Table of Contents

Introduction............................................................................................................................3
Section 1: Appoint a Planning Committee.................................................................6
Section 2: Determine Who Your Site Will Serve....................................................8
Section 3: Determine Staffing & Structure..............................................................9
Section 4: Identify a Dispensing Location ...............................................................12
Section 5: Layout Your Floor-plan............................................................................13
Section 6: Determine Security Needs & Capabilities............................................15
Section 7: Develop Dispensing Procedures.........................................................18
Section 8: Messaging & Communications............................................................20
Section 9: Train Your Workforce and Practice Your Plan ....................................22

ATTACHMENTS............................................................................................................23
A. Sample Information Letters to Employees.......................................................23
B. Sample Volunteer Solicitation Letter...............................................................24
C. Sample Job Action Sheets...............................................................................25
D. Sample Site Considerations.............................................................................32
E. Dispense Assist ................................................................................................33
F. Medical Screening Form..................................................................................35
G. Medication Tracking Form..............................................................................36
H. Just in Time Training Guide..............................................................................37
I. HMAC Contact Information..............................................................................40
J. Signage..................................................................................................................42
The Case for Private Medication Centers

Whether by accident or part of a terrorist attack, the release of a biological agent such an anthrax could put hundreds of thousands of people at risk. People will need preventive medications immediately. The federal government will ship supplies from national stockpiles to Public Health, who will activate long-standing and well-rehearsed plans to dispense the medicine at numerous locations in the community. Private Medication Centers, operated by partners such as yourself, will be locations where individuals can access preventive medications from the national stockpile during a public health emergency. The successful setup and operation of your Private Medication Center will rely on detailed planning and training conducted ahead of the emergency. Private Medication Centers dispense exclusively to their employees, employee families, and/or clients. Completing this workbook is one step towards assuring your organization is ready to implement this capability, should the need ever arise.

About Public Health

Your local health department provides a broad array of services to residents within the county. Services may include (but are not limited to): primary care, family planning, disease surveillance, emergency preparedness, adding environmental health, chronic disease and injury prevention, and maternal/child health programs. Years of planning and real-world implementation provide the foundation for tools and resources in this planning workbook.

About the Northwest Healthcare Response Network

The Northwest Healthcare Response Network (NWHRN) is a coalition of healthcare organizations ranging from hospitals to in-home providers that plan, train and exercise together to build organizational and regional capabilities to prepare for and respond to disasters. Administered by PHSKC in partnership with the Tacoma-Pierce County Health Department, NWHRN serves and advocates on behalf of healthcare organizations in both King and Pierce Counties. More than 300 organizations have participated in NWHRN’s activities, helping to strengthen the resilience of the local healthcare community by building crucial relationships among healthcare and response partners. More information about the Northwest Healthcare Response Network can be found at www.nwhrn.com or by calling (206) 263-8715.

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Getting Started

This workbook will assist public, private, and nonprofit organizations with pre-event Private Medication Center planning before an emergency occurs. The workbook is designed to be filled out in hard copy, enabling the completed workbook to serve as the organization’s private medication center plan. Helpful resources — such as sample letters, forms, and training materials — are included at the back of the workbook. The sections of the workbook can be broken up and used as individual planning exercises, but you will receive the greatest benefit from completing the workbook in its entirety. Best results will be achieved by completing the workbook in order. By completing this workbook, you are greatly improving your organization’s readiness to activate a Public Medication Center.

Developing a plan to dispense medication to a large number of people at first glance appears to be extremely challenging, especially for non-health professionals. This planning workbook will help you produce a responsive Private Medication Center (PMC) plan that not only supports your organization but supports our overall community mass dispensing efforts. Your planning process will include:

□ Determining who Your Site will Serve
  ♦ Decide whether you will accommodate employees’ families
  ♦ Define the term family member (e.g. reported to the IRS, household members, etc.)
  ♦ Determine how many total staff and family members will be served to estimate the amount of medication needed

□ Appointing a Planning Committee
  ♦ Consider including human resource personnel, continuity managers, medical advisors, logistics specialists, security staff and your local public health liaison

