1. **Purpose:** The purpose of this Standard Operating Procedure (SOP) is to describe the procedures the Florida Department of Health (FDOH) will use to request, receive and distribute the Centers for Disease Control and Prevention (CDC) Strategic National Stockpile (SNS). Florida will follow these procedures in order to assure:
   - Impacted populations receive prophylaxis within 48 hours of an approved SNS request.
   - FDOH will begin shipments of SNS materiel to the designated counties within four hours of receiving materiel at the designated Receipt, Stage and Store (RSS) facility.
   - FDOH maintains accurate accounting of all distributed assets.
   - FDOH properly recovers assets (if applicable).
   - Impacted counties return to normalcy.

2. **Situation:** The Florida Department of Health is the primary organization responsible for the receipt and distribution of SNS materiel. FDOH activates the SNS Standard Operating Procedure (SOP) when SNS resources are needed or directly shipped (pushed) to Florida by the CDC as part of its overall response to the incident or event. FDOH will activate this SOP when an incident requiring distribution of pharmaceuticals and/or medical supplies exceeds the local and state resources, regardless of the precipitating cause.

   In order to receive and utilize SNS materiel from the CDC, Florida signed a Memorandum of Agreement (MOA) with the CDC. Attachment D1: FDOH/CDC MOA. When activated, the SOP supports local health and medical activities.

   The SNS is available in two forms:
   - **Push Package:** A limited number of pharmaceuticals, antidotes and medical supplies designed to provide rapid delivery of broad spectrum assets for an ill-defined threat within the early hours of a response1;
   - **Managed Inventory:** Managed Inventory (MI) is available upon request by FDOH. The MI provides a larger number of pharmaceuticals and medical supplies than the push package. It may be ordered as follow-on to the Push Package, or the CDC may send MI as the first-line response.

   Specific pharmaceuticals and/or medical supplies may be ordered from the MI to provide treatment of prophylaxis to a biological organism.

   Though initially designed for response to a biological terror attack, the SNS may also be deployed for:
   - Tropical cyclones and other severe weather such as tornadoes causing mass casualties or damaged medical infrastructure
   - Environmental incidents such as wildfires, lightning, floods, heat waves, earthquakes, or tsunami
   - Technological and accidental Hazard Events: nuclear power plants’ leaks, other hazardous material spills or leaks
   - Mass Migration

---

1 [http://www.cdc.gov/phpr/stockpile/stockpile.htm](http://www.cdc.gov/phpr/stockpile/stockpile.htm)
• Biological incidents such as zoonotic diseases, and human infectious disease epidemics and pandemics.

3. Assumptions:
• SNS assets are deployable with or without a Presidential Disaster Declaration.
• The CDC may directly “push” SNS assets to Florida without a request from the state. This action would be based on a credible intelligence threat or actual activities which make such an action prudent prior to a declaration.
• The Florida Department of Health coordinates Florida’s request for the SNS.
• A Receipt, Stage, and Store (RSS) facility operated by the Florida Department of Health is established to receive SNS material. The RSS receives, stages, stores, and distributes pharmaceuticals, medical supplies and equipment to the affected area.
• The Push Package is expected to arrive at the designated state operated RSS within 12 hours of a formal request. Distribution operations from the RSS to a county’s Single-Delivery Site (SDS) will begin within four (4) hours after the arrival of the SNS materiel.
• Managed Inventory (MI) will arrive at the designated RSS facility within 24-36 hours after requested by the state.
• An RSS facility accepts mission requests for SNS materiel, that come from the state personnel designated to validate and approve requests.
• Each county has developed and validated its Strategic National Stockpile Plan.
• Each county has identified the location for its Single Delivery Site to receive materiel from the RSS.
• Locally identified Points of Dispensing (PODs) are the primary locations for the public dispensing of materiel from the SNS cache, and are included in local SNS plans and procedures.
  o The PODs have two configurations:
    ▪ Public PODs are open to all citizens
    ▪ Closed PODs are entities capable of treating employees or patients, lessening the burden on public PODs. Closed PODs include, but are not limited to: prisons, detention centers, healthcare facilities, large industries, first responder prophylaxis sites, residential communities, military installations and Tribal Nations.
• The amount of pharmaceuticals and medical supplies contained within the SNS Push Package may be insufficient to meet local needs, necessitating apportionment of materiel, as necessary. Apportionment methodology is determined by the incident and information available to the Technical Specialists of the apportionment group at time of their activation.
• The population to receive medications is determined by the nature, scope, laboratory results and severity of the incident. Decisions as to who is eligible to receive the countermeasures will be made through the collaboration of federal, state, and local officials.

