Manager's Message

Theresa Gonzales
Manager, Response Personnel Unit

Happy Summer 2021! We hope you find the articles in this issue of the DHV Journal informative. The DHV System has over 107,000 volunteers registered! Please see below for highlights on the Disaster Healthcare Volunteers and Medical Reserve Corps. Volunteerism in California is phenomenal. Thank you for participating in this important effort and helping California during the critical time of COVID-19.

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<th>MRC</th>
<th>DHV</th>
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The Medical Reserve Corps (MRC) is a national network of unpaid volunteers organized locally to improve the health and safety of their communities. MRC units engage volunteers to strengthen public health, improve emergency response capabilities, and build community resiliency. MRC units prepare for and respond to natural disasters, such as wildfires, hurricanes, tornados, blizzards, and floods, as well as other emergencies affecting public health, such as disease outbreaks. MRC's have regular meetings, training, and have requirements to join. MRC's may be tasked by county officials to respond as a team or as individuals in support of a public health, emergency, or disaster response. There are 35 MRC Units in California, and 33 are in the Disaster Healthcare Volunteers (DHV) System. These units can include both medical and nonmedical volunteers that support their medical mission.

The MRC's have been crucial in California's COVID-19 response efforts. There have been over 4,500 individual MRC volunteers deployed for COVID-19 pandemic response and medical support across the State. There have been 26 MRC Units in California that have activated for COVID-19, and their volunteers put in approximately 153,000 hours. MRCs have volunteered their time and skills in COVID-19 vaccination clinics, COVID-19 testing sites, COVID-19 hotlines, contact tracing, patient care, alternate care site support, and operation center support. MRCs are comprised of Physicians, Nurse Practitioners, Physician Assistants, Registered Nurses, Licensed Vocational Nurses, Emergency Medical Technicians, Paramedics, Medical Assistants, retired medical personnel, and nonmedical support staff. During the COVID-19 pandemic, California MRC Units have more than doubled in size. There are over 19,000 accepted/pending MRC volunteers within the DHV System in California. MRC's continue to support California's healthcare and emergency response systems as urgent needs arise across the State.

Volunteer with your local MRC and join your community in the fight against COVID-19. More information on MRC's can be found at https://mrc.hhs.gov/.

If you have yet to register for your local MRC Volunteer Organization, please login to your account at www.healthcarevolunteers.ca.gov and follow the below steps:

1. Access your Organization's tab, click All Organizations.
2. Expand Organizations, click on the unit in which you reside or closest to where you reside.
3. Select Join to the right of your screen next to that Unit name.

Please note, if you live in Los Angeles, you will want to expand the Los Angeles County Organizations and then select one of the MRC Units.

I encourage you to read the articles of the MRC response efforts starting on page 6. Please also see pages 16-18 to read the MRC testimonials, which include heart-felt stories and quotes from some of our many heroes that have deployed during COVID-19.
Message from Robbie Smith

The California Medical Assistant Team (CAL-MAT) is a paid volunteer program within the Emergency Medical Services Authority under Emergency Support Function (ESF) 8, which provides medical care across California. There are currently five CAL-MAT Units located in the State that prepare for and respond to natural disasters such as wildfires, earthquakes, floods, and other emergencies like the COVID-19 pandemic and terrorist attacks. These Units include both medical and nonmedical paid volunteers that provide care when activated. During a disaster, members can deploy for a minimum of one week to various locations across the State. Since the start of COVID-19, there has been a significant increase in CAL-MAT recruitment. The program has grown from 200 CAL-MAT members to over 1100 members. Many more potential members are pending acceptance to the program. CAL-MAT members have regular meetings with their assigned Units for reoccurring training, information sharing, and to build on lessons learned from previous responses.

CAL-MAT has been hard at work assisting with the COVID-19 pandemic in 2020 and 2021. CAL-MAT treated over 8,000 patients, support 140 medical missions, including Alternate Care Sites (ACS), Long-term Care Facilities, Medical Clinics, and Migrant Hubs. CAL-MAT members also conducted COVID testing and supported vaccination clinics across the State.

Not only has CAL-MAT responded to COVID-19 related activities but has responded to the 2020 and 2021 California wildfires. CAL-MAT supported 26 CAL FIRE Base Camps to provide medical care and COVID testing to firefighters on the frontline. In addition, CAL-MAT supported general population evacuation shelters by providing care for victims. Throughout the course of several months, there have been over 4,300 individual CAL-MAT deployments.

Individuals interested in joining CAL-MAT can do so by following the link here at https://emsa.ca.gov/cal-mat-phase-i-registration/ to apply and register with the DHV system at https://healthcarevolunteers.ca.gov/. Some of the positions with CAL-MAT are LVNs, RNs, Physicians, Pharmacists, Administrative, and Warehouse Workers.
CALIFORNIA HEALTH CORPS (CAHC)

CAHC is a California State program that began in April 2020 at the height of the COVID-19 pandemic. The CAHC mission is the recruitment and ongoing maintenance of an emergency workforce comprised of health care professionals with active licenses, to provide support to medical facilities that could be impacted by a potential surge in COVID-19 patients. The program is designed to provide medical facilities or vaccination PODs with CAHC participants from the surrounding local or geographical areas to fill medical facility staffing shortages during a pandemic or other declared disaster. CAHC utilizes healthcare professionals such as Nurses (RN, LVN, CNA), Emergency Medical Technicians (EMT), Nurse Practitioners, Physicians (MD, DO, Psychiatrist), Physicians Assistants (PA), Respiratory Therapists, and Behavioral Health Professionals.

