



Colorado Acupuncture Medical Reserve Corps (CAMRC) and the Medical Reserve Corps of Puerto Rico (MRCPR) Partner to Provide Training in the Acupuncture Resource as an Innovative Capability for the MRCPR Unit and Support the Recovery of Psycho-Social Trauma in Puerto Rico

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About the Medical Reserve Corps

The Medical Reserve Corps (MRC) is a national network of volunteers, organized locally to improve the health and safety of their communities. The MRC network comprises approximately 190,000 volunteers in 900 community-based units located throughout the United States and its territories.

MRC volunteers include medical and public health professionals, as well as other community members without healthcare backgrounds. MRC units engage these volunteers to strengthen public health, improve emergency response capabilities and build community resiliency. They prepare for and respond to natural disasters, such as wildfires, hurricanes, tornados, blizzards, and floods, as well as other emergencies affecting public health, such as disease outbreaks. They frequently contribute to community health activities that promote healthy habits. Examples of activities that MRC volunteers participate in and support include:

Emergency Preparedness and Response Trainings

Health Screenings

Emergency Sheltering

Obesity Reduction

Responder Rehab

Vaccination Clinics

Disaster Medical Support

Outreach to Underserved Community Members
Disaster Risk Reduction
Heart Health
Medical Facility Surge Capacity
Tobacco Cessation
First Aid During Large Public Gatherings
Community Event Support
Planning, Logistical, & Administrative Support
Healthy Living
Veterinary Support and Pet Preparedness
Health Education and Promotion
Engaging Youth in Public Health Activities

About the Colorado Acupuncture Medical Reserve Corps

The Colorado Acupuncture Medical Reserve Corps (CAMRC) has developed the Acupuncture Mission Ready Package that has been shared with the nation and the CAMRC is available to assist with guidance on how to use acupuncturists as a resource in the national Medical Reserve Corps network. The CAMRC was founded in 2014 as the first state-wide acupuncture specific MRC, as well as becoming a model for other states to follow. The CAMRC offers treatments of acupuncture in a group setting to support the healing of psycho-social trauma. Treatments support the flow of blood to the prefrontal cortex, supporting one's ability to adapt as well as improving sleep, mental clarity and focus. In Colorado we have responded to several types of incidents including fires, floods and active shooter incidents to support not only community members but also first responders.

See the following links for more information about volunteer acupuncturists who help first responders and other communities in times of natural disasters and crises in the community:

ASPR blog:

<https://www.phe.gov/ASPRBlog/pages/BlogArticlePage.aspx?PostID=276>

NACCHO article:

<http://nacchopreparedness.org/the-role-of-public-health-in-terrorism-and-active-shooter-preparedness-and-response/>

Magazine article:

<http://www.5280.com/2017/04/local-acupuncturists-helping-traumatized-communities/>

The CAMRC has carried out a pilot research study with plans for more research. Consult a table below with preliminary results to analyze the effect of ear acupuncture used in times of crisis and see how a person's symptoms of stress decrease with each acupuncture treatment (a person chosen to receive 1-3 acupuncture treatments as part of the study).