4. Operations:
• General Operations
  o Except as noted below, SNS operations are addressed in accordance with existing alert/notification, logistics, and mass prophylaxis plans, guidelines and procedures.

• Requesting SNS
  o The FDOH Emergency Coordination Officer (ECO) coordinates SNS resource requests.
  o Requests may be made only by those individuals whose names are on file with the CDC. This list is updated annually, or as necessitated by organizational changes. Positions authorized to request the SNS are:
• State Governor
• State Surgeon General
• FDOH Deputy Secretary for Health
• FDOH Division of Emergency Preparedness and Community Support (DEPCS)
• FDOH/ESF8 Emergency Coordination Officer (ECO)
• State Coordination Officer (SCO) for the Florida Division of Emergency Management.

*Attachment A1: Requesting SNS Assets* provides the information needed at the time the request is made to CDC, as well as the CDC SNS contact information.

• **Resource Management**
  - The FDOH ECO ensures that local requests for SNS materiel receive prompt validation and response. All requests for medications come first to the County EOC, where they are entered into the established requisition system. County EOC requests are validated by State staff, utilizing SNS strategy and guidelines. Once these requests have been approved a mission to fill the request is generated and entered into the same requisition/tracking system and tasked to the RSS facility. After the product has been delivered, the same system is used to document the mission’s completion. The diagram on Page 4 provides an overview of Florida’s resource request procedure.
  - **Key Points:**
    - Orders are accepted only from a county Emergency Operations Center (EOC) through established state requisition systems. Individuals with delegated authority to request SNS assets are indicated in each county’s SNS Plan;
    - Tribal Nations and Department of Defense (DOD) may request assistance directly from federal resources, or from the state. State assistance requests by a Tribal Nation or DOD are placed through the local county’s EOC.
Overview of Florida’s Resource Request Procedure

ESF8
Validate and Respond Promptly to Requests.

State EOC

County EOC

County ESF 8

Tribal Nations / Department of Defense

Hospitals / Treatment Centers

PODs

Alternate Dispensing Sites
• **Financial Responsibilities**
  o The CDC is responsible for all costs associated with shipping and providing security for SNS materiel en route to the state’s designated RSS sites.
  o After receipt of the SNS the state is responsible for all costs associated with the operation of the RSS, including transport of materiel from the RSS site to the impacted county or counties.
  o The state seeks maximum reimbursement for incurred costs though federal funding mechanisms established for the response.
  o Procedures for administrative and finance activities are addressed in the FDOH EOP and includes such items as:
    ▪ Staff Compensation: Overtime hours are paid in accordance with the state of Florida Employee Handbook produced and maintained by the Department of Management Services.
    ▪ Procurement processes including required documentation for reimbursement of purchases (Financial Management and Recovery SOG, June 2012).
    ▪ Coordination with other entities (e.g. FEMA) for reimbursement.
  o The “RSS Operations” component of this SOP includes additional logistical issues.
  o Volunteers are addressed in Volunteer Guidelines, Chap. 110.501-110.504 and the “Florida Volunteer Protection Act (2009) F.S., 768.1355. Information in these documents includes but is not limited to work and break schedules and liability protection.

