

THE TELEGRAPH



DMRC Quarterly Newsletter

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DMRC Activities

By: Elliott Nicholas, DMRC Staff

Looking back at the challenges of 2020, we are reminded of the dedication and compassion of DMRC volunteers. Last year, our volunteers recognized and responded to medical and mental health needs of our fellow Delawareans across the spectrum of food distributions and flu shot clinics to hurricane relief efforts and COVID-19 testing deployments.

It is a relief that Delaware’s 2020 hurricane season (from June 1 to November 30) resulted in just the one hurricane-related deployment in July. The 2020/2021 flu season, thus far, has been minimal as well, with DMRC volunteers being called to contribute 38 volunteer hours to support flu vaccination events conducted by Delaware Public Health.

The economic impacts of the COVID-19 pandemic increased the need for food in all three Delaware counties. The Food Bank of Delaware reported to us that the distributions that we supported resulted in the distribution of approximately 2.5 million pounds of food to 30,000 Delawarean households in need.

Thanks to DMRC volunteers that contributed over 430 shifts (totaling 1,500 volunteer hours!) to COVID-19 testing efforts, Delaware Public Health and community partners have also played a vital role in the efforts to flatten “the COVID-19 curve” and limit the COVID-19 spread in the community.

Through ongoing COVID-19 vaccine administration events, we feel confident that better days are surely ahead! As the COVID-19 vaccine continues to be distributed around the country, we continue to look for your help in assisting in the return of ours, and our neighbor’s, lives to “normal”. Please monitor your email and sign-ups for activities, trainings and deployment opportunities.

We are proud of our MRC and the hundreds of hours you’ve dedicated to training, community outreach, and deployment activities. Thank you!

Post Deployment Reminder: Please remember to submit your Time Log and Activity Log Forms to DMRC@Delaware.gov.

Thank you! #DMRCVolunteers



Images taken at DMRC deployment site from December: Food Bank of Delaware food distributions in Wilmington and COVID-19 Vaccine deployment in Smyrna.

Volunteer Spotlight

This quarter’s Volunteer Spotlight is on:



Willa “Patsy” Starke

Willa is a University of Delaware graduate who has been in nursing for over twenty years. Willa’s wealth of knowledge and certifications in the nursing field has made her a wonderful addition to our volunteer team.

Having joined during the height of the pandemic, Willa stepped up and contributed at deployments at various COVID testing sites, flu clinics and food bank distributions.

Willa, for your efforts we want to recognize and thank you for being ready and willing to support DMRC and Public Health efforts. More importantly, thank you for helping your fellow Delawareans in their greatest times of need.

NOTE: Please contact us if you would like to recommend a volunteer for our next spotlight.

Light at the End of the Tunnel

Wilmington Mayor Shares Important Announcement from Governor Carney and DHSS Regarding Coronavirus Vaccine
By Press Release Desk

"The arrival of the Pfizer vaccine is welcome news after nine long months fighting COVID-19," said Governor John Carney. "This vaccine will help protect our health care workers who are working day and night to care for the sick and save lives. But we are not in the clear yet. We are still in for a very difficult winter. Please wear a mask. It's a simple sacrifice to protect hospital capacity until we can vaccinate enough people to crush this virus. Don't gather with friends or family outside your immediate household. There is light at the end of the tunnel. Stay vigilant."

Follow the provided link to read the rest of the article.

Source: <https://patch.com/delaware/wilmington-de/wilmington-mayor-shares-important-announcement-governor-carney-dhss-regarding>

DMRC 2020 Volunteer Response

Food Bank Pantries (March – Dec.)

- Total number of people served at Supported pantries: 31,335
- DMRC First Aid Stations – 50 shifts, 212 hours
- DE BEST Support at Food Banks – 96 shifts 348 hours

Long Term Care Facility Nursing and CNA Support

- DMRC Support – 25 shifts, 223 hours

Naloxone Drive Thru Point of Dispensing

- DMRC Support – 14 shifts, 44 hours

Testing Results Calling

- DMRC Support – 7 shifts, 28 hours

Community COVID-19 Testing

- Milford Perdue Plant Testing
DMRC – 30 shifts, 36 hours
- DE BEST – 6 Shifts, 35 hours
- Wilmington High Rise Testing (863 tested) – 6 locations
DMRC – 95 shifts, 285 hours
DE BEST – 10 shifts, 30 hours
- First Responder Testing
DMRC – 8 shifts, 28 hours
- EPI Interviews at Community Testing in Sussex
DMRC – 11 shifts, 54 hours
- New Castle County Community Testing (July – Sept)
DMRC Support – 111 shifts, 544 hours
- Student COVID Testing in Dover (Sept)
DMRC Support – 157 shifts, 549 hours

