PROTECTING YOUR ORGANIZATION DURING PUBLIC HEALTH EMERGENCIES

A WORKBOOK FOR CLOSED POD PARTNERS
Acknowledgements

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You protect your business by planning for the unexpected — anticipating issues and managing events at hand. The Miami Dade County Health Department takes the same approach to protecting the health and safety of our community. In today’s post-9/11, Katrina, and H1N1 world, we recognize that collaboration between government and private industry is more important than ever in the areas of emergency preparedness and homeland security. We continually seek to build our partnerships and increase communication and awareness within the county to increase our capacity to respond and care for our community. To that end, we’re calling on you, to partner with us and help protect your organization, your employees, and our community by making your organization a CLOSED Point of Dispensing ( POD) Site. Taking a few small steps now to prepare for future public health emergencies will not only protect your greatest asset — your employees — but also help prepare the entire community to respond effectively. We thank you for taking the time and effort to read this workbook and learn if a CLOSED Dispensing Site is right for you.

This workbook is meant to introduce the Closed POD concept and answer some questions you may have about what it takes to establish this program in your organization. You will find information on the key components of Closed POD planning and implementation as well as background information on the Cities Readiness Initiative and the Strategic National Stockpile. This workbook is not a complete Closed POD implementation plan, but a key reference document to help you through the planning process. Your MDCHD contact will be available to work with you and provide guidance and assistance during planning to ensure you and your employees are prepared to meet the challenges of operating a Closed POD should the need ever arise. We hope you will find this workbook helpful and that it will help inspire you to partner with us and prepare to protect your organization in a public health emergency!
**IMAGINE THIS SCENARIO...**

A biological agent, such as Anthrax, has been released in Miami Dade County and all 2.6 million residents and visitors are at risk of becoming ill. To prevent illness, people need to receive medication quickly. The local supply of medications will not cover everyone so Miami Dade County Health Department (MDCHD), working with local and state officials, asks for medications from the Centers for Disease Control’s Strategic National Stockpile.

In a matter of hours, the medications arrive and the MDCHD and response agencies put well rehearsed plans into play to hand out medications to the entire population. Even with all the preparation, there are long lines at public Points of Dispensing with tens of thousands of people waiting for their pills. People are stressed out, worried about their families, worried about their jobs, and tempers are rising.

A different scene is playing out at Closed Points of Dispensing. Organizations with leaders who have planned ahead are activating their dispensing plans. Their people are going to the private dispensing site at their organization and receiving medications for themselves and their families in a familiar location. They bypass the traffic and tension at the public POD sites and are ready to focus on continuing operations at the organization or available to volunteer to assist the community in response and recovery efforts.
Cities Readiness Initiative

The Cities Readiness Initiative is a federally funded effort to prepare major U.S. cities and metropolitan areas to effectively respond to a large scale bioterrorist event by dispensing antibiotics to their entire identified population within 48 hours of the decision to do so. CRI is needed to enhance preparedness at all levels of government and to provide a consistent nationwide approach to prepare for, respond to, and recover from a large-scale public health emergency.

The primary goal of CRI is to minimize loss of lives during a catastrophic public health event by distributing needed drugs to 100% of each region's population within 48 hours.

Since 2004, the Centers for Disease Control and Prevention (CDC) has provided funding for CRI through the Public Health Emergency Preparedness Cooperative Agreement to enhance the mass dispensing capabilities of the CRI cities. There are currently 13 CRI Counties in Florida including Palm Beach, Broward, and Miami Dade.
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**Points of Dispensing** (PODs) are designated dispensing locations for persons who are currently healthy but may have been “exposed” and need prophylactic medication. Public PODs where people go to a designated location and are directed through a series of stations to receive medications are the traditional method of providing prophylaxis in CRI. Other dispensing methods include “drive through” PODS and, of course, Closed PODs.

**Strategic National Stockpile**
The Centers for Disease Control and Prevention’s (CDC) Strategic National Stockpile (SNS) has large quantities of medicine and medical supplies to protect the American public if there is a public health emergency (terrorist attack, flu outbreak, earthquake, etc.) severe enough to cause local supplies to run out. Once Federal and local authorities agree that the SNS is needed, medicines will be delivered to any state in the U.S. within 12 hours. Each state has plans to receive and distribute SNS medicine and medical supplies to local communities as quickly as possible.

