACCHOMRC).

For more information about the MRC program, visit [aspr.hhs.gov/MRC](https://aspr.hhs.gov/MRC) and [bit.ly/NACCHOMRC](https://bit.ly/NACCHOMRC).