During the COVID-19 pandemic, CAHC participants were deployed to Surge Facilities like Sleep Train Arena, hospitals, skilled nursing facilities, and vaccination points of distribution (POD), and have worked a combined 57,000 hours providing patient care and vaccination administration throughout the State. To learn more about the program or to apply for California Health Corps, visit https://emsa.ca.gov/ca-health-corps/. For general questions, please email us at cahealthcorps@emsa.ca.gov.

CAHC NEW EMSA Personnel

Jason Guzman is a Senior Emergency Services Coordinator with Emergency Medical Services Authority (EMSA). Jason is an EMT and has over 20 years of EMS experience. He came to EMSA by way of the CAL-MAT program having volunteered in March of 2020. After completing his initial deployment in the field, Jason was assigned to the Response Personnel Unit (RPU) at EMSA Head Quarters working with a team to coordinate and deploy CAL-MAT members to various missions throughout the State of California. Jason accepted a position with EMSA’s Disaster Medical Services Division in March of 2021 and is currently working as a CA Health Corps Program Coordinator.

Tim Mihalakos is a Senior Emergency Services Coordinator with the Emergency Medical Services Authority (EMSA) and a four (4) year U.S. Navy veteran. After his military enlistment, he went to work for the California Governor’s Office of Emergency Services (Cal OES) where he was heavily involved in California’s disaster response & recovery efforts. With Cal OES, Tim responded to over 100 Federal and State declared disasters and fires and expanded his emergency management knowledge by getting his Emergency Management Specialist certificate. Tim left Cal OES after 12 years to join the EMSA team. Within the Health Information Exchange Unit (HIE) for two years, he coordinated the sharing of medical information between local and regional healthcare organizations. Tim then accepted a position within EMSA's Disaster Medical Services Division (DMS), where he currently works as a California Health Corps Program Coordinator. Overall, Tim has enjoyed an almost 15-year career in Emergency Management for the State of California.
New Response Personnel Staff

**Jacob McGee, Sr. ESC, California Emergency Medical Services Authority**

Jacob McGee began working for EMSA as a student assistant in 2011. After graduating from college, Jacob returned to EMSA in the Disaster Medical Services Division in 2020 to assist in the COVID-19 and California wildfire relief efforts. Jacob is a Response Personnel Coordinator for the California Medical Assistance Team program (CAL-MAT) and coordinates efforts with CAL-MAT, the California Health Corps, and Disaster Healthcare Volunteer base.

**Janet Lago, AGPA, California Emergency Medical Services Authority**

Janet Lago began working for EMSA with CAL-MAT in the Response Personnel Unit of the Disaster Medical Services Division in March of 2020. Prior to that, she worked for over 25 years as a movie theatre manager. She is currently pursuing a Bachelor of Science degree in Human Resource Management.

**Jim Dong, ESC, California Emergency Medical Services Authority**

Jim Dong began working for EMSA with CAL-MAT in the Department Operation Center in October of 2020. Prior to that, he has worked in IT over the last six years with UC Davis University and the Medical Center. Throughout his time with Cal-MAT, he has worked on a wide range of projects across multiple departments and has supported the Logistics and Operations effort across numerous missions.

**Robbie Smith, Sr. ESC, California Emergency Medical Services Authority**

William “Robbie” Smith currently resides in Wilton, California. Robbie is a graduate from Brigham Young University-Idaho, receiving a Bachelor of Science degree in Healthcare Administration. He started at EMSA in the Disaster Medical Services Division as a CAL-MAT member in 2020, assisting with the Covid-19 pandemic and wildfire relief efforts as a Response Personnel Coordinator. He has worked in administration, including legislation, long-term care, and event management. Robbie enjoys activities with family and friends and is actively involved with church duties.
COVID-19 Response Efforts – DHV & MRC

**Alameda County DHV Unit and ALCO MRC Unit (2583)**

Alameda County EMS has a robust and effective Disaster Healthcare Volunteer program, including the Alameda County DHV Unit and the ALCO MRC. During the compelling COVID-19 pandemic response starting March 2020, these enthusiastic volunteers significantly contributed to fulfilling many personnel needs. The over 200 DHV and 50 MRC reinforced the hospital, long-term care, testing sites, and vaccination sites with both clinical and non-clinical responders. Emergency Medical Technicians, Paramedics, Nurses, Medical Assistants, Physicians, Dentists, Pharmacists, retired medical personnel, nonmedical support staff, and Nursing students are the professional types that supported the response.