COVID-19 Vaccine First Responders PODs

- DMRC Medical volunteers
12/29 & 12/30 – 45 shifts, 135 hours

Interpreter Corps Support

- Community Testing Site Interpreters – 6 shifts, 34 hours
- Interpreter Support at Non-congregate COVID-19 Positive Shelters - 19 shifts, 19 hours

Vulnerable Population Outreach/Education

- DMRC, DE BEST & Interpreter Support – 45 shifts, 121.5 hours

From One New Volunteer to Another

By Shasta Harrison, DMRC volunteer

As a new volunteer, I am sure you are anxiously awaiting your first deployment (I know I was) or have already deployed a few times and know how rewarding it is. In a time where things have felt uncertain, it feels good to participate in an organization that is so active throughout the state of Delaware. Here are a few tips, from someone who has been in your shoes to ensure that you are able to make the most of your experience with DMRC.

1. Always read your emails carefully. The beauty is in the details. Each email is full of important information to keep everyone organized and help things run smoothly during deployments
2. Follow instructions. You will be happy you did. Instructions are there to help volunteers make the best of the deployment. They will let you know what your responsibilities are and what is expected during your shift.
3. Ask questions. Not sure of something? Ask someone! It's always better to go into a deployment well informed.
4. Be Flexible. Sometimes things change. But don't worry. The organizers and site managers will work out the logistics and keep things organized.
5. Be prepared. Dress accordingly. Arrive on time. Don't forget to fill out your timesheets after the deployment and turn them in.

Lastly, enjoy yourself. DMRC has a wonderful group of volunteers and employees. Getting to know them is one of the best parts of the experience.



Emergency Preparedness: Get Ready for Winter

By: Elliott Nicholas, DMRC Staff



Prepare for a winter storm and what they can do

- A storm could last a few hours or a few days
- It can knock out heat, power, and your ability to communicate.
- It can also negatively affect our most vulnerable family members i.e. the elderly, young children and the sick

Don't forget to Winterize your car: these items will help in case of a winter emergency

- An ice scraper.
- Jumper cables
- Sand or cat litter (for tire traction)
- Warm clothes and blankets

Remember to keep the gas tank full and, if possible, have an automobile professional check your battery, anti-freeze, and cooling system. If you need to check on your neighbors, be sure to text, email, or call them while following the latest CDC guidelines for COVID-19

Source: [Ready.gov](https://www.ready.gov/)- The official website of the Department of Homeland Security

Delaware Animal Response

By: Mandy Fischer, DAR Program Coordinator



Hello! I am Mandy Fischer. I am excited to introduce myself as the new Program Coordinator for Delaware Animal Response (DAR) and the leader of the Delaware Veterinary Medical Reserve Corps (DVMRC). You may wonder why we are talking about animals in a human health MRC newsletter. Pets are a part of people's families. During disasters in particular, human welfare is increased significantly if they know their animals are safe and sound. DAR is the state's emergency unit responsible for the rescue and sheltering of companion animals during disasters such as hurricanes, flooding, blizzards, fires, even acts of terrorism.

The DVMRC works within DAR to provide veterinary medical support to animals during these incidents. We are comprised almost solely of volunteers that support Delaware Animal Services and emergency responders with pet evacuation and care in mass shelters. During non-disaster times we work to educate the pet owners of Delaware on emergency preparedness and safety. You may run into us during a training or the operation of a mass care shelter as we set up and maintain animal rooms near the main dormitories. I hope to provide some training opportunities for the MRC in the future as well as some combined shelter drills for both the MRC and Veterinary MRC. I am greatly looking forward to working with you and the MRC team!

VOLUNTEER WITH DAR!

If you are interested, we accept volunteers year-round from all sorts of various backgrounds to assist with our mission. All you need is a love for animals and a desire to help others. DAR would love to have you on board! For more information on pet preparedness for disasters, what we do, or to join DAR as a volunteer, please

visit <https://animalservices.delaware.gov/services/disaster-preparedness>.

