

# WALPOLE MEDICAL RESERVE CORPS



## INSIDE THIS ISSUE:

### Member Articles:

<i>A Year In Review</i>	1
<i>H1N1 In The Schools Lessons Learned</i>	2
<i>Radios and Emergencies</i>	2
<i>Prepare for the Flu Season</i>	3
<i>Amateur Operators Needed</i>	4
<i>Training Opportunities</i>	4
<i>Scheduled Vaccine Clinics Dates and Times</i>	4

## Remember:

**Washing  
Hands  
Kills  
Germs !**

### MRC Executive Officers:

#### Chairperson:

Claire Wolfram, RN

#### Vice Chairperson:

Joseph Dorsey, MD

#### Secretary:

Ann Keller, RN

Newsletter: Gail Nixon  
Deputy Health Agent

## A YEAR IN REVIEW

### RECAP OF OUR MRC by R. Chapell, Health Director

This past year, some of our volunteers helped with the December Ice Storm in Fitchberg. Those that answered the call had the experience of aiding people displaced from their homes, and gained valuable experience in helping run shelters. The volunteers came back with stories to tell, feeling good about what they had done and sharing their new knowledge with us. All of this feedback will help our local Medical Reserve Corps be more ready and stronger in case we need to set up shelters for any weather related emergency in Walpole. Some of our volunteers also answered the call to be part of the Sweep teams at the Boston Marathon. They manned the finish line, and made sure that people needing any medical assistance were able to get the attention they needed.

Locally we had many volunteers practice our emergency dispensing plans as we gave out flu vaccines during our regular flu clinics. Our volunteers helped out in an array of positions. We had nurses and doctors administer vaccines, but we also had many non-medical members to register people, hand out information, and oversee food for our volunteers. All of our members were involved in communication drills to test our capacity to call upon you in the event of emergencies.

Our MRC has a *Leadership Team*. These dedicated people meet to discuss trainings we want to offer, our mission, and how we want to be organized. The leadership team is open up to all. We also organized another special team of volunteers, the *Behavioral Health Unit*. There are no special qualifications to be part of this team, but you must be a good listener and you must be willing to be trained to help people that are stressed. Some of our volunteers have received some training already. We will have future classes for people wanting to learn more about this, and advanced trainings for those that are interested.

A special **Meet and Greet** night, hosted this year by Siemen's at their East Walpole facility, was held in April to thank all our volunteers for the time they gave us this past year. This is the second year we had this event. It is a great opportunity for MRC volunteers to meet each other.

### **What you can expect as a member of the Walpole Medical Reserve Corps:**

1. Free training and continuing education credits, as you learn first aid, emergency management and disaster medical operations.
2. Skills development, to ensure you will be ready to pitch in when a medical crisis occurs.
3. Delivery of medical care within your level of expertise to commensurate with your background, skills, and expertise, as required by the incident
4. Networking with other volunteers, as part of a critically important and specialized team.
5. Options to participate in initiatives that enhance public health such as vaccination and education programs.
6. The ability to serve the emergency public health needs of family, friends, neighbors and loved ones in your own community.

This fall/winter we have an even greater need for volunteers, as the Health Department prepares for its seasonal flu clinics along with more H1N1 cases. There is a good possibility that we will be dispensing H1N1 flu vaccines, regular flu vaccines and pneumococcal vaccine, and be preparing to help Caritas Norwood Hospital should the flu season overwhelm their bed capacity. Please do consider asking a friend or neighbor to join you in volunteering with our Walpole Medical Reserve Corps.

## H1N1 In The Schools: Lessons Learned by Kathi Garvin and Anne Keller

Towards the end of the school year in June 2009, we had almost 100 students absent per day for five days from Bird Middle School, and almost 150 students absent per day for four days from Walpole High School. Increases in absences were noted at all the Walpole schools. It was an extremely stressful time for the school nurses, school administration, staff, and Walpole Health Director, Robin Chapell. Tracking the reasons for absences to confirm a "ILI" (influenza like illness) that would require a seven day exclusion from school, and daily calls to the state to see if it would be necessary to close a school consumed most of the day. Thinking ahead to the fall we discussed what worked, and what didn't work last spring.

It became clear that the biggest issue was communication. The schools as well as the health department were receiving their information from the state on a daily basis, and sometimes even more frequently. The guidelines for the restriction from school kept changing, making it difficult to keep parents up to date. Pediatricians were not initially notified of exclusion guidelines, and as a result did not understand why the nurses were insisting a child stay home if the doctor had diagnosed a "viral illness". Of course, any strain of the flu is a "viral illness". Once doctors were notified of the mandatory seven day exclusion for anyone with a fever and one other symptom of the flu, things were easier for the schools nurses. Parents were finally receiving the same message from both the schools and their pediatricians.