The MRC active team members participated in several vital missions as follows: 1) provided research, guidance, and educational updates from the CDC, California Department of Public Health (CDPH), Alameda County Public Health Department (ACPHD) with a focus on the community partners, long-term care facilities, and clinicians; 2) proactively reached out to the Alameda County Long Term Care Facilities (LTCFs) to review the health officer orders and ensure compliance to reduce the number of LTCF outbreaks. 3) participated with contact tracing and investigation; 4) deployed trained mobile field COVID testing teams throughout the County with a focus on homeless encampments, isolation hotels, LTCF’s, and other outbreak sites; 5) provided COVID testing training for nurses at several locations, and 6) mobilized quickly to provide medical and nonmedical staff and volunteers to the COVID-19 vaccination Point of Dispensing (PODs) throughout the County. As of June 2021, the MRC is staffing vaccination PODs, providing clinical updates for community partners, activated a mobile field vaccination team (serving those with mobility issues), and deployed their mobile field COVID testing teams that work with the public health laboratory to provide surveillance data.

These exceptional volunteers were crucial to the healthcare COVID-19 response capabilities and contributed to community resiliency. Given their significant impact, these volunteers will be maximized and sustained as needed for future emergency response needs.
California Health MRC (2580)

California Health Medical Reserve Corps Deploys for COVID Response

As vaccines became available and mass vaccination sites were established, California Health Medical Reserve Corps (CHMRC) focused its efforts on reaching the hard-to-reach and vaccination hesitant population, those who were unable or afraid to attend the mass vaccination sites. We wanted to give the same level of care by going directly to them and providing access to services that they would not otherwise receive.

The greatest challenge? The unknown. How would these services be received? Do the groups and individuals want or need the services that we could provide? If we build it, will they come? Without a doubt and without exception, the answers were an overwhelming YES!

CHMRC, in collaboration with Public Health Departments, community food banks, university health programs, community-based organizations, medical clinics and hospitals, established pop-up vaccination clinics. We not only get shots in arms, but provided food, clothing, COVID testing and enrollment in clinics for on-going medical services. CHMRC went to farms, migrant centers, community centers, factories, and churches. Over 225 volunteers donated 1500+ hours and provided just over 1700 vaccinations working together with clinical, public health and CHMRC staff.

The partnerships that CHMRC built continue to provide a coordinated end-to-end approach to the health of the community. By working to ensure that public health, local clinics and community-based organizations participate in vaccination events, a full range of services can be provided. Individuals who were otherwise unaware that these services existed at low/no cost, now have access, and have enrolled in these programs.

It was rewarding when the newly vaccinated individuals, asked to have their pictures taken with the band-aid on their arm, their CDC vaccination card, and a HUGE smile on their face, so they could send it to family and friends with the caption I’VE BEEN VACCINATED!

Our volunteers were excited to participate and want to do more. In the de-brief following an event, first-time volunteers commented: “This event was so fulfilling.” Or “It was rewarding for me to see the joy on people’s faces when they got their first shot.” That was followed by: “I would like to do this again, how can I sign up to help?” In short, CHMRC recruited nine volunteers to enroll with their local MRCs after our events.

The age-old adage about volunteering - that you always get more than you give - is certainly true. As an MRC volunteer your time does make a difference and you touch not only the individual, but the entire community.

Through these pop-up clinics, CHMRC has built greater collaboration, trust, and sense of community. Also, CHMRC has a clearer vision of what is needed to help all communities throughout California have the technical and programmatic infrastructure to deal with future emergencies and crises.
MRC Los Angeles (44)

The year 2021 has been an active and rewarding year for MRC Los Angeles unit. From January to June 2021, MRC Los Angeles members donated close to 7,000 volunteer service hours to support COVID-19 vaccine response efforts through large-scale "Drive-up" Points of Dispensing (POD) sites for vaccine, smaller "Walk-up" PODs, and vaccine distribution sites in partnership with local community organizations, pharmacies, and schools.

MRC Los Angeles unit serves one of the most diverse and populous counties in the nation. Before the COVID-19 pandemic, the unit had nearly 2,000 active members, and since then, the unit has grown by nearly 40% to 2,755 clinical and non-clinical members.

During COVID-19 Vaccine deployment, MRC Los Angeles members assisted in clinical and non-clinical roles which included client registration, screening, vaccine administration, observation and monitoring for adverse reactions after COVID-19 vaccine administration, including support to the pharmacy team for vaccine distribution and vaccine preparation. Other roles included assistance with logistics, translation, line and traffic control.

One of the top strengths of MRC Los Angeles is its members who have been trained, exercised and deployed to enhance capabilities to serve the diverse and vulnerable population of LA County and work cohesively as team in preparation of public health emergencies; and most importantly, their willingness to assist during public health emergencies.
Merced County DHV Unit

DHV registered volunteers helped out at the Merced County vaccination sites. Our volunteers performed various duties. Besides working tirelessly at the vaccination sites, greeting, seating, documenting and comforting members of our community who were fearful of needles, they manned booths at community events and even went door to door to provide vaccination information.