Decrease in life stress over time

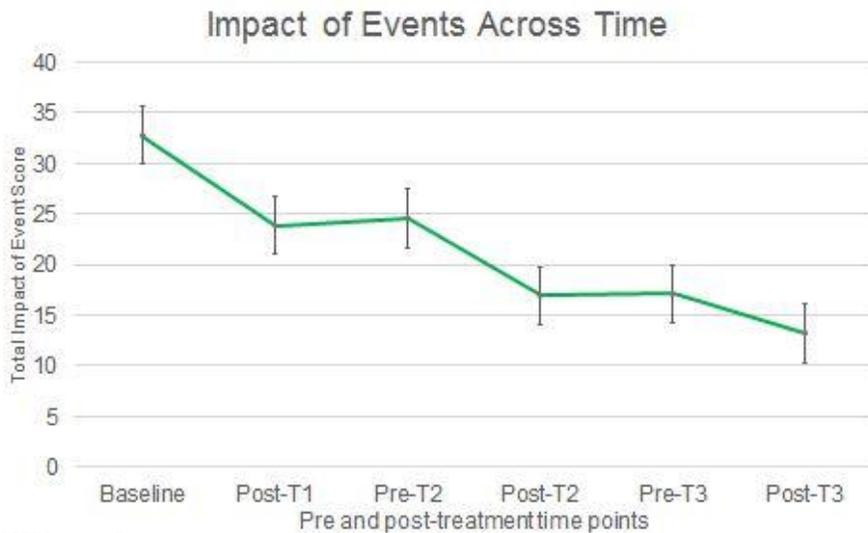


Figure 1

Change in overall impact of events following three treatments. Scores represent a rating of trauma with higher scores being clinically relevant (see below). A total of 84 participants are represented at baseline following 57 at post-T1, 34 at pre-T2, 27 at post-T2, 18 at pre-T3, and 14 at post-T3. A mixed model repeated measures ANOVA was used to assess the significance of change in impact of event over time. Significance was found at $p < 0.05$ (3.2396×10^{-5}).

Score (IES-r) Consequence

| | |
|--------------|---|
| 24 or more | PTSD is a clinical concern. ⁶ Those with scores this high who do not have full PTSD will have partial PTSD or at least some of the symptoms. |
| 33 and above | This represents the best cutoff for a probable diagnosis of PTSD. ⁷ |
| 37 or more | This is high enough to suppress your immune system's functioning (even 10 years after an impact event). ⁸ |

Figure 2:

Impact of Events Scale score interpretation.

1. Describe your program, initiative, or activity.

Colorado Acupuncture Medical Reserve Corps (CAMRC) strives to strengthen national community health through the use of acupuncture and with this project will have the ability to support the Medical Reserve Corps of Puerto Rico (MRCPR) to train new and current volunteers in the innovative capacity of using acupuncture in addition to other Medical Reserve Corps (MRC) capabilities. With this project the CAMRC/MRCPR partnership will use acupuncture to support healing and recovery of psycho-social trauma in Puerto Rico with educating on and responding to community resilience through preparedness, response, and recovery activities. The project will start with one live in-person training in San Juan, Puerto Rico, and there are plans to offer more live in-person trainings in the future as the unit capacity grows.

2. Describe the goals of your project. What are the measurable objectives for your project?

CAMRC is taking the lead in supporting the nation in the growth of the acupuncture resource in times of natural disaster and community crisis. Through multiple discussions with many leaders over the years about different approaches of marketing and administering the resource, we would like to provide an out-of-state training method. For example, the CAMRC has partnered with the MRCPR and would like to take Puerto Rico under their direct guidance to train and develop local programs that incorporate acupuncture into their existing medical reserve corps and partnering organizations. This out-of-state partnership will be documented and the CAMRC will partner with the University of Colorado at Boulder, as well as other partners, to create demographic and acupuncture training program surveys. The information about difficulties and successes of these newly established programs will be reported and a valuable resource for any state who is considering including acupuncture.

3. Who is the target audience for your project? How are the MRC volunteers involved?

We have several different target audiences for this project. The main purpose of the CAMRC is to support the Puerto Rico community in recovery and healing of psycho-social trauma as well as train new local Puerto Rican volunteers therefore expanding the MRCPR unit capacity. The first audience would be those involved with a Hurricanes Irma and Maria in Puerto Rico, including evacuees/victims, first responders, and staff involved in responding to the incident (primary and secondary trauma stress). The second audience would be potential new MRC volunteers in Puerto Rico. These volunteers will be from the acupuncture community in addition to non-medical volunteers, who can be anyone from the community who is passionate about the MRC's purpose (only physicians can perform acupuncture but there are many other volunteer duties that can be supported). The CAMRC, with help from local partnering agencies, will seek these potential volunteers and offer a live training in San Juan, Puerto Rico to be personally prepared for disaster in addition to how to deploy in the MRC using the Acupuncture Mission Ready Package, as well as Psychological First Aid (PFA). This project will seek to train this group in leadership abilities, enhanced communication, train-the-trainer capabilities for new volunteers, as well as networking skills for partnering with their regional healthcare coalitions.