The School Department, working closely with the Health Department, provided a link to the Walpole Health Department's website on the school district's web page. In addition, the Walpole Health Department's website provided a link to the Center for Disease Control. Having these links easily accessible through the School Department's website was quite helpful for parents, with many of their concerns addressed by reading the information found there.

For example, one of the questions that was asked constantly was, "Why does my child have to stay home for a week if they feel fine?" Once parents understood that it was because the children were considered contagious for a full seven days, they were more comfortable with the seven day exclusion. At BMS and WHS where the numbers of students out for the seven days was extremely high, the guidance departments and teachers worked together to provide class work outlines and the homework assignments for absent students. Some teachers used web pages or email to communicate with their students. Alternatively, the school work was left with the guidance department or in the main office for parents, siblings, or friends to pick up. Adjustments for final exams for those who were absent were made, and all of the absences were considered "excused". This alleviated much of the parental and student concern over the mandatory absences.

There was an emphasis on frequent handwashing at the schools, and students were reminded daily. Those presenting with a cough appearing fatigued or flushed were sent to the nurse to be evaluated. Some students were sent as they arrived at school and ended up being sent home before attending class.

For the upcoming school year, the guidelines continue to change. At this time a shorter exclusion period is being discussed. Possible clinics for children for the H1N1 vaccine are also being considered. For the school nurses, focusing on handwashing, especially in the younger grades will be a priority in the fall. Log sheets have been developed to track more easily student's symptoms, and how long they need to be out of school. And if school based flu clinics become a reality, plans are in place to rotate the elementary school nurses so that nurses will not be administering the vaccine to the children in their school. The school health offices must remain safe, non-threatening places to visit. We are ready for the fall, but are hopeful that the H1N1 flu strain will continue to be a relatively mild illness and that our students will remain healthy during the upcoming school year.

## GRMS/FRS Radios and Emergencies by Roger Turner

Low cost, small, battery operated, short range portable radios can be an asset during an emergency. Some General Mobile Radio Service (GRMS) channels and all Family Radio Service (FRS) channels are used in GRMS/FRS radios. GRMS requires an easy to obtain FCC license. GRMS only radios have 23 channels, 8 of which are used in GRMS/FRS radios. FRS radios have 14 channels, are portable, are fixed at a lower power level, and are license free. GRMS/FRS radios have 22 channels, and the first 7 are **shared** between FRS and GRMS/FRS radios. Channels 8-14 are exclusively to FRS; channels 15-22 are exclusive to GRMS. When operating a GRMS/FRS radio you select the power output, but without an FCC license you must operate on the low power level.

**In Walpole we use channel 11. If other users are on 11, we would choose another channel between 8 and 14.**

GRMS/FRS radios are useful when home, traveling, on vacation, for shelter communications, or neighbor to neighbor. Think about starting a neighborhood communications network. In a time of an emergency, this is a good way to keep in touch with your neighbors.

What should you look for in GRMS/FRS radios? All of the name brand GRMS/FRS radios work well. We recommend that the radio use at least three AA batteries. The newer GRMS/FRS radios use four AA batteries. *Beware: Some radios are marketed with AAA batteries. Others have permanently installed rechargeable batteries which may sound convenient, but in emergencies they are seldom fully charged. They last a short time and there is no way to recharge the batteries if the power is out or if you are on an extended assignment. The old fashion reliable AA batteries will provide maximum life and are very available. In addition, some GRMS/FRS radios are sold with as many as 50 channels. If you are purchasing a GRMS/FRS radio, the 22 channel model is all you need.*

*Icom and Kenwood manufacture FRS only and GRMS only radios; however, they are of commercial grade and are more expensive.*