You may also email me directly at DAR@Delaware.gov.

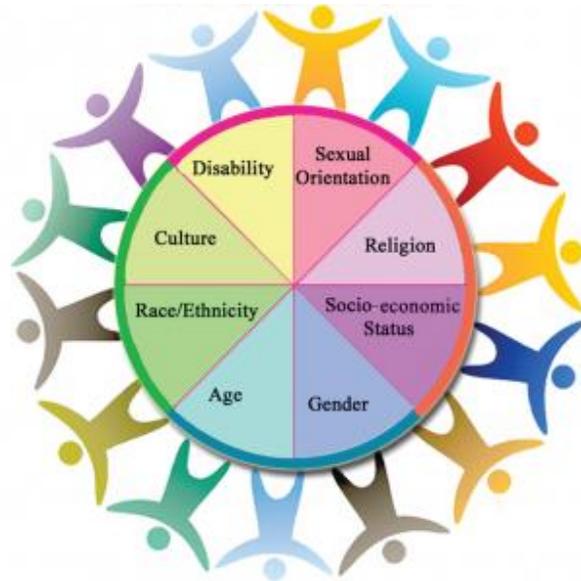


Cultural Competence: Training Summary

By: Mary Ann Green

A Fun Way to learn about the important topic of Diversity and Inclusion!

On December 15th, about 90 members of the Delaware Medical Reserve Corps attended and were active participants in a fun and educational session on Diversity and Inclusion. Tom Johnson from DHSS discussed a wide range of important and very timely topics related to our development as culturally competent leaders. The Discussion amongst the group was highly active, via voice and chat room.



Cultural Groups. Source: <https://patimes.org/cultural-diversity-in-the-community-and-the-workplace%E2%82%AC%91>

Key takeaways from the Discussion were:

- Culture is a way of life. It includes such things as religion, lifestyle, shared interests, shared symbols
- Sometimes we are wrong with how we remember symbols. (What color is a yield sign? Answer is at the end of this article)
- Cultural awareness is an understanding of the differences between us and how it is a continuous learning process
- Communication continually evolves and includes generalizations and stereotypes that may not leave room for individual differences
- Prejudices can lead to discrimination and behaviors that cause different and negative treatment of a stereotyped group
- Diversity versus inclusion. Diversity is the recognition of the broad range of similarities and differences among us while inclusion is the practice of providing equal access to opportunities within society
- The importance of really listening to others and paying attention to the micro aggressions and bias of our actions and words
- Concept of privilege as an extension of prejudice
- Cultural norms and cultural competence in communication strategies
- Cultural competency requires that leaders communicate using understanding, empathy and really listening. Communication must be two-way
- Culturally competent leaders think culturally before they speak, respect the space of cultural identity, and embrace diversity



Elements of Culture, Source: <https://www.quora.com/What-is-cultural-revitalization>



ANSWER: A yield sign is RED. (Not Yellow as many of us remember it!!)

Clinical Corner

What Clinicians Need to Know About the Pfizer and Moderna COVID-19 Vaccines

By: Kristin A Bennett MSN RN 12/19/20

The Centers for Disease Control and Prevention website (CDC.gov/COVID19) has extensive resources on COVID-19 for both clinicians and the general public. The Pfizer (ages ≥ 16) and Moderna (ages ≥ 18) mRNA COVID-19 vaccines are authorized and available. A recent (12/18/20) Clinical Outreach and Communication Activity (COCA) webinar¹ provided an overview of the Pfizer and Moderna COVID-19 vaccines, including details on characteristics, vaccinating special populations and contraindications. Clinical consideration will be updated to include information on both authorized mRNA vaccine products. Clinical considerations for Pfizer may be found at: <https://www.cdc.gov/vaccines/COVID-19/info-by-product/pfizer/clinical-considerations.html>

Advisory Committee on Immunization Practices (ACIP) Recommendations for Use of COVID-19 are a Work in Progress

Phase 1a: 1) health care personnel and 2) residents of long-term care facilities
Next prioritization groups (Phase 1b and 1c) to be discussed by ACIP on 12/20/20.