• **Demobilization**
  Individual assets will be demobilized when related tasks are complete or when appropriate state and local authorities determine that they are no longer needed. FDOH oversees the demobilization of resources and arranges asset transportation as necessary.

• **Receipt, Stage and Store Operations**
  **NOTE:** Specific SNS-related technical information, location(s), and operational procedures determined to be confidential or sensitive are not released to the public.

  o **Receipt, Stage and Store (RSS) Site**
    ▪ The RSS is primarily a logistics function. The RSS is the location where CDC assets are received and prepared for distribution to a county or counties.
    ▪ Prior to the arrival of the state RSS management team a designated staff member located near the RSS site is deployed to the site to serve as the initial RSS Branch Director. This staff member initiates RSS set-up in accordance with the procedures found in Section 1 of the RSS Operations Manual. See: Attachment B1: RSS Operations Manual - Table of Contents.
    ▪ The RSS Branch Director manages RSS operations in accordance with state objectives. The RSS Operations Manual includes a sample RSS Table of Organization.
    ▪ The ESF8 Incident Management structure provides the following support for the RSS:
      – Public Information
      – Planning - Because of the need for current information from the RSS (e.g. status of shipments and staff), the RSS Management Team includes a Planning Liaison. The Planning Liaison serves as an information conduit between the RSS and Command.
      – Finance & Administration. Although Finance & Administration activities are primarily coordinated at the state level, positions within the RSS roster have
been designated that can procure needed resources in accordance with FDOH and state procedures.

- **RSS Operations Involve:**
  - Accepting custody of SNS assets:
    - Accepting custody involves the acceptance of SNS assets from the federal government at the designated RSS site. Section 1 of the RSS Operations Manual documents Florida’s chain of custody procedures, including the management of controlled substances.
    - The RSS operations comply with required procedures of the Controlled Substances Act of 1970 and Chapter 893, Florida Statutes, Drug Abuse Prevention and Control, in regard to the controlled substances received from the Strategic National Stockpile and distributed to PODs or other health care facilities or practitioners.
  - Receiving, storing, and staging of SNS assets:
    - Section 1 of the RSS Operations Manual documents Florida’s procedures and related forms for receiving, staging and storing SNS assets.
    - Receiving involves offloading assets from vehicles at the designated RSS site, retaining all pertinent documents from inbound vehicle personnel, and verification and organization of materiel to facilitate proper inventory management and storage.
    - Storing involves placing materiel in secure, environmentally controlled storage until it is picked and packaged for subsequent shipment(s) to single delivery sites.
    - Staging involves the positioning of medical materiel at the designated RSS site to support shipment to delivery points. Pick lists generated by the Order Triage Specialist prompt designated personnel to pick materiel and shipping personnel who organize it by delivery location.
    - While in the shipping staging area, quality assurance personnel verify the products and the condition of products, count of each product, and destination(s) of each pallet. The Shipping Unit Leader assures that the pallet is wrapped and that the Transportation Unit is notified.
    - Refrigeration or freezer units, as appropriate, will be ordered on an as needed basis for RSS facilities without these capabilities.
  - Repackaging of bulk pharmaceuticals; re-palletizing of pre-packaged medications or medical supplies:
    - The Bureau of Public Health Pharmacy is responsible for the repackaging of bulk pharmaceuticals into the appropriate regimens. Section 1 of the RSS Operations Manual contains the repackaging procedures.
    - Repackaging bulk drugs and compounding of oral suspensions remains the contingency plan for those situations where the prepackaged medicines are inadequate or ineffective. The function of repackaging includes creating individual, labeled regimens of specific drugs staged for delivery;
    - Re-palletizing of pharmaceuticals and medical supplies is a function of the Receipt, Stage and Store (RSS) staff, and will be done to ensure accurate filling of orders placed by local health officials.
- Distribution of SNS assets to approved sites in impacted areas:
  - Distribution of assets is coordinated at the designated RSS to one site in each impacted county. The county ensures delivery of the SNS materiel from this location to their PODs and alternate distribution sites.
  - The RSS Distribution Unit Leader coordinates asset distribution. The primary method of transporting SNS assets to delivery sites is ground transportation. Air transport is used in the event that traffic or other situations prohibit the use of trucks. Resources are distributed in accordance with the state and FDOH logistics plans and procedures.
  - If cold-chain transportation is required, refrigerated trucks or units and/or trucks or units with freezer capabilities, as appropriate, will be requested through logistics. Arrangements should be made to leave the chiller unit at the county delivery site. If the chiller unit cannot be left at the county site, an appropriate cold storage capability will be ordered for the county location receiving SNS materiel.