Sacramento Medical Reserve Corps (42)

From March 2020 to June 30, 2021, a total of 22,300 volunteer hours were served by 340 Sacramento MRC medical and nonmedical members for the COVID-19 response effort in Sacramento County, an estimated economic value of $1,025,380. Members filled the following roles: vaccinator, tester, monitor, traffic control, runner, hotline, after-hours calls, laboratory courier/data entry, case investigator/contact tracer, translator, registration, and EMR documentation. Agencies supported at drive-thru and walk-in clinics include Sacramento County Public Health, Cosumnes River Fire Department, Sacramento County Health Center, St. Paul Missionary Baptist Church, Natomas Unified School District, Dignity Health and Equivax. The Sacramento MRC membership has grown to 850, an increase of four times the number of members before the pandemic.
San Benito County DHV Unit

Over the duration of the COVID-19 pandemic, San Benito County Public Health Services conducted 27 mass vaccination events. These successful COVID-19 vaccination events delivered almost 5,000 doses. This triumph could not have happened without the generous and thoughtful efforts of the more than 250 volunteers. Comments made during these events included: "Why does it have to be so hot", "Why does it have to be so cold", "My helping protect local neighbors means someone is protecting my son in Florida", “This is my way of seeing all my friends even though I don’t recognize them with their mask on”, “I’m currently taking nursing courses and helping simply gives me purpose,” “We can get through this thing together.”

San Benito County Health and Human Services thanks and commends the champion volunteers who stepped up to assist and protect their community in the most epic emergency of the century.
San Luis Obispo County MRC (1633)

The San Luis Obispo Medical Reserve Corps started 2020 with about 40 members. We ended the year with over 1,000. From training at our Alternate Care Site to testing care facilities to vaccinating our community, our volunteers have been integral to our County’s response to the pandemic. They are all amazing people who jumped at the opportunity to help others in a time of great need. Here is the experience of one of our volunteers Steve Otto:

“As part of my “active” retirement (including a year on the San Luis Obispo County Grand Jury and as a Precinct Inspector during multiple elections), I wanted to do whatever I could to help out during the COVID crisis. After getting both my shots at sites managed by the Health Department of the County of San Luis Obispo, I couldn’t fail to notice the valiant work by the volunteers who staffed these locations (and the welcoming smiles on their faces- although covered by a mask!). So, after checking out the “MRC” website and filling out all the paperwork, I started service as a “nonmedical” volunteer—first at Cuesta College, then at the County Government Center in Arroyo Grande. What a rewarding experience to be on the front lines administering the vaccine to many hundreds of my fellow residents! To see their anxiety and trepidation going, in; and their great relief and satisfaction on the way out!”

We are so thankful to all of our wonderful volunteers for all they do! We plan to have trainings, skills refreshers, and other fun volunteer events after we finish our response to COVID to continue the positive changes our MRC has brought to our community.

Two SLO MRC volunteers that were essential to vaccination POD, Kevin McCarthy and Brandi Lykes.
The Santa Cruz County branch of the Medical Reserve Corps has been active in the CoVID-19 Response since March 2020. Just under 100 volunteers have been deployed in the CoVID response. The number of volunteers registered with MRC more than doubled once vaccinations became available which far exceeded the capacity to onboard. Over 11000 volunteer hours have been logged to date with 6470 hours in CI/CT and over 5000 in the vaccination effort.

Beginning in March 2020, a core group of MRC volunteers spent many hours a day on the telephone reaching out to individuals who had tested positive or reportedly been in contact with a CoVID positive person. In addition to information gathering, the CI/CT team educated community members on infection control best practices and CoVID resources and testing facilities available throughout the County. It was a very busy start to an extremely active pandemic response.

As vaccination became more readily available, the Contact Investigation/Contract Tracing team workload decreased and many of those volunteers moved into vaccination roles. MRC volunteers worked at mass vaccination clinics, local pop-up clinics, and clinics organized in conjunction with Community Healthcare partners (local hospitals and community based clinics). MRC volunteers were active in vaccination, cold chain, vaccine support and medical response at many of these clinics. All volunteers were fit-tested and required to have completed the Disaster Service Worker Oath prior to deployment and worked within the DOC structure.

Santa Cruz County was one of the first counties to deploy a Vaccine Strike Team in the vaccination effort. The Vaccine Strike Team (VST) was comprised of core group of MRC volunteers who were selected based on past performance, availability and dedication to the MRC and County Health Services Agency mission. The Vaccine Strike Team, first deployed on Feb 2, 2021, was initially created to vaccinate homebound individuals and their caregivers. These individuals were identified by local community agencies such as in home support services for seniors, caregiver resource centers and Santa Cruz County Hospice. The VST outreach quickly expanded to include long term care facilities, skilled nursing facilities, prisons, crisis stabilization programs and other congregate facilities. While the primary role was to vaccinate homebound individuals/caregivers and patients/staff in congregate settings, VST members also provided outreach and education on infection control and the safety/effectiveness of the vaccines to families, staff and patients.