Triage Algorithm

A full triage algorithm may be found on the CDC website (and this webinar) including conditions and allergies for which may proceed with vaccination. The sole **contraindication** is a history of severe allergic reaction to any component of the vaccine. Vaccine **precautions**: moderate/severe acute illness, history of severe allergic reaction (anaphylaxis) to another vaccine or to an injectable therapy.

Public Health Recommendations for Vaccinated Persons

Current COVID-19 vaccines are a 2-dose series. Pfizer second dose at 21 days; Moderna second dose at 28 days (second dose may be given up to 4 days early). It takes 1-2 weeks following the second dose to be considered fully vaccinated. No vaccine is 100% effective, so vaccinated persons should continue to follow all current guidance to protect themselves and others: wear a mask, stay 6 feet from others, avoid crowds, wash hands often, follow CDC travel guidance, follow quarantine guidance after an exposure and follow any workplace or school guidance. Keep in mind, both Pfizer and Moderna mRNA COVID-19 vaccines demonstrate greater than 90% vaccine effectiveness across age, racial and ethnic groups.

The Basics on Messenger RNA vaccines:

- Provide instruction directly to the immune system.
- Efficiently create specific immune memory in a natural context
- Messenger RNA *cannot* interact or integrate into DNA

Reactions

- Counsel BEFORE vaccination regarding expected local and systemic post-vaccination symptoms
- Encourage COMPLETE series even if symptoms develop (not e.g. contraindications)
- Antipyretic or analgesic meds may be taken BUT routine prophylaxis to prevent symptoms is not recommended at this time

Recommended Medications and Supplies for the Management of Anaphylaxis at COVID-19 Vaccination Sites

- Epinephrine prefilled syringe or autoinjector
- H1 antihistamine (e.g., diphenhydramine)
- Blood pressure cuff
- Stethoscope
- Timing device to assess pulse



*To be included at sites where feasible: pulse oximeter, oxygen, bronchodilator, H2 antihistamine, IV fluids, intubation kits, adult-sized pocket mask with one-way valve – CPR mask.

Engaging in Effective COVID-19 Conversations

Your role as a vaccine educator may be as important as a vaccine administrator. Engage in conversations with those in your sphere of influence: friends, family, neighbors, faith community or book group. Remember you are TRUSTED. Nurses have been rated the most honest and ethical profession in America 18 years running – closely followed by physicians and pharmacists!
<https://www.cdc.gov/vaccines/COVID-19/hcp/engaging-patients.html>
<https://www.cdc.gov/vaccines/COVID-19/hcp/index.html>

¹What Clinicians Need to Know About the Pfizer-BioNTech and Moderna COVID-19 Vaccines
Clinical Outreach and Communication Activity (COCA) Webinar
CAPT Amanda Cohn, MD, CDR Sarah Mbaeyi, MD MPH, and LCDR Sara Oliver, MD
Friday, December 18, 2020. Webinar slides and audio recording are available at:
<https://emergency.cdc.gov/coca>

The training online influenza in-service training is now available on DE TRAIN. The in-service link and details were sent to those who have signed up. Please see [DelawareMRC.org](https://delawaremrc.org) Flu Clinic (and Flu Clinic Online) Training page for additional details.

NOTE: If you are interested in assisting with upcoming deployments, but have not signed up, please email DMRC@delaware.gov.

A Peer Perspective

The True Definition of Resilience

by Esther Hofknecht Curtis, MSM-HCA, Community Liaison, SUN Behavioral Delaware

In recent months, everyone has faced challenges due to the COVID-19 pandemic. As healthcare workers, you have shouldered more responsibilities than most “regular joes” face in a lifetime. For most of us, our professional careers have leached over into our personal lives. As a result, we are dealing with pandemic-related issues stacked onto the normal stressors of our day-to-day lives.

I have suffered from anxiety for nearly 20 years. The attacks on 9/11 triggered the first panic attack I can remember, and I began a low dose anxiety prescription soon afterward. In my 20s, a leadership coach sent me an article about resilience, and I was inspired. *I will use resilience to overcome my anxiety*, I thought. In the ensuing years, I pursued higher education, learned coping skills, and built my own self-esteem through reading, writing, art, and professional development. I thought I was all set.

Webster defines resilience as “the capacity to recover quickly from difficulties; toughness.” The American Psychological Association broadens that definition to include “adaptation in the face of adversity, trauma, tragedy, threats, or significant sources of stress – such as family and relationship problems, serious health problems, or workplace and financial stressors.”