- Recovery of SNS assets:
  - Recovery of SNS equipment, containers, and unused materiel is outlined in the memorandum of agreement (MOA) between the State and the Division Strategic National Stockpile. See: Attachment D1: Signed SNS MOA_CDC_FDOH. Unused medical assets include, but are not limited to:
    i. Specialized cargo containers.
    ii. Refrigeration systems (to include freezers, if any).
    iii. Unused medications that remained at the RSS.
    iv. Ventilators.
    v. Portable suction units.
    vi. Repackaging and tablet-counting machines.
    vii. Computer and communications equipment.
  - If the return of unused pharmaceuticals is requested by DSNS, then the procedures outlined in the Bureau of Public Health Pharmacy Internal Operating Procedures for return of pharmaceuticals will be followed, along with actions described in the CDC/FDOH Memorandum of Agreement.

- Inventory Control:
  - Inventory control includes tracking and managing SNS assets transferred to state custody, stored within the RSS site, and delivered to the delivery site within any given county. The RSS Management Team oversees the functions of inventory management. Section 1 of the RSS Operations Manual contains the inventory control procedures and forms.
  - Florida’s RSS inventory management system is web-based and scalable. This allows the addition of authorized users at the county and state levels.
  - The Planning and Logistics Sections have access to all warehouses in operation. This visibility allows them to produce reports on resource availability and burn rate of these resources.
  - Electronic spreadsheets and/or paper forms are utilized if the primary computer-based inventory control system is unavailable.

- Staffing
  - The RSS Management Team establishes and maintains a staff check-in and credentialing system. The RSS Staffing Liaison coordinates this process.
Section 1 of the RSS Operations Manual contains the procedure and related forms.

- The RSS Management Team periodically briefs staff regarding the current situation and safety issues.
- The RSS Staffing Liaison works with the state Logistics Section staff to assure RSS staffing needs are met via established FDOH and state staffing procedures.
- Personnel staffing the RSS receive priority prophylaxis. Medications are obtained from the State Pharmaceutical Stockpile. The RSS staff includes the state RSS teams, support agencies (security support, medical support, etc) facility staff and vendors (transportation, etc.). See: Attachment B3: Staff Prophylaxis Procedures. All staff prophylaxis activities comply with the current FDOH EOP – “Responder Safety & Health Support Annex”.
- RSS staffing is maintained according to FDOH and state procedures. RSS operations are expected to be needed for 1-3 days, with 2 staffing shifts per day.

- **Security:**
  - Once the SNS shipment has been received and signed for by an authorized representative of the Florida Department of Health, the state is responsible to provide security for the RSS and shipments en route to designated drop sites. FDOH coordinates the state’s emergency security measures through ESF 16, Law Enforcement (LE). The Florida Department of Law Enforcement (FDLE), as authorized by Chapter 23, Part 1, Florida Statutes (F.S.) maintains a state law enforcement mutual aid plan. The Florida Mutual Aid Plan addresses SNS activities. See: Attachment D5: Florida Emergency Security – Related Statutes and Mutual Aid Information.
  - Controlled substances are managed per state and federal law. Section 1 of the RSS Operations Manual documents Florida’s chain of custody procedure, including the management of controlled substances.
  - Escalation of force for law enforcement agencies is determined by existing law enforcements’ policies.