□ Determining Staffing & Structure
  ♦ These individuals could be chosen from your PMC Committee
  ♦ Regardless of your number of PMCs, each PMC must have a person in charge, who should be capable of managing large numbers of people in extenuating circumstances, and should be familiar with your staff, your organization and their needs
Plan Development Checklist

☐ Identifying a Dispensing Location & Design
  ✷ Identify a secure room that can be utilized for medication or vaccines and supplies storage
  ✷ Dispensing areas should have:
    ◦ Separate entrance and exit
    ◦ Easily identifiable by all employees
    ◦ Able to accommodate tables, chairs and large numbers of people
    ◦ Place to secure medications and supplies
    ◦ Able to accommodate people with disabilities

☐ Determining Security Needs & Capabilities
  ✷ Consider your current security resources and capabilities and determine if additional security
    will be needed in an emergency to protect your facility and staff

☐ Identifying, Purchasing, and Storing Necessary Supplies
  ✷ Office supplies, tables, chairs, bags or envelopes, and medical supplies

☐ Developing Dispensing Plans & Procedures
  ✷ If you decide to become a Private Medication Center, your local health department will provide
    you with a step-by-step planning workbook to prepare your organization for a public health emer-
    gency

☐ Developing Communication & Messaging Systems
  ✷ Before the event, establish an awareness campaign that informs your employees of your agency’s
    partnership with your local health department
  ✷ Prepare activation and informational messages before an event, so that your communications
    coordinator may access and post messages rapidly
  ✷ Educate your employees on the plan
Section 1: Appoint a Planning Committee

Collaborative Planning

Establishing a Private Medication Center for your organization will involve many people from various departments/agencies within and possibly outside of your organization. It is important to have their input during the planning process to obtain their perspective and expertise in establishing operational policies and procedures and to ensure they understand and accept their roles and responsibilities during an emergency that requires establishing a Private Medication Center. This committee can be used to develop your procedures and then disband or serve as advisors during implementation.

Committee Members

Consider the positions below as part of your planning committee. Address the expertise and/or resources they bring to the team to help define their roles and responsibilities. This list is not inclusive. Add/delete positions based on your organization’s structure. These may be the same individuals who activate the plan and respond during an emergency. Table 1, on the next page, lists suggested roles for your planning committee. We encourage you to fill out this table in detail and update it annually.
### Section 1: Appoint a Planning Committee

List your **Private Medication Center** committee members by position:

<table>
<thead>
<tr>
<th>Human Resources &amp; Finance Coordinator</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ______________________________</td>
<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: _________________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: _____________________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Continuity Manager</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ______________________</td>
<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: __________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: ______________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Legal Counsel</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ______________________</td>
<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: __________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: ______________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Medical Advisor*</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ______________________</td>
<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: __________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: ______________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Public Health Liaison</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
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<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: __________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: ______________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Communications Coordinator</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ______________________</td>
<td>Position/Title: ____________________________</td>
</tr>
<tr>
<td>Work Phone: __________________</td>
<td>Home Phone: ________________________________</td>
</tr>
<tr>
<td>Email: ______________________</td>
<td>Cell/Pager: ________________________________</td>
</tr>
<tr>
<td>What they bring to the planning team:</td>
<td></td>
</tr>
</tbody>
</table>

*Contact your local health department to determine medical staffing requirements, if any.

Table 1 - Planning Committee Information
Determine the total number of people you expect to service at your **Private Medication Center** is a critical step in your planning process. When it comes to medication supply, there is no need to be conservative when deciding the number served. This number will help define the dispensing strategy for your organization by helping determine the size, location and layout of your Private Medication Center (PMC) facility; the number of staff volunteers needed to operate the facility; as well as drive the timeline allotted for dispensing medication.