When the pandemic hit, our team of road warriors worked at SUN to support departments dealing with infection prevention. (SUN has remained COVID neutral thanks to the efforts of our whole team working together.) I am a quick learner and a flexible person, but my personal issues coupled with my uncertainty about the pandemic began to take a toll on me. The work I had done to build my own resilience was not going to cut it. I had been training for the minor leagues... this was a major league problem.

When people say depression and anxiety are tied to each other, believe them. My anxiety mounted and I began to suffer depressive episodes. I was feeling a recurring sense of hopelessness. I called my primary care doctor, who recommended cognitive behavioral therapy (CBT). Our Employee Assistance Program (EAP) provided several CBT sessions over the phone. After that ended, I shifted to a local therapist, who I now see on a regular basis. A psychiatric nurse practitioner monitors and adjusts my medications. The podcast *Fake Doctors, Real Friends* boosted my mood when I was feeling down.

In truth, I did not fail to build resilience. I had simply (and incorrectly) equated the concept of resilience with invulnerability. I needed to learn that I am a human being, vulnerable to harm, and that there are limitations to the amount of stress I can endure. My mother always told me – usually in the waiting room of our local ER – that I was not born invincible. She could not have guessed I would finally learn that lesson from a global pandemic decades later.

Resilience means choosing to bounce back, no matter what. Resilience means using whatever tools you have at your disposal, not just those you have within yourself, to survive. Resilience means reaching out for help – professional or otherwise – when you reach your limit. Resilience is not a skill to be learned – it is a mindset to be adopted.

Esther Hofknecht Curtis, MSM-HCA is a community liaison for SUN Behavioral and a member of the Delaware Medical Reserve Corps BEST. She is an advocate for patients with mental health and substance use disorders and has worked in the field of healthcare since 2008.



Resilience Factors, Source: <https://www.afsa.org/enhancing-resilience>

DMRC Calendar

Date	Type	Event
January 27, 2021 6:00 p.m. – 7:15 p.m.	Online Training	DMRC Volunteer Training <i>Finding Respite in a Whirlpool: Wellbeing During Trying Times and Beyond</i>
March 15, 2021 6:00 p.m. – 7:00 p.m.	Online Unit Meeting	DMRC Quarterly Meeting <i>Sussex County Unit</i>
March 16, 2021 6:00 p.m. – 7:00 p.m.	Online Unit Meeting	DMRC Quarterly Meeting <i>New Castle County Unit</i>
March 17, 2021 6:00 p.m. – 7:00 p.m.	Online Unit Meeting	DMRC Quarterly Meeting <i>Kent County Unit</i>
March 24, 2021 6:30 p.m. – 7:30 p.m.	Online Team Meeting	DE BEST Quarterly Meeting
April 2021 6:00 p.m. – 7:30 p.m.	Virtual Event	Annual DMRC Meet & Greet <i>Invitations coming soon!</i>

[Event and calendar details can be found on the DMRC website. Please check frequently for updates.](#)

DMRC Resources and Personnel

Volunteer Advisory Board Representatives

The DMRC advisory board consists of elected volunteers who collaborate with DMRC staff and Division of Public Health employees.

Here are your Volunteer Advisory Board Representatives:

Kara DiCecco, New Castle County Unit Volunteer Representative
Bruce Caballero, Kent County Unit Volunteer Representative
Amy Gootee-Ash, Sussex County Unit Volunteer Representative, and
David Cahn, DE BEST Team Volunteer Representative

Resources

DMRC Website

<http://delawaremrc.org>

DPH Office of Preparedness Website

<https://preparedede.org>

National MRC Websites

<https://mrc.hhs.gov/homepage>

<https://www.dhss.delaware.gov/dhss/dph/php/emsp.html>

2020 Preparedness Calendar

www.ready.gov/calendar

DE Dept. Public Health Volunteer Website

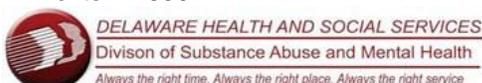
<https://www.dhss.delaware.gov/dhss/dph/php/vohome.html>

DE Emergency Management Agency

<http://dema.delaware.gov>

SERVDE Communications

Phone: 866.609.8029
Texts: 24639



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Reminder: You are not required to deploy; but you are required to respond to all call down calls and texts.