- **Tactical Communications:**
  - Florida Division of Emergency Management and FDOH have robust and resilient communications systems to support SNS operations. The systems include two-way radios, satellite phones, cell phones, video conferencing, and internet.
  - FDOH Information Technology and Tactical Communication (COMM) staff provide, maintain, and organize the radio, telephone and computer systems used at an RSS facility, for communications inside the RSS and to the Central Office.
  - All components of the SNS communications system are redundant from the standpoint of media, equipment, and in many cases, personnel. Examples include but are not limited to:
    i. Voice & FAX over telephone landline.
    ii. Voice over cellular.
    iii. Data (including email & worldwide web traffic) connectivity over dedicated landline.
    iv. Video Conferencing.
    v. High and Low Speed Data over cellular modem.
vi. Voice and High Speed Data over facility deployable FDOH satellite system.

vii. Voice (“Radio” and Telephone) and Low Speed Data over vehicle satellite systems.

viii. Voice or Data via Voice Over Internet Protocol (VOIP) and (Radio Over Internet Protocol).

– Communications links are tested and used at least quarterly by the owning agency. FDOH satellite phones and cell phones are also used or tested at least quarterly and documented in an email sent to participants.

– Due to the rapid nature of the kinds of events the SNS is designed to address, a complete data communications infrastructure may not be immediately available at the chosen RSS site. As a result, the RSS may receive requests through a cellular modem rather than a commercial high speed data connection or an FDOH high speed satellite network connection. An alternative data connection can also be established over FDOH vehicles equipped with satellite telephones. It should be noted this contingency will be slower in transmission capability. The RSS can also accept mission requests by voice or FAX over a landline or by voice over a cell phone or satellite phone. Although FDOH does not normally use long range radio systems, they are in inventory and additional radio assistance can be requested through State ESF-2 (Communications).

– The diagram on Page 10 depicts standard communication channels by the solid lines. The backup channels are depicted with the dashed lines. The diagram represents relationships and not specific communications media. As shown on the diagram, it is possible for any given SNS element to communicate with any other element using a variety of technologies.
1. Landline
2. Cell Phone
3. Satellite Phone
4. Commercial Data
5. ARES/RACES

1. Landline
2. Cell Phone
3. Satellite Phone
4. Commercial Data
5. DOH Satellite Data

RSS Communications Diagram

HHS/CDC

State EOC

Counties EOC

RSS

County POD [e.g. Dept of Defense Facility]

County POD [e.g. Tribal Nation]

County POD [e.g. Large Industry]

County POD [e.g. Local Hospital]

= Backup Communication Channel
= Formal Communication Channel
• **Points of Dispensing (PODs)**
  - PODs are the local sites for distribution or administration of a variety of medical countermeasures. *See: Attachment B2: Regional Distribution of POD locations – diagram.*
    - Each of Florida’s 67 counties has an emergency management structure that is activated in times of emergencies. Florida also has seven Regional Domestic Security Task Forces (RDSTFs) which work to coordinate emergency efforts across county lines. The county and regional emergency structure involves multi-agency cooperation.
    - The PODs are a local function and the SNS plan in each county establishes POD procedures, which are updated at least annually. County SNS Plans are aligned with the local All Hazards Plan, and address the responsibilities identified in Attachments C1 – C4.
    - Adverse reaction reporting and tracking is a function of the county health department. Guidance for reporting adverse reactions to vaccines or medications are given at time of dispensing. Further information on adverse reaction reporting may be found in the Florida Department of Health (FDOH) Emergency Operations Plan (EOP) Mass Prophylaxis and Treatment Annex.