**Types of individuals our PMC will serve (define each in the space provided):**

Employees

Clients/patients

Vendors

Family members

Estimated Numbers Served

Employees:

Clients/patients/bed count:

Vendors:

Family Members:

Others:

TOTAL:

* Estimates of family members can be calculated by multiplying the number of employees and clients by 3 (average # of persons per household).
1. **Determine Organizational Structure** - The Incident Command System (ICS) is a standardized approach for incident management. The ICS structure was developed by the Federal Emergency Management Agency (FEMA) and can be utilized during any type of hazard or emergency. The ICS structure below identifies all of the potential sections that may be activated to manage and coordinate your Private Medication Center operations. The figure below (Figure 1) is an example of an organization structure you may use for your PMC. Determine which roles and functions will be activated and which management staff/volunteers will be assigned to the positions. See Appendix C for Job Action Sheets for the specific job functions that will be required at the Private Medication Center.

2. **Determine Staffing Needs** - The number of staff volunteers need to support your Private Medication Center operations depend on the size of your facility, the floor plan, designated population, desired throughput and time allotted for dispensing operations. Your organization does not have to plan to activate all sections or use the same number of personnel listed in the diagram below. Also, the number of medical personnel will depend on whether you have an internal Occupation Health Department or contract external medical personnel.
3. In the table below (Table 2), list the names and contact information for those who will serve as Private Medication Center Coordinators.

<table>
<thead>
<tr>
<th>Position</th>
<th>Primary Name</th>
<th>Secondary Name</th>
<th>Phone</th>
<th>Phone</th>
<th>Email</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private Medication Center Supervisor</td>
<td>Primary Name:</td>
<td>Secondary Name:</td>
<td>Phone:</td>
<td>Phone:</td>
<td>Email:</td>
<td>Email:</td>
</tr>
<tr>
<td>Logistics Coordinator</td>
<td>Primary Name:</td>
<td>Secondary Name:</td>
<td>Phone:</td>
<td>Phone:</td>
<td>Email:</td>
<td>Email:</td>
</tr>
<tr>
<td>Operations Coordinator</td>
<td>Primary Name:</td>
<td>Secondary Name:</td>
<td>Phone:</td>
<td>Phone:</td>
<td>Email:</td>
<td>Email:</td>
</tr>
<tr>
<td>Security Coordinator</td>
<td>Primary Name:</td>
<td>Secondary Name:</td>
<td>Phone:</td>
<td>Phone:</td>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

What they bring to the PMC:

Will activate initial security measures and coordinate with organizational security and law enforcement.

Planning Coordinator

<table>
<thead>
<tr>
<th>Primary Name</th>
<th>Secondary Name</th>
<th>Phone</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
</table>

Table 2 - PMC Coordinator Positions

*Attach a roster of staff who could be called upon to fill other Private Medication Center roles. You may need to contract with an outside organization to fill some of the roles (e.g. dispensers or security)*
4. **Determine Staffing Needs** - List the number of staff needed in each position for a 12 hour shift. See Appendix C for detailed descriptions position’s responsibilities. The table below (Table 3) will help you determine how many PMC staff members you will need to have per shift. This number will also help determine training needs.

<table>
<thead>
<tr>
<th>Job Position</th>
<th># Staff Required Per Shift</th>
</tr>
</thead>
<tbody>
<tr>
<td>PMC Supervisor</td>
<td></td>
</tr>
<tr>
<td>Communications</td>
<td></td>
</tr>
<tr>
<td>Coordinator(s)</td>
<td></td>
</tr>
<tr>
<td>Communications Staff</td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td></td>
</tr>
<tr>
<td>Coordinator(s)</td>
<td></td>
</tr>
<tr>
<td>Security Staff</td>
<td></td>
</tr>
<tr>
<td>Operations</td>
<td></td>
</tr>
<tr>
<td>Coordinator(s)</td>
<td></td>
</tr>
<tr>
<td>Dispensing Lead</td>
<td></td>
</tr>
<tr>
<td>Medical Dispensers</td>
<td></td>
</tr>
<tr>
<td>Planning &amp; Documentation</td>
<td></td>
</tr>
<tr>
<td>Coordinator(s)</td>
<td></td>
</tr>
<tr>
<td>Planning Staff</td>
<td></td>
</tr>
<tr>
<td>Logistics</td>
<td></td>
</tr>
<tr>
<td>Coordinator(s)</td>
<td></td>
</tr>
<tr>
<td>Logistics Staff</td>
<td></td>
</tr>
<tr>
<td>Human Resources &amp; Finance</td>
<td></td>
</tr>
<tr>
<td>Coordinator</td>
<td></td>
</tr>
<tr>
<td>Human Resources &amp; Finance Staff</td>
<td></td>
</tr>
</tbody>
</table>