One of the biggest strengths of our core group of volunteers is their assimilation into the community. Many of the MRC volunteers were trusted members and healthcare professionals in the community prior to joining the MRC. As a result, they were already well known in some of the hardest to reach populations and were familiar with culture of the groups within the County. This allowed them to quickly build trust and accountability with community members helping to achieve the key goal Public Health goal of equity in the response to Covid. The amazing volunteers of Santa Cruz County MRC have been instrumental in convincing many vaccine-hesitant individuals to get vaccinated.
By far, the biggest challenge for the Santa Cruz County MRC Unit during CoVID was the co-occurrence of the CZU Lightning complex fire which started in mid-August of 2020 and quickly spread through many of the wooded rural communities in the County. Thousands of homes in the County were evacuated and over 900 homes were destroyed. Many residents flocked to shelters throughout the County in search of lodging, resources and supplies. Approximately 40 MRC volunteers worked at these shelters from late August to mid-September. Some volunteers worked 12 hour shifts and many worked multiple shifts. Volunteers who worked just one or two shifts were incredible about being flexible with hours, locations, being on-call and ready to deploy when needed. MRC volunteers were the sole providers of medical services at most shelters until the EMSA/CMAT field hospital arrived. MRC volunteer were required to screen incoming evacuees for CoVID-19, triage, first response/first aid, hand out OTC medication, store Rx medication, document patients seen and treatments rendered. Unfortunately, these fires coincided with a surge in CoVID-19 cases at a time when vaccines were not yet available. MRC were also tasked with infection education and control to ensure that those displaced from their homes did not contract the CoVID-19 virus. Their efforts were quite successful!

As the 18th month of the CoVID-19 response comes to a close and vaccine demands are winding down, the MRC volunteers remain ready to deploy when/when needed. Several volunteers still work at pop-up clinics and community-based clinics. VST members continue to travel to homes of homebound patients who are in search of vaccine. It is the hard-work, dedication and flexibility of these volunteers that contributed to Santa Cruz County having one of the highest vaccination rates in California! Santa Cruz County MRC also received special recognition from the Congressional Record on February 25th, 2021.

Many of the MRC volunteers have stated that their volunteer work with the Santa Cruz County MRC has been very rewarding. Unlike in their normal medical practice, patients or community members that the MRC serve in times of crisis or disaster are happy to see them and it leaves them with a satisfied sense of fulfillment. Volunteering with the MRC in such a small community has allowed professionals who worked in various aspects of the health care community to reconnect in their years of retirement and reestablish past friendships.

Karen Hackett, Santa Cruz County MRC – Health Services Agency Liaison
Solano Healthcare Emergency Auxiliary Response Team (HEART) (2353)

Solano HEART Medical Reserve Corps (Solano HEART) has assisted with the COVID-19 response since February 2021. The Corps has assisted at mass vaccination and pop-up clinics throughout Solano County by assisting with registration, administering vaccinations, observing individuals post-vaccination, preparing vaccine for administration, directing foot traffic, and other duties as the needs arose. Solano HEART consists of a group of medical and nonmedical professionals who care deeply for the Solano County community, and have worked, and continue to work, tirelessly and selflessly to serve them. Solano HEART professionals include RNs, CNAs, EMT trainees, EMTs, Paramedics, one DDS, one Registered Dental Hygienist, one MD, nursing students, and retirees and professionals from various sectors, such as business and education. As the Solano HEART Coordinator, I am truly thankful to serve this fantastic cadre of dedicated people.
Stanislaus County Medical Reserve Corps (1413)

The Stanislaus County Medical Reserve Unit began its activation in July of 2020 in response to the widespread of COVID-19. The support began with shelter screenings and assistance in COVID-19 testing sites. In January of 2021 the SCMRC began assisting efforts of vaccine administration to our community. A total of 46 MRC volunteers were deployed throughout the County in various roles including administrative support staff and vaccinator staff. Their dedication to serve facilitated the County in accomplishing its mission to control the spread as well as providing the vaccine to protect our community from COVID-19.

Our unit’s volunteers played an instrumental role that lead to 147,000 residents receiving the COVID-19 vaccine from January 2021 through June 2021. Over 2,000 volunteer hours were clocked, attesting to the commitment our volunteers hold to providing support to our community. Antonia Jardine who assisted since the summer of 2020 as a nurse became an instrumental asset during our response. She states "I have had the privilege of being an SCMRC RN volunteer since the summer of 2020. I have assisted with COVID testing, shelter RN duties and vaccination clinics. I have found everyone I worked with to be dedicated to the mission of supporting our County in the pandemic response. I look forward to future opportunities to be of service as a SCMRC volunteer."

Volunteers like Antonia show case the dedication of our community to stand together and serve. Without our volunteers we would not be able to provide a rapid response when our community is in need. The SCMRC is paramount to our community mission to enhance the infrastructure of the County’s emergency medical response.


