

## APPENDIX 1 DISPENSING & VACCINATION

### I. AGENCIES

#### Primary Agency

- Johnson County Health Department (JCHD)

#### Supporting Agencies

- Johnson County Emergency Management and Homeland Security (JCEMHS)
- Johnson County Medical Action (Med-Act)
- Johnson County Mental Health (JCMH)
- Johnson County Sheriff's Office (JCSO)
- American Red Cross
- All other Johnson County Departments and Agencies

### II. INTRODUCTION

This appendix outlines the purpose, scope, planning assumptions, concept of operations and roles and responsibilities of agencies during dispensing or vaccination to large numbers of individuals. This appendix fulfills the state Strategic National Stockpile (SNS) Standard Operating Guide planning requirements for dispensing. It also attempts to meet the 48 hour Cities Readiness Initiative (CRI) dispensing guidelines. This appendix can be activated independently, or in conjunction with *Appendix 2 – Strategic National Stockpile (SNS) Request and Management*. All materials included in this appendix and its attachments should be considered as draft and available for customization to the incident response.

### III. PURPOSE

The purpose of this appendix is to outline the steps necessary for mass dispensing of prophylaxis medications during or prior to a public health incident, vaccinate individuals when vaccinations are recommended for post-exposure prophylaxis (i.e. Smallpox, Meningitis and other vaccine preventable diseases), or during county emergencies or events where mass dispensing would be coordinated through Johnson County Health Department (JCHD) as a supporting agency, and to assign individual or group responsibilities for those steps. The purpose of this appendix is dispensing and vaccination in response to any event, public health emergency or otherwise that may require use of local resources to dispensing of the Strategic National Stockpile (SNS).

#### IV. SCOPE

This appendix covers the operational responsibilities and concepts in dealing with mass prophylaxis dispensing and vaccination operations. When dispensing and vaccination activities are warranted and authorized, this guide will be used to ensure operations are executed in a fast and efficient manner.

This guide and its attachments cover the processes, staff, and equipment needed to dispense medications and vaccines in order to protect the health of Johnson County residents and visitors.

#### V. PLANNING ASSUMPTIONS AND CONSIDERATIONS

- Any person exposed to a communicable disease while in Johnson County will receive prophylaxis if recommended and available. If persons are exposed in Johnson County and subsequently leave the area, Johnson County Health Department (JCHD) will notify their local health department so that the individuals can be handled locally per contact investigation protocols.
- This appendix can be utilized for a variety of public health emergencies including small outbreaks that may only require the treatment and post-exposure prophylaxis of a small number of individuals to larger county or metropolitan-wide outbreaks that require post-exposure prophylaxis of the entire population.
- Priority prophylaxis will be provided via priority prophylaxis dispensing locations. (Attachment [redacted] - ???)
- Upon determination of a public health emergency or incident, it is the goal of JCHD, that if warranted, the residents of Johnson County will be prophylaxed within 48 hours.
- Only asymptomatic persons will receive prophylaxis.
- Symptomatic persons shall be directed to the nearest treatment center(s). Individuals arriving of their own accord and having the ability to go to the nearest treatment center using the same mode of transportation will need to do so. Individuals who are too ill to use the same mode of transportation they arrived by will be transported by EMS personnel.
- A head of household may pick up prophylactic medications for household family members with knowledge of the ages and weight of children in the household, if applicable, as well as health history and demographics for all persons receiving medication.
- The number of medication regimens received by a single household will be determined on a case by case basis. Those picking up medication for any purpose other than household members (i.e. any communal living situation where the residents are not related, such as a half-way house or nursing facility), will be directed to designated sites for pick up of medications per Homebound/Nursing Home protocols. (Attachment [redacted] - Homebound, Institutionalized or other Non/Limited Ambulatory Persons Dispensing Process.)
- Minors (those under the age of 18) will be allowed to pick up prophylactic medications for household family members in the event a head of household is

unavailable. Knowledge of the ages and weight of children in the household, if applicable, as well as health history and demographics for all persons receiving medication will continue to be a requirement.

- No identification will be required to receive prophylaxis at open sites/Neighborhood Dispensing Centers (NDCs).
- During an emergency, the Governor has the power to waive State laws and regulations regarding the dispensing of medications and who is authorized to do so. The standing orders of the Johnson County Medical Advisor will indicate who is authorized to dispense per those standing orders, including medical and non-medical models of dispensing. See Authorities section of the Biological Incident Annex.
- Johnson County will coordinate with appropriate agencies in dispensing to all persons under custodial or incarcerated status within Johnson County. See Attachment \_\_ - *Homebound, Institutionalized, or other Non/Limited Ambulatory Persons Dispensing Process*.