Table 3 - PMC Staffing Number
Section 4: Identify a Dispensing Location

Identify a primary and alternate facility

You will need to select a primary and alternate location for your PMC. Options could include a conference room, lunch room, or other available spaces. Factors such as privacy, security, and the location of your designated populations should influence the location of the PMC. You may choose to operate more than one PMC. For example if your organization operates multiple campuses you may choose to have Private Medication Centers at each campus. See Appendix D, Private Medication Center Site Considerations, for further guidance on selecting a dispensing facility location.

A) Consider the following when selecting a location for your PMC:
- Review the physical characteristics of the facility:
- Covered/Uncovered
- Secure arrival area for product
- Loading dock area
- Rear door
- Front door
- Product staging area
- Parking for PMC staff
- Parking for population served

B) Estimate the number of security personnel needed at the arrival area

Fill in your primary and alternate site information in Table 4 - Identify the PMC Facility:

<table>
<thead>
<tr>
<th>Primary Dispensing Facility</th>
<th>Alternate Dispensing Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility</td>
<td>Name of Facility</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Name</td>
</tr>
<tr>
<td>Address</td>
<td>Address</td>
</tr>
<tr>
<td>City</td>
<td>City</td>
</tr>
<tr>
<td>Phone Number:</td>
<td>Phone Number:</td>
</tr>
<tr>
<td>Fax Number</td>
<td>Fax Number</td>
</tr>
<tr>
<td>State</td>
<td>State</td>
</tr>
<tr>
<td>Zip Code</td>
<td>Zip Code</td>
</tr>
<tr>
<td>Phone Number:</td>
<td>Phone Number:</td>
</tr>
<tr>
<td>Point of Contact</td>
<td>Point of Contact</td>
</tr>
</tbody>
</table>

Table 4 - Identify the PMC Facility
Facility Layout

The design and layout of your Private Medication Center will impact the efficiency of your Private Medication Center operations. Design your floor plan to help you achieve the throughput goals developed with your public health liaison. Your throughput could be number of individuals per hour or number of families per hour. If you coordinate employees to pick-up medication for their family, make sure they bring in the forms for each individual. The next two pages will help you plan the design of the Private Medical Center. The sample floor-plan below (Figure 2) has proven to serve 100 – 200 people per hour. Figure 3, on the following page, represents the same layout as Figure 2, yet is displayed in three dimensions. Create a floor-plan for your Private Medication Center and attach it to this workbook.

---

The following guidelines should inform the layout of your Private Medication Center:

- **Staff Sign-in Area**
  - This will be outside of the entrance of the Private Medication Center.
  - Usually this area has one or two tables and the corresponding number of chairs that fit at the table (for one table it would be two chairs)
  - This is where people will pick up their paperwork (screening form, event fact sheets, etc)
Section 5: Layout Your Floor Plan

- **Form Fill-Out Area**
  - Usually this area has four or more tables with the corresponding number of chairs.
  - This is where people will fill out their screening forms, outside the PMC.
  - We encourage your organization to have employees fill-out the forms at home and bring in a form for each family member, so that you only have one household representative at the PMC.
  - If the individual has showed up with the forms already filled out, s/he may go directly into the medication center for screening and dispensing.
  - There should be enough room between the Staff Sign In Area and the Form Fill Out Area so that the lines don’t back up between the two areas.

- **Screening Area**
  - Usually this area has two or more tables with the corresponding number of chairs.
  - There should be enough room between the Screening Area and the Dispensing Area so that the lines don’t back up between the two areas.
  - There should be enough room between the tables within this area to allow privacy in the screening process.

