



Local Health Departments Rely on Medical Reserve Corps Volunteers to Respond to Emergencies



The Medical Reserve Corps

The Medical Reserve Corps (MRC) was created in 2002 after the terrorist attacks of 9/11. Authorized by the Pandemic and All-Hazard Preparedness Reauthorization Act of 2013, the program is a federal responsibility under the Assistant Secretary for Preparedness and Response at the Department of Health and Human Services (HHS) and is part of the nation's disaster

response and recovery efforts. Two-thirds of the nation's 1,000 MRC units are housed in local health departments. These highly skilled volunteers are doctors, dentists, nurses, pharmacists, and other community members who fill a critical role in increasing local health departments' capacity to respond to emergencies and other health needs.

To ensure the public's safety, NACCHO recommends that Congress adequately fund the Medical Reserve Corps in FY2016, rejecting the proposed cuts in the House and Senate Labor-HHS-Education Appropriations bills.

Medical Reserve Corps Snapshot

All MRC units that apply receive base funding (currently \$3,500/year) to support a unit coordinator and keep volunteer contact information up to date. MRC units may also apply for competitive challenge grants (currently \$15,000) to focus on specific community priorities.

MRC volunteers perform the following functions to ensure the safety and well-being of America's communities:

- Assisting in emergency response during a natural disaster, terrorist attack, or disease outbreak
- Staffing exercises to test local capacity to quickly dispense medicines in an emergency
- Staffing flu clinics to reduce spread to vulnerable populations
- Educating the public on personal preparedness
- Conducting screenings at health fairs

MRC FUNDING

FY2014:

\$11 million

FY2015:

\$9 million

FY2016 President:

\$6 million

FY2016 House:

\$6 million

FY2016 Senate:

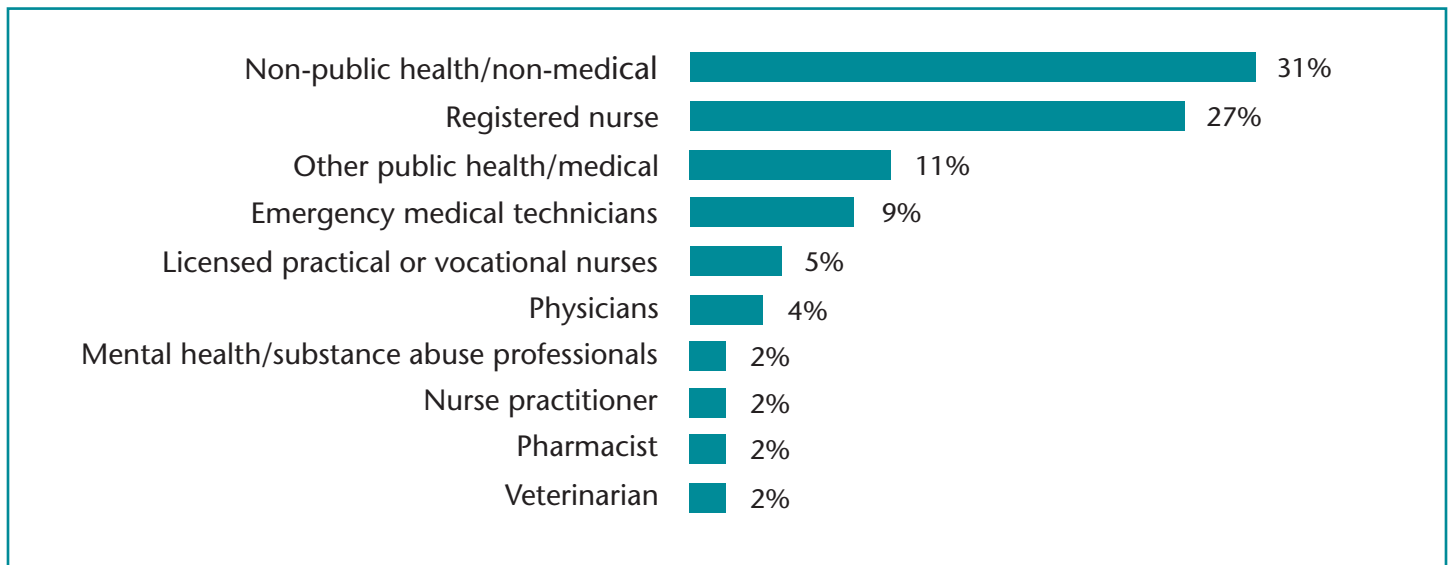
\$4 million

FY2016 NACCHO Request:

\$11 million
(same as FY2014)

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MRC VOLUNTEERS COME FROM DIFFERENT BACKGROUNDS



Disaster/Emergency Response

One-fifth (19%) of MRC units participated in an emergency response in 2014. The most common type of event those units responded to was natural disasters (64%), followed by infectious disease outbreaks (30%). After the Boston Marathon bombing in April 2013, MRC volunteers helping with the event responded immediately to triage victims and get them to hospitals.

Fast Facts

- Thirty-seven MRC units deployed during Superstorm Sandy in 2012, with more than 2,000 volunteers
- The average number of volunteers in an MRC unit is 221
- The MRC Network covers 91% of the U.S. population
- Sixty percent of MRC units use social media to reach the public

Ebola

During the 2014 domestic Ebola response, 169 MRC units reported 180 Ebola-related activities in service to their communities, including the following:

- Providing education about the spread of Ebola and how to stay safe
- Staffing call centers to respond to inquiries from the public
- Supporting screening efforts to identify potential Ebola cases

Funding

- Median budgets for MRC units have decreased by 11% from 2013 to 2015
- The majority of funding is for training volunteers and supplies
- Paid staff members spend an average of only 10 hours per week on MRC activities, in addition to other duties

About NACCHO

The National Association of County and City Health Officials is the voice of the approximately 2,800 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to ensure the security of our nation through preparedness and the safety of the water we drink, the food we eat, and the air we breathe. For more information, visit <http://www.naccho.org/topics/emergency/mrc>.

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NACCHO
National Association of County & City Health Officials

The National Connection for Local Public Health

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The mission of the National Association of County and City Health Officials (NACCHO) is to be a leader, partner, catalyst, and voice with local health departments.

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