**SNS Key Facts**
- Can be delivered to any state within 12 hours
- Medications and supplies are free
- Has enough medication to protect people in several large cities at the same time
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☐ The medicine in the SNS is FREE for everyone.

☐ The SNS has stockpiled enough medicine to protect people in several large cities at the same time.

☐ Federal, state and local planners are working together to ensure that the SNS medicines will be delivered to the affected area.

☐ The general public will find out where to get medicine through the media. Closed POD participants will receive a notification from the MDCHD when medicines allocated for them are ready to be picked up.

Current Planning Efforts
The Miami Dade County Health Department has been working with the Centers for Disease Control, Florida Department of Health, Regional Domestic Security Task Force, Miami Dade County Office of Emergency Management, Miami Dade County Police Department, Miami Dade County Fire Rescue, and Miami Dade County Public Schools, as well as a large segment of local response agencies, colleges and universities, and community service organizations to develop, maintain, train, and exercise response plans to ensure readiness if we were ever faced with a catastrophic public health emergency. MDCHD also provides coordination.
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for the local healthcare community through the Hospital Preparedness Consortium and the Medical Reserve Corps. All of these entities work together now to prepare as we will work together should we ever need to respond. Past activities include:

☑️ Tabletop Exercises for Hospitals
☑️ Activation of Medical Reserve Corps Volunteers during the 2009 H1N1 immunization campaign
☑️ Full scale dispensing exercises
☑️ Training for both health care and lay community members.

As a Closed POD partner, you will be invited to participate in training and exercise opportunities. Your health department liaison will also be available to help you plan your own drills and exercises to maximize the benefit to your staff.

MDCHD has created plans for public PODs and identified the resources we will need to operate. Sites have been identified and assessed to ensure they will be appropriate and available for use should the need arise. MDCHD has also identified teams within the health department that will be deployed to operate the PODS and to do community assessments and investigations. POD operations teams will oversee volunteers from the community who will
serve the public and will work closely with local enforcement to ensure the process is safe for all involved.

MDCHD operates within federal guidelines and adheres to standards of the National Incident Management System - Incident Command Structure or ICS. This means the response at all levels will follow a chain of command and use common language, processes, and forms. ICS allows MDCHD to work seamlessly with other response agencies and greatly reduces confusion.

As a Closed POD partner, your key planning team members and those assigned to your incident management team will be strongly encouraged to become familiar with the basic tenets of ICS.

Finally, as a CRI jurisdiction since the early days of the program, MDCHD has had the opportunity to use best practices from around the nation and real world events to refine local planning and processes. We are subject to annual assessments by both the state and CDC and have been deemed 96% proficient at meeting the demands of the program. We can not reach 100% alone - with your participation, we can achieve our goals and protect our community.
Partnership

Once your organization is prepared to move ahead with Closed POD planning, your public health liaison will:

☑ Provide a memorandum of agreement that will detail the expectations and responsibilities of the program,

☑ Meet with your key planning team to review the components that will be included in your dispensing plan,

☑ Provide ongoing training and exercise opportunities to enhance your ability to respond.

Plan Development

Training and reference materials will be available to you to allow you to:

☑ Understand the screening and dispensing process

☑ Determine appropriate dispensing locations

☑ Develop policies procedures

☑ Develop response staff

Exercises & Drills

Exercises are the best way to be sure your plan will work. Your public health liaison will invite you to exercises being conducted by others and provide guidance when you are ready to test your own procedures.
Planning First Steps

Review your Continuity of Operations Plan (COOP)
Your organization probably has already developed a plan to continue your operations uninterrupted in the event of an emergency. Planning a Closed POD is a natural extension of COOP activities since taking care of your employees will give you the ability to stay open and continue your work.

Determine who you are protecting
A main consideration for a Closed POD organization is to determine who your target population will be. Identifying employees is easy but what about their families? During any emergency, your employees are going to be concerned about their loved ones at home. We strongly recommend you include them in your planning. Knowing their families are protected will allow your employees to focus on the tasks at hand and help you continue your operations in the face of the emergency. The definition of family can be up to you. In public PODs, individuals will be allowed to receive up to 15 courses of medications. You may establish a limit in terms of numbers such as this or you can define immediate family. You will also want to consider other persons who may not be employees but nonetheless are vital to your operations. This group can include contractors, seasonal, or transient staff.