- **Dispensing Area**
  - Usually this area has two or more tables with the corresponding number of chairs.
  - There should be enough room between the Screening Area and the Dispensing Area so that the lines don’t back up between the two areas.
  - There should be enough room between the tables within this area to allow privacy in the screening process.

- If using signage, mark where it will be set up on your floor-plan. Be sure to have visible entrance and exits signs (see appendix J)

- Mark locations for posted security staff and/or traffic control as outlined in the Private Medication Center plan
Security will be a component of your Continuity of Operations plan. It is also an important component of Private Medication Center operations. The safety and security of your Private Medication Center staff and guests, the actual facility and the medications being dispensed should be addressed. The following are some suggested measures to enhance the security of your facility and designated population.

Your security plan should include the following:

- Transportation security
- Physical security
- Identification
- Access control
- Lighting
- Communications
- Security breaches

Attach a copy of the security plan for your Private Medication Center to this workbook.

1. Physical Security: Take practical steps to prevent unauthorized access to your Private Medication Center site, facility, and medication:
   - Control the flow of traffic arriving and departing from your Private Medication Center
   - Verify the credentials of people entering the Private Medication Center
   - Secure unused entrances and exits
   - Identify a secure location within your facility where your medications can be stored until needed (see Table 5)
   - Use appropriate signage (See Appendix J, Signage)

<table>
<thead>
<tr>
<th>Medication Storage Area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Location</strong></td>
</tr>
<tr>
<td><strong>Point of Contact Name</strong></td>
</tr>
<tr>
<td><strong>Point of Contact Phone Number</strong></td>
</tr>
</tbody>
</table>

Table 5 - Medication Storage Area
2. Personnel Protection: Security measures should be taken to promote the safety of your employees and other individuals being served by your Private Medication Center. Individuals disruptive to the operation of the Private Medication Center may need to be removed by security and/or law enforcement personnel. Establish a process of emergency communications so Private Medication Center staff can quickly request assistance from security personnel as needed (see Table 6).

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Address System</td>
<td></td>
</tr>
<tr>
<td>Hand-held Radios</td>
<td></td>
</tr>
<tr>
<td>Break room Boards</td>
<td></td>
</tr>
<tr>
<td>Cell Phones</td>
<td></td>
</tr>
</tbody>
</table>

Table 6 - Security Equipment

3. Law Enforcement/EMS: Have contact information readily available for your local police department should a security issue arise that requires intervention by local law enforcement. Consider alternate methods of contacting law enforcement / EMS since landlines can be overloaded during emergencies. Keep in mind that the law enforcement / EMS may be busy responding to the emergency.

Fill out Table 7 below for security references:

<table>
<thead>
<tr>
<th>Emergency Contact Information</th>
<th>Name</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Law Enforcement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance</td>
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<td></td>
</tr>
</tbody>
</table>

Table 7 - Emergency Contact Information
Section 6: Determine Security Needs & Capabilities

4. Additional considerations for your security plan:

Transportation
- Escort procedures for transporting medications
- Alternative routes for delivery of the medications to the PMC

Physical Security
- Where to post security personnel; number of security posts
- Number of security personnel assigned per shift to the PMC
- Whether security personnel provide physical security inside the PMC in addition to outside perimeter security
- Identifying restricted access areas inside the PMC (e.g. medication storage area)

Identification
- Photo identification requirements for PMC staff
- Method to identify/credential drivers receiving and delivering supplies and equipment

Access Control
- Procedures for granting access into the facility
- Whether to allow visitors access into the PMC
- Channeling incoming and outgoing vehicle traffic

Physical Barriers
- Utilizing additional fences, barriers, and/or gates for the perimeter of the PMC

Lighting
- Adequate lighting for interior and perimeter, especially at night

Communications
- Types of communication system(s) to be used by security personnel

Security Breaches
- Procedures for notifying law enforcement officers in the event of a security breach, unauthorized vehicle, or suspicious package
- Area to detain disruptive individuals until the police can intervene
- Evacuation plan if the PMC security is compromised
Section 7: Develop Dispensing Procedures

The Dispensing Process: Step-by Step

1. **Priority Groups**: Establish procedures to first dispense appropriate quantities of medication to those staff that are assisting with operating the Private Medication Center, then begin dispensing to the rest of the covered individuals.