## VI. CONCEPT OF OPERATIONS

### A. Command and Control

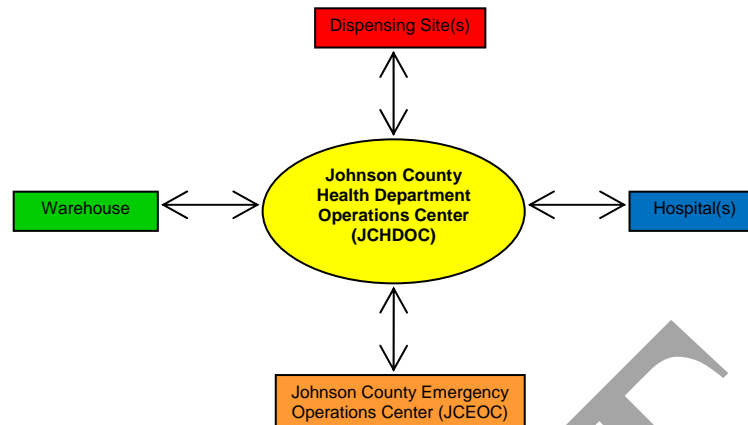
The command and control concept of dispensing and vaccination will be dependent on factors such as duration, nature, severity, and impact of the public health emergency or incident on local resources and will affect the structure of the command and control system utilized in response. The use of the Incident Command System (ICS) and Unified Command (UC) is vital (*Attachment [redacted] - DOC ICS Chart* and *Attachment [redacted] - Onsite ICS Chart*).

Refer to *BIA Section IV A. Command and Control*.

### B. Information Systems

#### a. WebEOC

WebEOC will be utilized to communicate between the dispensing site(s), hospital(s), Johnson County Emergency Operations Center (JCEOC), warehouse operations and the Johnson County Health Department Operations Center (JCHDOC). Equipment, supplies, and logistical needs will be communicated through the JCHDOC (*Appendix 3: Communications*).



### b. KSWebIZ

KSWebIZ is the Kansas immunization registry, a web-based centralized birth to death database that maintains statewide immunization records obtained through informed consent that are complete, accurate, portable, and secure. This system is also used to track countermeasures (antibiotics and immunizations) and adverse reactions during a public health emergency or incident.

### c. MEDS|POD

MEDS|POD is a computer-based system that allows rapid prophylaxis or vaccination for maximum patient throughput as the system contains an embedded Decision Support Service (DSS). The service evaluates patient risks based on pre-determined protocols and automatically routes the patient(s) to the proper station to receive medication recommendations and the appropriate level of care. MEDS|POD allows for accurate documentation as patient health forms can be altered to address the specific incident or event. This system establishes and automates patient tracking, electronic records all patient dispensing and vaccination transactions including pharmaceutical lot numbers, and can be utilized for real-time event monitoring and management.

## C. Site Determination

Determination of the number of dispensing sites to activate will depend upon the projected number of individuals needing post-exposure prophylaxis or vaccination and the distribution of the population throughout the county. A target population will be identified and sites will be determined accordingly. It is anticipated that post-exposure prophylaxis dispensing or vaccination will occur at open dispensing sites or neighborhood dispensing centers (NDC), which are pre-designated sites that can be activated when there is a need to dispense medication or vaccine to the general public.

#### **D. Alternate Dispensing Methods**

There are many alternate methods for providing prophylaxis to the public in addition to the open dispensing sites or NDCs. Dispensing should be based on Epidemiology and those at most risk. Barring that, if it is determined that all persons in Johnson County would benefit in receiving medications/vaccine, then these additional dispensing methods can be used in addition to open sites. Examples include, but are not limited to:

- Johnson County Government may provide prophylaxis for employees and their family members who support public health operations
- Drive-through operations may be set up to dispense medication or to provide vaccination to the general or a targeted population
- Priority prophylaxis may be given to First Responders and their families, as appropriate in addition to those who are supporting public health operations
- A closed site (site not open to the general public i.e. Hospital, large business) may be set up to provide priority prophylaxis to volunteers and their families, as appropriate prior to beginning their assignment (*Attachment [redacted] - Closed Site Dispensing Process*)
- Prophylaxis may be provided to individuals who have been called to respond to an emergency, either in or away from Johnson County
- Hospitals and nursing facilities will dispense to their in-patient population as well as their staff and families, as appropriate (*Attachment [redacted] - Homebound, Institutionalized or other Non/Limited Ambulatory Persons Dispensing Process*)

#### **E. Notification**

All JCHD staff will be called to a central check-in location for assignments. Supporting agencies will be notified as needed and documentation of notification will be made (*Attachment [redacted] - Notification Documentation for Public Health*).