5. **Organization and Assignment of Responsibilities:**
The FDOH EOP Base Plan and Logistics Support Annex document assign FDOH state responsibilities described in this SOP. *Attachment A6: RSS Table of Organization* and the job action sheets found in the RSS Operations Manual (Table of Contents found in Attachment B1: RSS Ops Manual Table of Contents) document assigned state RSS responsibilities. County SNS plans include local responsibilities, including single-delivery site and POD management. *Attachments C1-C5* provides guidance regarding county SNS responsibilities.

6. **Information Collection and Dissemination:**
The Planning Section of the Incident Management Team in coordination with the local operational entities is responsible for the collection and dissemination of information. Information needed for efficient RSS operations includes:
   - Available amount(s) of pharmaceuticals and medical supplies and equipment.
   - Estimated number of people to be treated.
   - Number of distributed regimens or vaccinations.
   - Estimated or actual burn/usage rate of pharmaceuticals or supplies.
   - Status of shipment.
   - Status of RSS workers.
   - Unmet needs.

7. **Communications:**
   - Communications with the Department’s internal and external partners are conducted in accordance with the FDOH EOP base plan, the FDOH EOP Emergency Notification Annex, and the FDOH EOP Crisis and Emergency Risk Communications (CERC) Annex. As part of its overall CERC activities, FDOH maintains all-hazards communication message/procedure templates, including scenarios involving deployment of SNS assets.
     - Especially for large scale disasters, communications incorporate:
       - Formal and informal agreements between agencies.
       - Contingencies to avoid single points of failure
         - Identification of diverse communication dissemination venues and modalities.
         - Identification of primary and back-up contacts for key information.
Robust redundant/back-up communication equipment which is tested/exercised regularly

- Intra-Agency: The Office of Communications uses various systems to communicate with FDOH staff including email, FDENS and the FDOH Employee Information Line. The FDOH Emergency Notification and Crisis and Emergency Risk Communications Annexes detail the procedures that might be used for these notifications.

- Inter-Agency: Emergency communications with the Department’s external stakeholders are conducted in accordance with the FDOH EOP Crisis and Emergency Risk Communications Annex, Florida’s CEMP, Florida’s Interoperable Communications Plan, Public Information and Joint Information System (JIS) and Joint Information Center (JIC) Guidelines, as well as other related modalities established by Florida’s Division of Emergency Management, and the FDOH Office of Communications.

8. Points of Dispensing (PODs):

- County Plan Updates – State’s Role:
  
  Central Office SNS program staff review and provide feedback to local SNS staff regarding County SNS Plans in accordance with federal guidance, including CDC’s local Technical Assistance Review tool. Plan reviews address the following areas:
  
  - Appropriate single county distribution drop site.
  - Appropriate numbers of PODs to cover each jurisdiction’s population.
  - Adequate staffing for drop site and PODs.
  - Development of alternate methods of dispensing.
  - Procedures for the prophylaxis of first responders and critical infrastructure staff.
  - Development of consistent dispensing messages.
  - Methods of disseminating information.
  - Special/vulnerable populations.
  - Treatment center coordination.
  - Annual training and exercise documentation.

- The State SNS staff coordinates and monitors SNS-related training and exercise activities. FDOH’s Multi-Year Training and Exercise Plan (MYTEP) provide an overarching public health and medical training and exercise plan. The MYTEP provides a roadmap to accomplish the priorities of Florida’s Strategic National Stockpile Program, and in defining and refining the roles and responsibilities of ESF8 functions. Training and exercises play a crucial role in attaining, practicing, validating, and improving the capabilities required to carry out the SNS Plan.

- State SNS training and exercise objectives include:
  
  - Design and conduct drills, workshops and other training in preparation for the full or functional exercise;
  - Design and coordinate a functional or full scale exercise to be conducted yearly.
    
    - Central Office SNS program staff assist county SNS and Cities Readiness Initiative (CRI) planners in training and exercise activities. Attachment C4: State Technical Assistance for County Training and Exercise and Attachment C5: SNS County Guidance contains the related guidance documents.
    