2. **Patient Flow**—determine the traffic pattern at the facility. Consider the order of dispensing (e.g. first come - first served, by last name, or with timed entry by department).

3. **Sign in and forms distribution** - Have employees sign in or check their names of an employee roster as they arrive. Hand employees a copy of the medical screening form and any other required forms and paperwork. Have greeters share information about what employees should expect as they go through the PMC. An employee may pick-up medications for his/her entire family as long as s/he has the medical screening forms for each family member.

4. **Employees complete medical screening form** - Prior to receiving medication at PMCs, each person receiving medication is required to complete a medical screening form. See Appendix F for an example medical screening form. If employees and their families have access to the internet and a printer, they may go to https://www.dispenseassist.net/ to fill out and print a medication voucher (which serves a similar function to the medical screening form) before arriving to the PMC.

5. **Review medical screening form** - Medical dispensers will review the form for completeness and determine the right medication for each patient based on their health history.

6. **Dispense appropriate medication and drug information sheets** - Based on the information provided on the medical screening form (Appendix F) and dispensing tracking form (Appendix G), the appropriate medication will be provided for each person. If permitted by your plan, additional doses can be dispensed for family members, provided medical screening forms are completed for each person. The dispenser will provide copies of drug information sheets and other education materials and instructions to take the first dose right away.

7. **Collect forms**—Dispensers should collect completed forms at their stations and use appropriate safeguards to assure the privacy of health information contained on them.

8. **Reporting** - Private Medication Center Supervisors may be asked to periodically provide status updates to your public health liaison, such as the amount of medication dispensed to your workforce.

9. **Demobilization** - Return the PMC facility to its original setup and purpose. Return completed medical screening forms, inventory forms, and unopened medication bottles to the public health liaison.

Attach a plan describing how your organization will dispense medications at your Private Medication Center.
Healthcare Considerations

- **Home health agencies and long term care facilities**
  - Consider collecting the antibiotic medical screening form from patients as part of your intake process.

- **Ambulatory care systems**
  - Consider surge strategies you would implement in scenarios where a high volume of patients are seeking information and access to emergency medications.

- **Pharmacies**
  - Consider signing the Washington Statewide Pharmacy – Local Health Jurisdiction Memorandum of Understanding as a framework for collaboration during medical countermeasure incidents. Contact your local health department for more information.

- **Specialty care**
  - Consider partnering with Public Health to access emergency medications for your staff and families to help preserve your continuity of operations.

---

Section 7: Develop Dispensing Procedures
Section 8: Messaging & Communications

It is important to have a robust communications plan to manage your Private Medication Center operations and to keep your employees well informed in the event of an emergency. Your organization most likely has key messages formulated as part of your Continuity of Operations plan. Although not an exhaustive list, consider adding some of the points below. They are categorized as messages to use before, during and after the event.

1. Before the event, establish an awareness campaign that informs your employees of your agency’s partnership with your local health department to operate a Private Medication Center. See Appendices A and B for information letter templates. Consider including the following points in your messages.

- A definition of a Private Medication Center and a description of scenarios in which it may be activated.
- Context regarding other impacts the community, your business, and your employees might be experiencing during an emergency that could affect dispensing operations.
- A description of who is covered by your dispensing plan.
- A description of how medication will be dispensed.
- Explain what information they should be prepared to provide and/or items they should bring to the Private Medication Center.
- Private Medication Center staff volunteer requirements, duties and training opportunities.
- Copies of medical screening forms or information about Dispense Assist (Appendix E), so employees can have forms completed prior to a public health emergency.
- Fill-out a medical screening form for each family member and then bring in the forms to pick-up for your family, while they are safely at home.

Describe how you will communicate with your employees before the event and the key messages you will share. List the responsible party for completing this action.