4. Describe the benefits and impacts your program, initiative, or activity will have on your community and/or participants. What are the expected measurable outcomes?

With increased partnerships in public health as well as increased education about the acupuncture resource abilities, the entire partnership team can support healing of emotional trauma for victims of natural disasters, domestic violence, loss of family, first responder trauma, and many other concerns that may contribute to long term behavioral health disorders and suicide. Community healing will occur locally in Puerto Rico, an island that has been affected by Hurricanes Irma and Maria as well as other social crisis. The acupuncture resource will be expanded in Puerto Rico through the MRC and the public health department, therefore expanding innovative capacity for the MRC network as a whole and increasing the number of deployable volunteers. The acupuncture community is excited for opportunities to volunteer nationally they just do not know where to start and this project will allow them chances to learn about and volunteer with the MRC of Puerto Rico. According to the 2017 Network Profile of the MRC on page 34, in graph 25, the Acupuncture Mission Ready Package has been deployed out of state at 9%, and 59% developed but not deployed. The CAMRC would like to see those numbers change next year to reflect an increase in the use of the Acupuncture Mission Ready Package and the partnership will support MRCPR in their capability of using this resource.

5. Describe what makes your project innovative or relevant to building the capabilities of the unit and the MRC network.

This project will expand relationships through Puerto Rico with partnerships with various agencies including but not limited to the MRCPR, Administración de Servicios de Salud Mental y Contra la Adicción (ASSMCA), Puerto Rico Department of Health, and local 501c3s. These partnerships can provide building blocks to future projects with multi-agency collaboration across the island. In addition, we will allow opportunities for the growth of acupuncture volunteers therefore increasing numbers but also giving the acupuncture community a unique opportunity to learn more about the MRC, attend training, meet their new MRC leaders, and become part of a federal and state approved team. This project is based on the Acupuncture Mission Ready Package, a blueprint for the nation written by CAMRC on how to use the acupuncture resource as part of a MRC unit. This project will be documented in its entirety and reports will be given that can be used by other MRCs in the national network who are considering or currently have acupuncturists in their units. The reports will also benefit the MRC network by providing evidence that shows the benefit to the community by the expansion of the acupuncture resource in regards to trauma and disaster behavioral health.

6. Work plan.

a. Implementation plans: Describe how the project will be carried out and how MRC volunteers are engaged in the process.

CAMRC Unit Coordinator, Rachelle Lambert, will be involved with the project proposal creation, project implementation, as well as any reports of the project. Rachelle will be working with the MRCPR leadership to develop the details of the training project, including Unit Coordinator Francis Galicia-Feliciano. The training project will be two days in total, four including travel days. Rachelle will over-see the entire project (along with MRCPR leadership) as well as present the training material along with local Puerto Rican Spanish translators. Two translators will be hired in order to allow resting breaks during a full day of translation. Rachelle currently has partnerships in Puerto Rico and this will be a resource for hiring local Spanish translators for the project. One half day will be training in Psychological First Aid (PFA), and this training will be given by a certified PFA trainer from the Disaster Behavioral Health Team of the State of Colorado along with local Puerto Rican Spanish translators. This Colorado team member will also serve as a safety partner and logistical support with Rachelle while in Puerto Rico during all days of the training. Rachelle will perform Acupuncture Mission Ready Package Training on the second half of Day 2 and the whole day of Day 3 (along with MRCPR leadership). See detailed project outline below.

*The training schedule may change, for example the PFA training day may be moved to Day 3.