We recommend you include personnel and their families in your planning. Your staff will be better able to meet your objectives if they know their loved ones are also cared for.
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Identify your planning team

Just as public health needs collaboration to ensure a successful response, you will want to identify individuals within your organization who can work together to develop your dispensing plan. This team should include your human resources personnel, continuity manager, medical advisor, logistics, and security staff.

Determine Education and Training Requirements

As decisions are made regarding how many people will be needed to operate your dispensing site and those people are identified, you will need to determine the level of training that will be assigned to your internal responders. As noted, your public health liaison will provide some training opportunities. It is recommended that, at a minimum, individuals involved in planning and those assigned response duties take basic Incident Command System training. Individuals who will assume management responsibilities in a response are also encouraged to complete at least the IS 200 - ICS for Single Resource and Initial Action Incidents course.

Free online training at:
www.training.fema.gov/EMIWeb/IS

IS-100: Introduction to the Incident Command System (ICS)
IS-700: National Incident Management System (NIMS), an Introduction
Medical Personnel Required

Pursuant to Florida law, each point of dispensing will need to have at least one (1) medical professional who is legally authorized to dispense medications on site. This permission is dependent on the approval and execution of executive orders, any supplement orders, and executed Memoranda of Agreement with the Miami Dade County Health Department.

Education and Screening

Education of your population before an event will also improve your response capabilities. By letting your people know that you are being proactive in planning and what they can expect in an emergency, confusion and fear will be greatly reduced. The following topics should be addressed in pre-event education activities:

☑ The medication dispensing process: You will want to give your population information about where to report and how they will receive medications should the need arise.

☑ Possible threatening agents: Accurate information is vital in the managing of any emergency response. Your population will want to know what threats the community may face and how they may be affected. Currently available fact sheets on possible agents are included with this workbook; as a Closed POD
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partner, your public health liaison will provide you with updated information as it becomes available.

☑ Medications: Your employees will also want to know about the types of medication they may receive in an emergency, how long they will need to take it, and possible side effects. At the time of an event, the most effective medicines for the agent at hand will be determined by scientists at the federal level using available data. Once that determination is made, an Emergency Use Authorization (see definitions) will be issued along with dosing information and other dispensing directions. As a Closed POD partner, your public health liaison will provide you with updated information as it becomes available.

As a Closed POD, your organization will have another advantage over public PODs in that you may choose to pre-screen your population and therefore gather information pre-event that will improve your ability to respond quickly. You can choose to have your population pre-fill out registration forms and maintain those forms with other confidential information. If an emergency situation requires activation of your plan, the forms will be readily available for distribution. You may also choose to have the forms on an internal web site. A sample of the screening form is included with this workbook.
Developing your dispensing plan

You will want to begin your planning by creating the basic framework for response that will:

☑ Outline Command & Control Activities
☑ Identify primary and secondary dispensing locations
☑ Develop dispensing & recovery procedures

Command and Control Activities

A successful response is contingent on effective management of the situation at hand. Just as you address issues that may arise in day to day operations, you will want to clearly delineate responsibilities for each aspect of the response. Initial activities should include the following:

- Who will receive notifications and serve as the Point of Contact (POC) for your organization? Plan for at least three (3) representatives to serve as primary, secondary, and tertiary contacts.
- How will you retrieve and return, if necessary, assets between the distribution point to your dispensing location? Identify available vehicles and qualified staff to transport assets. You will also need to designate the person(s) authorized to receive assets for your organization.
- Who will have accountability for records and assets? Identify persons and processes for maintaining accurate records of...
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assets received, dispensed and returned, and confidential maintenance of medical records.

What are your security needs and capabilities? Your responders and population receiving medications will need to feel safe and medications will need to be secured at all times. You will want to identify potential gaps and possible solutions to address those needs.