## We All Need to Prepare for the Flu Season

- It is ALWAYS a good idea to be vaccinated yearly for regular seasonal flu. In Walpole our first public **Clinic for Seasonal Flu will be on Tuesday, October 6, 2009 from 1- 4 P.M. at Walpole Town Hall**. Our first clinic will target people 50 years and older and people who are at high risk of serious flu complications (such as pregnant women and people with chronic illnesses). Most adults and children, except infants younger than six months should get vaccinated to reduce their chances of getting the flu. The reason our clinic is targeting people 50 years and older is because it is State supplied vaccine and that is the age that we are required to target with the free vaccine. Please check with your health care provider if you are not in that age range to get your seasonal flu vaccine.
- Pneumonia is a serious complication of the flu. The best way to prevent one common kind of pneumonia is be vaccinated against it. The vaccine is called pneumococcal vaccine. The Health Department, the Council on Aging and the Walpole Area VNA is sponsoring a **Pneumococcal Vaccine Clinic on Monday, September 21, 2009 at the Council on Aging starting at 12:30 P.M.** for adults age 65 years and older and other adults who have serious long-term health problems or those who have weakened immune systems.
- This year, the federal government will be providing H1N1 vaccines. We are hoping that as many people as possible will get vaccinated because the more people that get vaccinated, the better chance that we have to curb this influenza in Walpole. H1N1 vaccinations will most likely require having two doses given about 21-28 days apart. The Health Department will schedule public clinics for this once we have a better idea when the vaccines will arrive. These vaccines will also be prioritized based on the highest risk groups and the amounts of vaccines we receive. As we receive more vaccines, our list of people that we can vaccinate will grow. We will be giving more information about these clinics as they get closer.
- Influenza is thought to spread mainly person to person through coughing and sneezing of infected people. Frequent hand washing with soap and water when possible, covering noses and mouths with a tissue when coughing or sneezing (or coughing or sneezing into your elbow) and staying at home when you are sick will prevent you and others from spreading the disease. People give off more flu virus when they have a fever, so staying home during this time will be especially important to not spread the flu to friends, co-workers and fellow students.
- Follow public health advice regarding any school closures, avoid crowds and use other social distancing measures if they become necessary.
- Planning now, for the possibility that you have to stay home from work or school is key. It is also important to think about storing a two week supply of water and food. During illness when you cannot get to a store, or if stores run out of supplies, it will be important for you to have extra supplies on hand. This can be useful in other types of emergencies as well, such as power outages and severe weather. Periodically check your regular prescription and non prescription drugs to ensure that you have a continuous supply available to you.
- Most importantly, **please stay informed**. Please check the Town's website at [www.walpole-ma.gov](http://www.walpole-ma.gov) for updates on H1N1. We are continually getting new guidance from the State and CDC on what is happening, who will be targeted for vaccines, how long people should stay home if they are sick (currently the guidance is to stay home for at least 24 hours after you no longer have a fever without the use of fever reducing medicines and regardless of whether or not you are using antiviral drugs).
- It is also always a great idea for people to eat healthy and exercise on a regular basis.

### HAM Radio (Amateur Radio) Operators are Needed:

HAM Radio operators with a minimum of a Technician Class FCC license may be needed to provide supplementary communication during an emergency. They could be the only radio source available.

Operators will have the opportunity to receive training to be part of a specialized communication group with assignment with government and non-government organizations such as the Medical Reserve Corps, Shelters, Reception Center, and Emergency Operating Centers (EOC) Center.

Please pass this request on to others. You may contact Roger W1ZSA, Walpole Communications Group at 508-660-7365. Or Email [wlp1ema@aol.com](mailto:wlp1ema@aol.com). Please put HAM in the subject.

Walpole Emergency Communication Group provides resources and coordination and works with the Town of Walpole, and various local and area groups.

## The Following Fall Training Courses will be held at Walpole Town Hall

<u>Date</u>	<u>Class Title</u>	<u>Location</u>	<u>Time</u>
September 29, 2009    Tuesday	Psychological First Aid Role Playing (Robin Chapell)	Room 112	6:30 pm - 8:30 pm
October 6, 2009        Tuesday	Swine Flu (H1N1) Update (Judith Chevarley, DPH)	Room 112	7:00 pm - 8:30 pm
October 15, 2009      Thursday	Heartsaver with AED for the layperson (Kathi Garvin & Anne Keller)	COA*	6:00 pm - 9:00 pm

### Scheduled Clinics at Walpole Town Hall:

September 21, 2009	Pneumococcal Vaccine (Blood Pressure clinic also!)	12:30 PM
October 6, 2009	Seasonal Flu Vaccine	1:00 PM - 4:00 PM

***MRC Volunteers! When the Seasonal Flu and H1N1 Flu vaccines become available, be sure to receive yours, not just to protect yourselves... but also to protect your family and community.***

### Website Trainings

**We encourage all of our volunteers to take the following website trainings.**

*IS-700a National Incident Management System (NIMS) - An Introduction*  
NIMS provides a consistent nationwide template to enable all government, private sector, and nongovernmental organizations to work together during domestic incidents.

**<http://emilms.fema.gov/IS700a/index.htm>**

*IS-100.a Introduction to Incident Command System, I-100*

This course describes the history, features and principles, and organizational structure of the Incident Command System. It also explains the relationship between ICS and the National Incident Management System (NIMS).

**<http://emilms.fema.gov/IS100A/index.htm>**

Town of Walpole's MRC web-site: <http://th.walpole.ma.us/WMRC/WMRCHome.htm>

Email us your ideas and suggestions: [rchapell@walpole-ma.gov](mailto:rchapell@walpole-ma.gov)

### *Mission Statement*

***The mission of the Walpole MRC, a volunteer group, is to support the Town's public health infrastructure, enhance emergency preparedness, crisis response and disaster recovery.***

***A common thread is integration of behavioral health assessment and intervention with all recipients of services.***

**THANK YOU FOR VOLUNTEERING!**