SCMRC Volunteers and County Staff setting up during a POD of COVID-19 vaccine in Crows Landing on March 30, 2021. Mobile PODs like these ensured equitability and access to the vaccine in our Rural and underserved communities.

SCMRC Volunteers and County Staff on the last day of operations on June 30, 2021 at the California State University Stanislaus, which became one of our largest vaccine clinics during our response. Vaccinating over 2,900 residents in one day during the height of increased demand for the vaccine.
Local DHV Members Answer the Call in Tuolumne County

Tackling a vaccine rollout in a rural county comes with many challenges. For a small Public Health Department with limited staff, these challenges are often met with support from outside sources. Fortunately for the Tuolumne County Public Health Department, local DHV members were ready and willing when they received the call in January 2021. From January to early June, 55 DHV members, comprised of both medical and nonmedical volunteers, have logged more than 1,473 hours assisting the County with its COVID-19 response. As a result, more than 21,000 people in Tuolumne County have been fully vaccinated. This represents a success that would not have been possible without the help of our dedicated volunteers. For local retired RN Karen Swanson, answering the call allowed her to help her community, while also being mindful of her own health, safety, and time limitations. She detailed her motivation for joining stating, “I wanted to contribute to ending the pandemic…I also had prior emergency vaccination clinic experience from Hurricane Katrina, so I knew that we could do this and reassure the public at the same time too.” Over the course of 5 months, DHV members assisted with 30 mass vaccination events, held in various areas across Tuolumne County. They worked side by side with local Public Health staff, vaccinating as many as 1,300 people per day. When asked about the most memorable moment of her volunteer experience, retired PHN Kathy Amos explained, “I believe the most profound moments were seeing retired medical and nonmedical personnel from many different disciplines come together with Public Health staff to work towards a common goal of getting people safely vaccinated”. Her advice to anyone considering joining DHV: “DO IT, JOIN UP and be part of something special for our community”. On behalf of Tuolumne County Public Health, thank you to the volunteers across California who have donated their time and expertise to the COVID-19 response!
Testimonials from MRC Volunteers

Stories from MRC Volunteers

One particular patient stands out: Early on in the mass vaccination clinics at the fairgrounds, an elderly woman drove up in a similarly old car. I asked if she had any questions, and she asked if I had to wear gloves while I vaccinated her. I told her that the CDC had no prohibitions and left it up to the vaccinator. I usually wear them because it made the clients feel better, but I had no qualms about doing vaccines without them. She asked if I would not wear them, and I gave her vaccine without them. When I was done, she thanked me, and in a quiet voice said, “That’s the first time I have been touched by another human being in over a year.” We both had tears in our eyes as she drove off.”

Kate, RN PHN-Santa Cruz MRC

One incident that touched me. At one clinic, a young man in his early 20s told me which arm he wanted his vaccination in and when I rolled up the sleeve on that arm, there was a tattoo of a young man in a military uniform. He told me it was his brother who was in the military and died tragically. I offered to use the other arm and he said no it was alright. After I had given him the injection, he said, somewhat half-jokingly but also sincerely, “now we are both vaccinated”. – Solano Heart MRC

“My fondest memory was when a woman found herself surprisingly emotional after her shot because now she felt at ease in visiting her elderly parents out of State. I’ve heard so many reasons why individuals received their shot, and the common denominator was to be able to be with their loved ones again—a privilege that I’m sure we’ve all taken for granted in the past. Thank you again Solano HEART, Kaiser, Northbay and Partnership leaders—you’re the real MVPs!” –Solano Heart MRC

As a volunteer nurse practitioner with the Long Beach MRC, I have never really felt that I had the time to contribute in a meaningful way. When the call came for volunteers at the mass vaccination center, I jumped at the opportunity and once I did I was hooked! The collaboration between the Health Department, MRC, National Guard, schools, and city agencies each day was a beautiful picture of a city coming together to make a difference. Many of our CSULB nursing students signed up during their vacation and for extra days when they were not receiving any course credit, simply because they genuinely wanted to serve their community. -Melissa Dyo, Faculty CSULB School of Nursing -Long Beach MRC
Quotes from the MRC

“The age-old adage about volunteering - that you always get more than you give - is certainly true. As an MRC volunteer your time does make a difference and you touch not only the individual, but the entire community.” (CA Health MRC)

“We got through this disaster together, and the next time something of this magnitude occurs, we’ll be ready.” (Solano Heart MRC)

“Volunteering was one of the highlights of the last 12 months and I’m so proud to have done so.” - Matteen (MRC Los Angeles)

“As a previous MRC volunteer, I can say that it is very rewarding to help in a time when it is needed. Volunteering gives you a sense of accomplishment and especially in a time of a pandemic, this is part of history. Being part of the MRC unit allows you to build skills that are not taught elsewhere.” (Long Beach MRC)

“Over the past 2 months, I have been introduced to DPH and learned the value of this Department! The monumental effort to "vaccinate everyone" has required commitment and hard work from a team of dedicated public servants. It has been my honor to serve as a volunteer pharmacist on the Vaccine Response Team led by the LA County Department of Public Health. When the unexpected opportunity to volunteer arose, I was hesitant to sign up but now I’m thankful that I did.” – Lorraine (MRC Los Angeles)

