Supporting Annex 2: Basic Plan for the Capitol Region Medical Reserve Corps

In the fall of 2001, the Capitol Region Emergency Planning Committee (CREPC) was founded with the straightforward vision of “protecting our citizens in the event of a major natural or man-made disaster.”

1. To achieve our vision for the region, we established five clearly defined goals:

2. Develop a regional disaster plan that works in conjunction with the local emergency operations plans, the Connecticut Emergency Response Plan, and the National Response Plan.

3. Determine and correct any equipment shortages identified during the plan development.

4. Determine personnel requirements for the execution of the disaster plan.

5. Determine and provide training for all components of the regional emergency deployment (RED) plan.

6. Exercise and evaluate the RED Plan.

For goal number three, determining personnel requirements, there are two clearly defined objectives that directly relate to this grant application.

1. Determine the full-time and volunteer support staffing needs for each of the regional emergency support functions (RESF’s) identified in the RED Plan.

2. Recruit personnel for civilian emergency response teams (CERT) for fire, emergency management, mass care, food and water distribution, security, traffic control, and light rescue response. Recruit personnel for mobile dispatch teams (MDT). Recruit personnel for regional medical backup teams for hospitals, mass immunizations, and major mass casualty events. Recruit personnel for incident command (ICS) overhead management teams and emergency operations center (EOC) relief. And, recruit personnel for extended decontamination operations.

The Regional Emergency Deployment (RED) Plan is based on the belief that a system of interlocking volunteer elements that provide trained personnel in a programmed mutually supportive role during a major disaster will be the key to success and safety in the region.

CR – Medical Reserve Corps

The CR – MRC is designed to specifically address the area of the second objective calling for “medical backup teams for hospitals, mass immunizations, and major mass casualty events.”

There is a recognized need to rapidly mobilize a predetermined cadre of trained medical professionals in the event of a catastrophic disaster.
Regional Emergency Deployment Plan (RED Plan) – MRC Basic Plan

Our objective is to create the structure, organization, and procedures for assembling these medical resources.

The Capitol Region Medical Reserve Corps (CR-MRC) will function under the guidance of the Regional Deployment (RED) Plan. The corps will consist of 250 to 300 personnel to begin with in the first year. Expansion over a five-year period would be programmed to increase the size of the CR-MRC to approximately 1,000 medical professionals.

Figure 1

As an element of R-ESF 8, the Capitol Region Medical Reserve Corps (CR-MRC) will be fully integrated with the other five elements of this vital support function.

The CR-MRC would be under the direction of a commander and deputy commander. The corps would consist of ten sub-elements or units. CRCOG staff, the chairperson of the CREPC, and the chairperson of R-ESF 8 would provide administrative support.

The composition of the medical reserve corps sub-elements or units will be as follows:

- Emergency medical unit (100 physicians and nurses)
- Dental Unit (10-15 dentists)
- Pharmacy Unit (50 pharmacists)
- Public Health (15-25 public health professionals)
- Social Services Unit (25-50 social services professionals)
- Veterinary Unit (25 veterinarians)
- Chaplain Unit (10-15 members of the clergy)
- Mental Health Unit (10-15 mental health professionals)
- Communications Unit (4-5 communications technicians)
- Logistical Unit (1-5 logistics)

Total strength would begin at 250-300 personnel and rise to 1,000 personnel within five years.
Regional Emergency Deployment Plan (RED Plan) – MRC Basic Plan

Plan of Action

The plan of action for the CR-MRC would be as follows:

<table>
<thead>
<tr>
<th>Time frame</th>
<th>Action required</th>
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<tbody>
<tr>
<td>0-45 days</td>
<td>Assemble planning team</td>
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<td></td>
<td>Develop operational concept</td>
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<td></td>
<td>Recruit and appoint commander and deputy commander</td>
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<tr>
<td>46-75 days</td>
<td>Recruit team leaders for ten units</td>
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<tr>
<td>76-120 days</td>
<td>Recruit remaining team members for each of ten units</td>
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<td>Establish the communications team</td>
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<td></td>
<td>Establish the logistical team</td>
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<td></td>
<td>Establish alerting procedure</td>
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<td>121-210 days</td>
<td>Training in orientation, operating procedures, communications procedures, and mobilization procedures</td>
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<tr>
<td></td>
<td>Determine equipment needs</td>
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<tr>
<td>211-240 days</td>
<td>Exercise and evaluate the CR-MRC</td>
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<tr>
<td>241-300 days</td>
<td>Revise training and procedures and adopt revised policy guidance</td>
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<tr>
<td>301</td>
<td>Capitol Region Medical Reserve Corps becomes operational and mission ready</td>
</tr>
</tbody>
</table>

Program Evaluation

The program will be deemed successful when we have accomplished the following twelve objectives:

1. Establish the operational concept
2. Appoint the commander and deputy commander
3. Appoint the ten unit team leaders
4. Establish the alerting system
5. Establish the mobilization procedures
Regional Emergency Deployment Plan (RED Plan) – MRC Basic Plan

6. Select remaining team members
7. Establish the communications team
8. Establish the logistical team
9. Training (for 90% of team members)
10. Exercise and evaluate the corps
11. Revise training and policy as directed by the evaluation
12. Certify corps as mission deployable

The methodology that will be used to determine the benefits expected will be achievement of the twelve objectives. Objectives 1-8 are chronological in order with a completion date. Objective 9 will be deemed successful at the 90% training mark, which can be quantified. Objective 10 will involve a functional exercise based on a bio-terrorist incident with mass casualties and exposure problems requiring mass drug distribution and immunizations. Objective 11 is self-explanatory. Objective 12 is based on operational readiness.

The program is based on a ten (10) month delivery schedule. The program could be accelerated depending on the speed of recruitment, commitment of members to the training program, or the occurrence of another major terrorist event in the United States. The program could be slowed down by training and equipment shortfalls or extensive revision of policy guidance after the full functional exercise.

Monthly evaluations beginning after 60 days will be conducted. The evaluation team shall consist of the corps commander, deputy commander, team leaders, and executive director of CR.