*Above project work plan is a reflection of the minimum budget required to perform the first training. The CAMRC plans to provide more training with the MRCPR in the future. If we are able to fund more than the minimum budget, there is an extended budget listed to include more training support by including:

1. Steve Shomo, DAOM, CAMRC Assistant Unit Coordinator and Training Specialist

-Support with Acupuncture Mission Ready Package Training on Days 2 and 3, Steve regularly performs these trainings in Colorado

2. Eduardo Villegas, University of Colorado Psychology and Neuroscience PhD Student, Data Analyst for the National Association of City and County Health Officials (NACCHO) Grant 2016 Research Project partnering with CAMRC, Data Analyst with the University of Colorado's Hernández Clinical Assessment of Injury, Recovery & Resilience (CAIRR) Neuroscience Laboratory

-Support with Acupuncture Mission Ready Package Training on Day 2 or 3, he can discuss in full detail the analysis done with the research project funded by NACCHO, with research partners including CAMRC and the University of Colorado's Hernández CAIRR Neuroscience Laboratory

b. List your project timeline.

February 6th-9th, 2019- San Juan, Puerto Rico: Training for Acupuncture in the Medical Reserve Corps of Puerto Rico. Two of the days are travel days for the trainers flying from Colorado, two of the days are for training in San Juan.

May 1st, 2019- Final project evaluation report will be available.

c. What are your sustainability plans for your project?

Project evaluation reports will be used to improve the acupuncture resource in the MRC of Puerto Rico. MRC leaders will be developed within Puerto Rico, including train-the-trainer capabilities. These leaders will be in communication with Rachelle Lambert for support and will take the lead in sustaining growth of the acupuncture resource in MRCPR and other partnering agencies throughout the island. Supplies for individual acupuncture projects can be sustained through local business partnerships, private 501c3s, as well as national acupuncture supply distributors. Leaders of these individual projects will be thoroughly trained to administer the local project and if guidance is needed that leader may seek help and guidance from the CAMRC. Future training opportunities in Puerto Rico will be considered and planned as necessary.

d. Detailed project description and line item minimum budget of your estimated program costs.

Total = \$3,464.00

*All funds raised will go to Acupuncture Innovation, 501c3. This organization is the fiscal sponsor and housing agency of the CAMRC and Acupuncture Innovation will pay for the project fees through funds raised for this project. Funds may be raised in the form of grants, cash, check, and credit card (through Paypal) all made out to **Acupuncture Innovation (2955 Valmont Road, Suite 100, Boulder, CO 80301)**. Other forms of funding may be accepted, one example includes donations of frequent flyer miles to cover airline fees.

*The Psychological First Aid trainer salary is covered by their employer; other trainers are current volunteers or work on commission without a salary and therefore are due a type of salary to perform the training. The training schedule may change, for example the PFA training day may be moved to Day 3.

*Above project work plan is a reflection of the minimum budget required to perform the first training. The CAMRC plans to provide more training with the MRCPR in the future. If we are able to fund more than the minimum budget for the first training, there is an extended budget (listed below) to include more training support by including:

1. Steve Shomo, DAOM, CAMRC Assistant Unit Coordinator and Training Specialist: \$1,532.00
2. Eduardo Villegas, University of Colorado Psychology and Neuroscience PhD Student, Data Analyst with the University of Colorado's Hernández CAIRR Neuroscience Laboratory: \$1,254.00

Day 1-

Travel day for Project Lead (Rachelle Lambert) and State of Colorado PFA Trainer

1. Per diem rates in San Juan, Puerto Rico for 2 people for 1 day, \$148.00 per day per person = \$296.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 2 people for 1 day, \$50.00 per day per person = \$100.00

Day 2-

Training day for Psychological First Aid (half-day) and for Acupuncture Mission Ready Package Training (half-day) - Project Lead (Rachelle Lambert), State of Colorado PFA Trainer, and two Local Puerto Rican Spanish translators

1. Per diem rates for training in San Juan, Puerto Rico for 2 people for 1 day, \$148.00 per day per person = \$296.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 2 people for 1 day, \$50.00 per day per person = \$100.00
3. Labor hours and Administrative cost for training in San Juan, Puerto Rico for 1 day, 4 hours for Project Lead (Rachelle Lambert) and 8 hours each for two local Puerto Rican Spanish translators at \$20.00 per hour = \$400.00