“I am proud to be part of Solano Heart! We were and are able to provide and give vaccines to people like a well-oiled machine!” (Solano Heart MRC)

“Volunteering with SMRC during the pandemic made me feel that I was making a difference in outcomes during the pandemic. It gave me purpose. It was amazing to see our very diverse group of volunteers work together as one big team, putting in so many hours to fight this pandemic. We are an amazing group!” Karen Cadle, RN (Sacramento MRC)

“The entire experience is value-added time no volunteer will ever forget” (San Diego MRC)

“It was inspiring to work alongside the entire team in serving our community.” Andrew Nevitt MD (Santa Cruz MRC)

“Providing COVID vaccines has been a highlight in my life! Witnessing the Solano County community 'stand together' in fighting COVID is a powerful image at every clinic. At the vaccination clinics, I’ve witnessed tears, smiles (behind the mask), heartfelt stories, dancing, professionalism, nervous energy, and random acts of kindness. I’m grateful for the strength, resiliency and compassion of our community! I am overcome with community pride and hope!”- (Solano Heart MRC)

“all the people with whom I’ve worked are lovely and help me feel like we are moving the needle in the right direction to fight the pandemic. That’s a terrific feeling. I’m really proud of being part of the team.”Dr Tiffany Chow (San Diego MRC)
What would you say to someone who is interested in joining their Local MRC?

The MRC is a great opportunity to give back to your community, learn new skills or apply your skills in unique and challenging environments. These teams are great for networking and you also build camaraderie with amazing, highly skilled people. I recommend any medical professionals who can spare a few hours a week, month or year to join. (Contra Costa MRC)

Joining an MRC is a fantastic way to give back to your community and grow personally and professionally. Many friendships blossomed among our volunteers. Joining an MRC is a way to connect with peers and mentors. You also have the opportunity to learn about the capabilities of your local government emergency response system and health department. Amidst the chaos, you’ll probably have some fun. (MARIN MRC)

As a previous MRC volunteer, I can say that it is very rewarding to help in a time when it is needed. Volunteering gives you a sense of accomplishment and especially in a time of a pandemic, this is part of history. Being part of the MRC unit allows you to build skills that are not taught elsewhere. (Long Beach MRC)

The entire experience is value-added time no volunteer will ever forget. Another volunteer stated “This is a large-scale effort, and all nurses could get on board to help out in whatever way we can. I enjoyed helping out. Folks being vaccinated were extremely appreciative, too. I consider everyone vaccinated a "success." (San Diego MRC)

Just Do it! Whether you want to enhance your skills, give back to your community, looking for inspiration or still figuring our your career goals, the MRC can provide that opportunity for you. (Solano (HEART) MRC)
California is fortunate that over **107,000** volunteers are registered on the DHV System. Volunteers can be notified and given opportunities to serve in critical healthcare and non-healthcare positions if and when a disaster strikes in our State. As you are one of those who have made the commitment to register as a potential volunteer, you may want to take a next step and complete entry-level disaster training. There are on-line FEMA training opportunities you can complete on your own schedule.

If you are registered on the DHV System but are not an MRC member you may not be aware of these free training courses. This training is not a requirement for participation, but we know that the training is easy to follow and gives you a valuable understanding of how disaster operations are managed and how you would fit into the structure during an assignment.

**IS-100.C: Introduction to the Incident Command System, ICS 100**

**Link:** [https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c](https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c)

**Course Objectives:**

At the completion of this course, you should be able to:

- Explain the principles and basic structure of the Incident Command System (ICS).
- Describe the NIMS management characteristics that are the foundation of the ICS.
- Describe the ICS functional areas and the roles of the Incident Commander and Command Staff.
- Describe the General Staff roles within ICS.
- Identify how NIMS management characteristics apply to ICS for a variety of roles and discipline areas.

**Primary Audience**

The target audience includes persons involved with emergency planning, and response or recovery efforts.

*Source: [https://training.fema.gov/is/crslist.aspx](https://training.fema.gov/is/crslist.aspx)*
DHV User Tips

COVID-19 Vaccine Enhancements

• A new question regarding COVID-19 vaccination status was added to the Deployment Preferences section in the My Profile tab. Volunteers can now enter COVID-19 vaccination information in DHV.