    - County SNS training and exercise plans are maintained in each county. In accordance with guidance, counties training, exercise and real world activities include the following functions:
      
      - Full-scale exercise within the 5-year grant period.
      - Staff call down.
      - Site activation.
9. Attachments: State Health Office
   • Attachment A1: Requesting SNS Assets (released on a need to know basis – contains contact information).
   • Attachment A3: Initial SNS Activation and Notification Checklist.
   • Attachment A4: Sample Governor’s Executive Order Verbiage.
   • Attachment A5: Sample Public Health Emergency Verbiage.
   • Attachment A8: Select SNS-related State Policy Decisions.
   • Attachment D1: Signed SNS MOA_CDC_FDOH.
   • Attachment D2: Record of Changes and Distribution.
   • Attachment D3: Acronyms.
   • Attachment D4: Definitions.
   • Attachment D5: Florida Emergency Security – Related Statutes and Mutual Aid Information.

10. Authorities and References:
    • Federal
    • State
      o Section 23.1225 Florida Statutes (F.S.) provides Florida’s Department of Law Enforcement’s Mutual Aid Plan.
      o Section 110.501-.504 F.S. allows state agencies to recruit and train volunteers to effectively administer or support agency services.
      o Section 120.54(4), F.S. allows state agencies to adopt temporary emergency rules when there is immediate danger to public health, safety, or welfare, without going through the normal rule-making process.
      o Section 252.35, F.S. allows Governor to declare a state of emergency and gives the Governor direction and control of emergency management and allows Governor and the Division of Emergency Management to delegate authority to carry out critical functions to protect the peace, health, safety, and property of the people of Florida.
      o Section 381.0012, F.S. authorizes the Department of Health to maintain the necessary legal action and request warrants for law enforcement assistance and directs state and county attorney, law enforcement, and city and county officials, upon request, to assist the department to enforce the state health laws and rules adopted under Chapter 381, F.S.
      o Section 381.003, F.S. authorizes the department to administer rules relating to the control of communicable disease.
      o Section 381.00315, F.S. authorizes the State Surgeon General to declare public health emergencies and issue public health advisories.
      o Section 768.28 F.S. protects state employees who administer vaccinations as part of their official duties.
o Section 465.015(2)(b), F.S. identifies certain qualified staff authorized to fill, compound, or dispense prescriptions.
o Florida Interoperable Communications Plan, Florida Domestic Security State Working Group, Interoperable Communications Committee, November 1, 2007.
o Memorandum of Agreement for Individual Florida RSS Sites, multiple dates.
o Department of Health, Chapter 110 Volunteer Program – Policies and Procedures, DOHP 365-1-05 (includes forms).
o Florida Activation Procedures of ESF8.
  ▪ Base Plan, December 2011.
  ▪ Logistics Support Annex, October 2010.
  ▪ Crisis and Emergency Risk Communications Annex, August 2010.

- Local
  o Individual Florida County SNS Plans, multiple dates.

11. Record of Changes & Approval:

The Bureau of Preparedness and Response coordinates annual reviews and revisions to the SNS SOP following CDC and EOP guidance. The updates are made utilizing a multi-disciplinary planning team, following the current FDOH Plan Development Guide for State-level Operational Plans.

In addition, the Bureau works with stakeholders to assure updates are made to address CDC program changes, After Action Reports (AAR) Improvement Plans (IPs) and other information received indicating a need for plan revisions.

Prepared by: Charlie Gaylor
State Coordinator, Strategic National Stockpile, Bureau of Preparedness and Response

Reviewed by: Bobby Bailey
Medical Logistics Coordinator, Bureau of Preparedness and Response
June 20, 2012

Approved by: Mike McHargue,
Acting Chief and Emergency Coordination Officer Bureau of Preparedness and Response
September 21, 2012

Signature of Approval: _____On File_____