#### **F. Dispensing Site Models**

- The Incident Command System will be utilized for all public health operations (*Attachment 5 – ICS Command and General Staff, Attachment [redacted] - DOC ICS Chart and Attachment [redacted] - Onsite ICS Chart*).
- There are three site models that may be utilized during a public health emergency or incident. They are:
  - ♦ MEDS|POD™ – Uses the MedsPOD software system to dispense prophylaxis (*Attachment 6 - MEDS|POD™ Design Template and Attachment [redacted] - MEDS|POD™ Medical Emergency Decision System – Point of Dispensing information brochure*). This system utilizes a green (fast track), yellow (intermediate), and red (complex) color coding system to determine the level of difficulty to dispense to an individual;

- ♦ Non- MEDS|POD™ – Standard (daily) operations;
- ♦ Drive-Through – Individual(s) are prophylaxed while in a vehicle.
- The form required to complete the MEDS|POD™ registration process indicates the minimum amount of data elements needed from each prophylaxis recipient before receiving their medication regiment.

## **G. Volunteer Reception Center**

A volunteer reception center will be opened to solicit dispensing operations volunteers, as determined necessary. Volunteer management guidelines for dispensing are found in *Attachment [redacted] - Volunteer Management Plan*.

## **H. Vaccination Protocols**

Signed vaccination protocols for all vaccinations provided by the health department are maintained electronically. They have been approved and signed by the Johnson County Medical Officer (G:\ EXCHANGE \ 2007 Disease Containment \ Immunizations Section \ Black Book-Signed Protocols). Individuals receiving vaccinations will be given a phone number to report adverse events as a result of receiving the vaccination. All reports will be reported through the Vaccine Adverse Event Reporting System (VAERS). Medical practitioners authorized to issue standing orders and protocols for dispensing sites are the state medical officer and contracted physicians with JCHD.

# **VII. ROLES AND RESPONSIBILITIES**

## **A. Johnson County Health Department**

- Identify and protect the populations most at risk to the best of our abilities with the resources available.
- Set up and manage mass dispensing (or vaccination) clinics as necessary based on guidelines.
- Provide leadership and direction in responding to a health emergency to the Johnson County Board of County Commissioners (Local Board of Health) as is consistent with the authority of the Local Health Officer (Authorities BIA page 10).
- Activate the public health emergency response and begin the notification process (*Appendix 3 – Communications*).
- Prioritize public health services
- Ensure identified health department employees are trained and knowledgeable about dispensing site, setup and operations.

## **B. Johnson County Emergency Management will:**

- Manage EOC Operations.
- Coordinate mutual aid, logistics and resource requests.

## **C. Johnson County Medical Action (Med-Act) will:**

- Be available to assist in public health operations.

- Maintain first aid stations, as needed.

**D. Johnson County Mental Health will:**

- Coordinate on-site psychosocial support services provided to responders, volunteers, and community members as needed during public health operations.
- Work with community-based organizations, nongovernmental organizations, and regional partners to determine the types of psychological and social support services and training courses available in their jurisdictions.

**E. Johnson County Sheriff's Office will:**

- Provide and coordinate law enforcement support and security for building, supplies, and staff for dispensing sites.
- Provide and coordinate law enforcement support and security for building, supplies and staff for LDS.
- Manage dispensing site exterior traffic control.
- Manage dispensing site interior crowd control.
- Develop and implement site security and escort plans for SNS materials and other resources leaving the LDS site or during the transport of materials and resources to and from our dispensing sites.

**F. American Red Cross will:**

- Coordinate on-site food and water all onsite workers.
- Maintain on-site staff break areas.

## VIII. ADMINISTRATION AND SUPPORT

Refer to *BIA Section VI Administration and Support*

## IX. AUTHORITIES

Refer to *BIA Section VII Authorities*

## X. ACRONYM / TERMS DEFINITION LIST

**Closed Site:** A site not open to the general public for Post-Exposure Prophylaxis.

**Neighborhood Dispensing Center (NDC):** In field location where asymptomatic individuals receive pharmaceuticals for Post-Exposure Prophylaxis.

**Local Distribution Center (LDS):** Local Distribution Site

**Open Site:** A site designated for use by the general public. Also referred to as Neighborhood Dispensing Site.

**Post-Exposure Prophylaxis:** The timely provision of pharmaceuticals to primarily asymptomatic persons who have been potentially exposed to a life-threatening biological or chemical agent for which therapeutic intervention during the early stage of disease provides maximum life-saving impact.

**PPE:** Personal Protective Equipment utilized for health and safety with standard precautions.

**Treatment:** The aggressive provision of pharmaceuticals to symptomatic persons infected with a life-threatening biological or chemical agent.

**SNS:** Strategic National Stockpile

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