Dispensing locations
You will identify at least a primary location where your population will report to receive medications should the plan be activated. It is also recommended that you identify a secondary site as a contingency of conditions mandate. The size of the space will depend on the number of people you will serve but, in general, you will want a large open space with good line of sight like a cafeteria or conference room. The sample flow layout document included with this workgroup can you choose an appropriate space. Key factors to consider include:

- Location familiar to your population
- Separate entrance and exit
- Space to accommodate tables, chairs, and people
- Secure storage space for medications and supplies
- Accessible to persons with disabilities.

You may also want to consider availability of public address and audio visual capabilities to allow for real time messaging during dispensing.
Dispensing materials
While Miami Dade County Health Department will coordinate the transfer of medicines and related supplies provided by the state or federal governments, individual dispensing sites will provide ancillary supplies needed in dispensing operations. As a Closed POD partner, you will identify current supplies and determine needs for additional dispensing supplies. Those supplies can include:

- Office supplies (pens, clipboards, highlighters, etc.)
- Tables & Chairs
- Bags or envelopes
- Medical Supplies (First Aid Kit, Thermometer)

Given the nature of the Emergency Use Authorization process, we also recommend identifying equipment resources for the duplication of forms should sufficient supplies not arrive with medicines.

Response activities
In addition to the planning elements listed above, you will want to include the following in your dispensing plan:

- Response team positions and duties (Sample Job Action Sheets in this workbook)
- How your response team be notified of an activation
- Time frames for mobilizing vehicle to receive assets and preparing dispensing site.
- How your population will be notified that dispensing site is open.
- Protocols for medical emergencies or security breaches.
Frequently Asked Questions

Q. What is my organization's liability?
A. Federal Immunity: The Public Readiness and Emergency Preparedness (PREP) Act sets forth the immunity for "covered persons" from tort claims related to, in this case, "covered countermeasure". The Closed POD may be considered a covered person; a "Program Planner of countermeasure (i.e., individuals and entities involved in planning and administering programs for distribution of a countermeasure)…" appears in CDC Public Readiness and Emergency Preparedness Act Questions and Answers, 42 USC §247d-6d(i)(7)-(7)(A)(ii). As a covered person, if applicable, ENTITY may be immune from suit and liability under Federal and State law with respect to "all claims for loss caused by, arising out of, relating to, or resulting from the administration to or the use by an individual of a covered countermeasure…". 42 U.S.C. § 247d-6d(a)(1).

Q. When would a Closed POD partner be asked to dispense medications?
A. The only time a Closed POD would be activated is in the extremely rare event where the entire population of Miami Dade County was potentially exposed to an agent and needed to receive prophylaxis in a short period of time to avoid becoming ill.

Q. Will the Miami Dade County Health Department send staff to operate the Closed POD?
A. No. By agreeing to become a Closed POD, the partner organization is committing to developing and executing a dispensing plan independent of the MDCHD. MDCHD will provide pre-event technical support, coordinate the receipt of assets allocated to the county, and a liaison during an event to answer questions or assist with resource requests.
Q. Do I have to recruit medical staff to dispense medications to our employees?
A. Every point of dispensing, public or closed, is required to have a medical professional on site to oversee the dispensing of medications. Although there is a possibility that certain provisions in executive orders or emergency declarations issued at the time of the event may relax some rules, Closed POD partners must identify medical personnel to provide oversight of dispensing activities.

Q. How will I know what I need and how will I order medications?
A. When the Closed POD MOA is executed, you will provide a number for your population that will include everyone you are agreeing to provide medications to and their family members. If you do not have exact figures for families, you may choose to estimate the size of the household. If during the event you are short medications or you have a surplus, you will contact the liaison at the number provided at activation to resolve the issue.

Q. How long will people need to take medication?
A. The length of treatment will vary based on the agent and scientific data available at the time of the event. In a catastrophic event, it is expected that initial prophylaxis will include a ten-day regimen of 1-2 doses per day, depending on the medication. If investigations result in the confirmation of exposure, individuals will receive an additional 50-day regimen.

Q. Will the health department deliver all the medicines and supplies?
A. No. Each Closed POD partner will be required to make arrangements to pick up assets allocated to them. Based on numbers provided during the MOA process, MDCHD will assist in estimating the size and type of vehicle you may need to complete this task. You will provide the name of individuals...
authorized to sign for assets on your behalf; those individuals will need to provide government issued photo identification to gain access to the local staging area.

