



Medical Reserve Corps

Network Highlights: Fiscal Year 2020



799

MRC Units

Number of MRC units network-wide



184,625

Volunteers

Including about 109,000 medical/public health professionals



820,000

Volunteer Hours

Including about 650,000 volunteer hours dedicated to COVID-19 response efforts



16,584

Activities

Total MRC unit activities

A Snapshot: Fiscal Year 2020 MRC Network Activities

More than 450 MRC units in 47 states, the District of Columbia, Puerto Rico, and American Samoa bolstered local emergency response capabilities and served as critical medical and public health response assets during the COVID-19 pandemic. In federal fiscal year 2020, volunteers dedicated approximately 650,000 hours to supporting their communities in a wide array of response roles. Common **MRC unit** missions included:

- Testing operations
- Medical surge, including patient care at alternate care sites, hospitals, isolation and quarantine facilities, and long-term care facilities
- Case investigations and contact tracing support
- Call center operations
- Community screening, including wellness/temperature screenings for visitors at community buildings and events
- Logistics support, including lab courier services, alternate care site set-up, and personal protective equipment (PPE) supply management and distribution
- Community outreach, assisting elderly and at-risk community members with food distribution, wellness check calls, essential errands, medication pick-up, and transportation
- Infection prevention support during elections, helping to protect the safety of voters and poll workers
- Behavioral health support
- Training and fit-testing, helping medical, public health, and first responder professionals to be properly protected with PPE
- Public health education



Pictured: Southwest Colorado MRC (CO)



Pictured: Denton County MRC (TX)



A Snapshot: Fiscal Year 2020 MRC Network Activities

Several MRC units in **Arizona, California, Colorado, Oregon, Utah, and Washington State** responded to wildfires in local communities. Volunteers provided evacuation and clean air shelter support, medical screening and care, veterinary care, and logistics support.

After an earthquake struck Southwest Puerto Rico in January 2020, **MRC of Puerto Rico** volunteers helped set up a portable hospital; provided medical and behavioral health support at shelters; and visited impacted communities to conduct needs assessments.

MRC units in Louisiana, Texas, Alabama, Hawaii, North Carolina, Virginia, Pennsylvania, Delaware, and Connecticut responded to a series of hurricanes and tropical storms. Volunteers provided evacuation support, sheltering support, triage/first aid, medical needs tracking, and medical assessments, including COVID-19 screenings for evacuees.

After a derecho passed through Iowa and caused widespread power outages, **Johnson County MRC (Iowa City, IA)** volunteers conducted wellness checks on local community members with special medical needs. Volunteers with the **Grundy County MRC (Grundy Center, IA)** helped with recovery clean-up efforts.

A number of MRC units prepared for and responded to floods. For example, in May 2020, the **Ottawa County MRC (West Olive, MI)** assisted with sandbagging efforts, and, in September 2020, the **Western Tidewater MRC (Suffolk, VA)** staffed a disaster shelter at a local church after significant flooding in the community.

MRC units in Texas, Tennessee, Pennsylvania, and South Carolina responded to tornadoes. Volunteers provided emergency veterinary care; emergency operations center, resource center, and logistics support; behavioral health services; and support at a reception center for evacuees.

When the New Orleans Hard Rock Hotel construction site partially collapsed, **the New Orleans MRC (New Orleans, LA)** staffed a family reunification center for individuals looking for information about loved ones who were in the area of the collapse. Volunteers also assisted with confirming EMS and hospital patient counts and calling individuals displaced from their apartments in the surrounding area to determine immediate needs.

MRC units across the country provided vaccination support in response to disease outbreaks. In response to hepatitis A, units were particularly focused on high-risk and vulnerable populations, providing vaccination support at a number of community-based outreach clinics. In response to two pediatric meningococcal disease cases, **Boston MRC (Boston, MA)** volunteers assisted at a clinic to provide children, staff, and families with meningococcal disease vaccinations at a local daycare center.

For further information, visit mrc.hhs.gov.

Note: MRC network COVID-19 response efforts are ongoing. Activities and data points noted in this document only include MRC efforts completed during federal fiscal year 2020 (October 1, 2019 – September 30, 2020). Activities that began during the fiscal year, but continued beyond September 30, 2020, are not accounted for in this document. In addition, some states have seen significant growth in volunteer numbers this past year; this document may not reflect the most current numbers.



UC Davis VERT MRC (CA)



Philadelphia MRC (PA)



Norfolk MRC (VA)



Alamo Area MRC (TX)