• Also, in the My Profile tab, in the Medical History section, another new question was added that asks volunteers to enter the date of their last COVID-19 vaccination.
### DHV System Opportunities

**Disaster Healthcare Volunteer (DHV)**
- Local Resource deployed by local County DHV Administrators
- Consists of individual volunteers
- This unit serves as a reserve list of personnel that can be called upon during emergencies
- There are typically no commitments or formal trainings required - Volunteer unpaid

**Medical Reserve Corps (MRC)**
- Local Resource deployed by Medical Reserve Corps Coordinator
- MRC Volunteers include medical and nonmedical personnel who strengthen public health, improve response capabilities, and build community resiliency
- Respond to emergencies as a team or as individuals in support of a public health or emergency disaster response.
- Each unit has their own requirements, meetings and training programs.
- Volunteer unpaid
- Find more information here: [https://mrc.hhs.gov/homepage](https://mrc.hhs.gov/homepage)

**California Medical Assistance Team (CAL-MAT)**
- State Resource deployed by the CA Emergency Medical Services Authority
- Deployed to support public health emergencies and disasters throughout the State of California that typically deploy for 14 days and may work in austere conditions
- Highly skilled groups of trained medical and nonmedical professionals that form a scalable medical field response team for rapid deployments
- Periodic training required
- Members become State compensated temporary emergency hires when deployed
- Find more information here: [https://emsa.ca.gov/cal-mat/](https://emsa.ca.gov/cal-mat/)

**California Health Corps**
- State Resource deployed by the CA Emergency Medical Services Authority locally to support staffing in healthcare facilities impacted by Covid-19
- Healthcare professionals sign up for individual deployment shifts based on availability, willingness to travel and skillset.
- Members become State compensated temporary emergency hires when deployed
- Find more information here: [https://emsa.ca.gov/ca-health-corps/](https://emsa.ca.gov/ca-health-corps/)

Log in to your account at [https://healthcarevolunteers.ca.gov](https://healthcarevolunteers.ca.gov) and follow the below steps: 1. Access your Organizations tab, click All Organizations 2. Expand Organizations, click on the unit in which you reside or closest to where you reside 3. Select join to the right of your screen next to that Unit name. (Please note, if you live in Los Angeles, and want to select non-paid volunteer organizations, you will want to expand the Los Angeles County Organizations and then select one of the DHV and/or MRC Organization)
DHV is California’s ESAR-VHP Program

The Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) is a federal program created to support states and territories in establishing standardized volunteer registration programs for disasters and public health and medical emergencies.

Disaster Healthcare Volunteers (DHV), California’s ESAR-VHP program, administered at the state level, verifies health professionals’ identification and credentials so that they can respond more quickly when disaster strikes. By registering through ESAR-VHP, volunteers’ identities, licenses, credentials, and accreditations are verified in advance, saving valuable time in emergency situations.

Why Do We Need ESAR-VHP?

In the wake of disasters and public health and medical emergencies, many of our nation’s health professionals are eager and willing to volunteer their services. In these times of crisis, hospitals, clinics, and temporary shelters are dependent upon the services of health professional volunteers. However, on such short notice, taking advantage of volunteers’ time and capabilities presents a major challenge to hospitals, public health, and emergency response officials. For example, immediately after the attacks on September 11, 2001, tens of thousands of people traveled to ground zero in New York City to volunteer and provide medical assistance. In most cases, authorities were unable to distinguish those who were qualified from those who were not - no matter how well-intentioned.

There are significant problems associated with registering and verifying the credentials of health professional volunteers immediately following major disasters or emergencies. Specifically, hospitals and other facilities may be unable to verify basic licensing or credentialing information, including training, skills, competencies, and employment. Further, the loss of telecommunications may prevent contact with sources that provide credential or privilege information. The goal of the ESAR-VHP program is to eliminate a number of the problems that arise when mobilizing health professional volunteers in an emergency response.

Disaster Healthcare Volunteers (DHV)

In accordance with federal mandate, California has developed the Disaster Healthcare Volunteers (DHV) Program to facilitate and manage the registration, credentialing, and deployment of volunteer healthcare professionals (VHPs) in California. DHV uses a software system for the management of volunteers, including the registration, notification, communication, and credentialing needs associated with volunteer management. The DHV Program is the single source system operated and administered by local, regional, and State, public health, and emergency medical services agencies.

DHV is administered by all system stakeholders and managed by the California EMS Authority in partnership with the California Department of Public Health (CDPH). DHV volunteers include healthcare professionals (medical, public health, mental health, EMS, and other personnel) who are willing to be called upon in the event of an emergency or disaster. DHV volunteers are pre-registered and pre-credentialed. Deployment of volunteers will follow Standardized Emergency Management System (SEMS) procedures.

To register on the DHV system or get more information, visit our website, www.healthcarevolunteers.ca.gov
Have You Updated Your DHV Registration Information Lately?

We depend upon each of you to update your DHV profile with your correct information. It is important that you take a moment to update your DHV System information when your information changes. Have you moved? Do you have a new occupation or a new employer? Have your email or phone numbers changed?

Please take a moment to update your file. Just log into www.healthcarevolunteers.ca.gov and click on the "Profile" tab. From there, you can navigate through your information. Click on "Edit Information" to make your changes and then be sure to click on "Save Changes" when you have completed your edits.

The DHV Journal is Published and Distributed Via Email

News and information for participants in the Disaster Healthcare Volunteers Program administered by EMSA and operated by System Administrators in local communities and Medical Reserve Corps Coordinators throughout California. This Journal is published and distributed periodically to the partners of the DHV Program.

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