Day 3-

Training day for Acupuncture Mission Ready Package Training (full-day) - Project Lead (Rachelle Lambert), State of Colorado PFA Trainer, and two Local Puerto Rican Spanish translators

1. Per diem rates for training in San Juan, Puerto Rico for 2 people for 1 day, \$148.00 per day per person = \$296.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 2 people for 1 day, \$50.00 per day per person = \$100.00
3. Labor hours and Administrative cost for training in San Juan, Puerto Rico for 1 day, 8 hours each for Project Lead (Rachelle Lambert) and two local Puerto Rican Spanish translators at \$20.00 per hour = \$480.00

Day 4- Travel day for Project Lead (Rachelle Lambert) and State of Colorado PFA Trainer

1. Per diem rates for training in San Juan, Puerto Rico for 2 people for 1 day, \$148.00 per day per person = \$296.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 4 people for 1 day, \$50.00 per day per person = \$100.00

Travel/Transportation Services

*Per diem daily travel rates listed above.

Flights and baggage fees round trip from Denver, CO to San Juan, PR from 02/06/2019 – 02/09/2019 = \$500.00 per person x 2 (Rachelle Lambert, State of Colorado PFA Trainer) = \$1,000.00

Extended Budget (to be used after the minimum budget fees are raised):

***Steve Shomo, DAOM, CAMRC Assistant Unit Coordinator and Training Specialist**

4 days total including travel days = \$1,532.00 (Breakdown below)

1. Per diem rates for training in San Juan, Puerto Rico for 1 person for 4 days total, \$148.00 per day per person = \$592.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 1 person for 4 days total, \$50.00 per day per person = \$200.00
3. Labor hours and Administrative cost for training in San Juan, Puerto Rico for 1.5 days total, 12 hours each for Steve Shomo at \$20.00 per hour = \$240.00
4. Flights and baggage fees round trip from Denver, CO to San Juan, PR for 02/06/2019 – 02/09/2019 = \$500.00 per person x 1 = \$500.00

***Eduardo Villegas, University of Colorado Psychology and Neuroscience PhD Student, Data Analyst with the University of Colorado's Hernández CAIRR Neuroscience Laboratory**

3 days total including travel days = \$1,254.00 (Breakdown below)

1. Per diem rates for training in San Juan, Puerto Rico for 1 person for 3 days total, \$148.00 per day per person = \$444.00
2. Meals and Incidentals for training in San Juan, Puerto Rico for 1 person for 3 days total, \$50.00 per day per person = \$150.00
3. Labor hours and Administrative cost for training in San Juan, Puerto Rico for 1 day total, 8 hours each for Eduardo Villegas at \$20.00 per hour = \$160.00
4. Flights and baggage fees round trip from Denver, CO to San Juan, PR for 02/07/2019 – 02/09/2019 = \$500.00 per person x 1 = \$500.00

7. Evaluation:

a. Describe how you will obtain and report data.

This project between CAMRC/MRCPR will be documented and the CAMRC will partner with the University of Colorado at Boulder, as well as other partners, to create demographic and acupuncture training program surveys. The information about difficulties and successes of these newly established programs will be reported and a valuable resource for any state who is considering including acupuncture. Reports will be created in digital and paper format with guidance of CAMRC leadership and other partners. Reports will be given to the MRCPR leaders and the MRC network through ListServe and various presentations. Live presentations will be offered for organizations wanting to know more about the acupuncture resource in the MRC project.

b. Describe how you will measure your project's success and community impact.

Ideally we would measure how many acupuncturists became MRC volunteers during the project and the activities of volunteers, including how many community members were affected by the projects. In addition, we can measure how many partnerships were created with the project and how many partnership meetings, including local healthcare coalitions, MRC volunteers and acupuncture volunteers attend. We will measure treatment success with self-reporting and standardized survey questionnaires.