Q. Where do I send people who have medical problems or medical questions?
A. The medical professional on site will be tasked with assisting those individuals with special needs. At activation, MDCHD will provide resource information, as available, who may also assist (i.e. hotlines, websites, etc.). If an individual has concerns that cannot be addressed via these options, they should be given the medications and advised to contact their personal physician for guidance.

Q. Do we have to give people shots?
A. No. The Closed POD model is based on the dispensing of oral prophylaxis to non-symptomatic persons who have potentially been exposed to a hazardous agent. The dispensing of injectable medications or any other invasive countermeasures will be completed in public PODs or alternate medical treatment sites.

Q. How will the medications arrive?
A. Medications will arrive prepackaged in ten (10) day doses. Each box of medications will contain one hundred (100) ten-day doses.

Q. What if people are allergic to the medication?
A. At the time of an event, guidance will be provided by the CDC and FDA on appropriate medications to dispense as a countermeasure. Individuals who are allergic to a primary countermeasure will be dispensed an alternate. Individuals who are allergic to all countermeasures indicated for prophylaxis will be referred to their private physician for evaluation.

Q. What will make the health department decide to activate dispensing plans?
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A. Should there be an overt release of a hazardous agent or indications from laboratories, hospitals, or treatment centers that a hazardous agent has been released, a policy group consisting of medical professionals, epidemiologists, elected officials, law enforcement, and other Subject Matter Experts (SME) will make the decision to activate.

Q. Our people only work regular business hours, what if something happens over the weekend?
A. A release of a hazardous agent can occur at any time. As a Closed POD partner, you will decide if you want to activate your plans off-hours or if you prefer your population go to public PODs to receive prophylaxis. Once major dispensing operations have begun, there is a possibility that access to the local staging area will be restricted and your ability to change your mind after initial refusal may be limited.

Q. Will everyone know we are a Closed POD?
A. No. MDCHD will only disclose the locations of Public PODS with the community. Only law enforcement will be informed of Closed POD sites to maintain situational awareness. It is recommended that employees be urged to use discretion when discussing your plans to avoid a potential surge to your location should the plan be activated.

Q. If I am a Closed POD, do my employees have to get medications from me?
A. No. Individuals have the right to get medications at their Closed POD, if applicable, a public POD, or not at all.

Q. How much will this cost?
A. Medical countermeasures and supplies provided through the SNS are available at no charge. As part of the MOA, you agree not to charge for the dispensing of assets.

Your question doesn’t appear here? Feel free to contact your public health liaison for more information!

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## Definitions

| **Emergency Use Authorization** | The Project BioShield Act of 2004 (Public Law 108–276; “the Act”), among other provisions, established the comprehensive Emergency Use Authorization (EUA) program. The US Emergency Use Authorization (EUA) is a critical new tool for medical and public health communities and is applicable for both civilian and military use. It fills the need for timely and practical medical treatment under emergency conditions and authorizes use of the best product available for treatment or prevention when the relevant product has not already been approved or approved for this specific use by the US Food and Drug Administration. The need for and genesis of the EUA, its requirements, its broad application to civilian and military populations, and its features of particular importance to physicians and public health officials are detailed. |
| **ESF-8** | **Emergency Support Function 8** |
| **Emergency Support Function 8** | Emergency Support Function-8 (ESF-8) Health & Medical: As defined in the National Response Plan, when activated, Emergency Support Function 8 provides the coordination of health and medical response and recovery activities in support of the Emergency Operations Center (EOC); the ESF-8 Health & Medical Group is a functional group within the Operations Section of the EOC’s Incident Command System. |
| **Point of Dispensing (POD):** | Location for dispensing medical countermeasures and related supplies to citizens in a public health emergency; may be a Public POD open to the general public or Co-operating Business/Government Partner POD (Closed POD) established specifically for the employees (or members) of the entities and their family members. |
| **Prophylaxis:** | Medical countermeasures and related supplies designed to prevent the occurrence and spread of disease. |
| **SNS “Push-Pack”:** | A specific quantity of emergency medical supplies that can be delivered anywhere in the US within 12 hours. |
Thank you for taking the time to review this Closed POD planning workbook. The Miami Dade County Health Department Public Health Preparedness Team looks forward to working with you!