Check all communication methods that you might use to disseminate this information before the event:

- Telephone: ☐ External information line ☐ Call center/phone book
- Electronic: ☐ Website posting ☐ Mass email message/fax
- In Person: ☐ Meeting/presentation

Radio station(s):

Other: (please specify)
Section 8: Messaging & Communications

2. During the event, consider addressing the following key messages to the appropriate audience.
   - Private Medication Center management staff and staff volunteers -
     * Activation information which includes where and when to report to the Private Medication Center, and assigned duties.

   - Employees:
     * Where and when to go to receive their medications.
     * What information they should have in order to receive their medications.
     * Drug information sheets for the medications, including what they should do if they have a negative reaction to the medication. (This information will be provided by the health department).
     * How to stay informed during the emergency.

Describe how you will communicate with your employees during the event. List the responsible party for completing this action.

Check all communication methods that you might use to disseminate this information before the event:

- Telephone: ☐ External information line ☐ Call center/phone book
- Electronic: ☐ Website posting ☐ Mass email message/fax
- In Person: ☐ Meeting/presentation
- Radio station(s)
- Other: (please specify)

3. After the event, consider the following messages for your employees.
   - The importance of taking the entire medicine regimen.
   - The outcome of your organization’s dispensing effort.
   - How to address questions or concerns.
   - How to obtain follow up information.
Congratulations! You have now completed the developing of your Private Medication Center plan. The next step is training staff on its operations and exercise your plan. Exercising plans helps to identify any problems that can be rectified before an emergency occurs. Consider conducting such exercises jointly with your local health department and healthcare coalition. We recommend conducting annual internal training for your PMC staff, specifically addressing the following three key areas:

1. PMC activation
2. Medication receipt & dispensing procedures
3. PMC staff roles & responsibilities

You are now ready, to do a practice run-through or drill, with your staff. One half of your staff can practice working in their roles, while the other half will go through and get their medications. Once each group has a basic understanding of their roles allow them to switch. Appendix H contains just-in-time training, which can be used in exercise planning and during an actual event. Just-in-time training is a simplified, step-by-step process and covers staff responsibilities.

Just-in-Time Training Checklist:

- Staff Sign-in
- Distribute Job Action Sheets and any necessary paperwork
- Review the purpose of the PMC
- Review the PMC floor-plan and flow chart
- Review security plans and procedures
- Review the Job Action Sheets
- Discuss the Antibiotic Screening Form and how to properly fill it out
- Discuss dispensing the medication to appropriate person
- Address traffic flow questions

Once you have completed the run through and all employees has had a chance to be both a PMC staff member and a patient, be sure to answer any additional questions that may have come up. All plans should be revamped after drills or exercises to adjust any areas of concern.
Attachment A: Sample Letter to Employees

[Insert Date Here]

[Insert Organization Name and Appropriate Term - employees, members, faculty]:

Subject: Preparedness Plans for Medical Emergencies

Your health and safety are very important to [Insert Organization Name]. One of the many things that can threaten your health and safety is a public health emergency, such as an epidemic. You can be confident that we have a plan in place to limit the impact of public health emergencies on our [Insert appropriate term - employees, members, faculty] and their families. Our goal is to protect the health of all [Insert Organization Name and Appropriate Term - employees, members, faculty] employees during such an incident.

[Insert Organization Name] has been working with state and local authorities to create an emergency preparedness plan that will help protect your health and safety during a medical emergency. We encourage you to read the [Insert Organization Name] emergency preparedness plan. The plan is available online at: [Insert Website].

Another way that we are working to protect your health and safety is through our collaborative planning efforts with the local health department and healthcare coalition. These efforts include having [Insert Organization Name] serve as a Private Medication Center, during a medical emergency so that we can quickly dispense medication to keep you and your family from getting sick. Please read the attached fact sheet for additional details about Private Medication Centers.

[Insert Organization Name] will continue to plan to protect you and your family’s health and safety during public health emergencies. As we make enhancements to our emergency preparedness plans, we will update you by [Insert how contact individuals will be notified of updates to emergency preparedness plans].

If you have any questions about [Insert Organization Name] emergency preparedness plans or our plans to serve as a Private Medication Center, or if you are interested in volunteering to help with emergency preparedness planning, contact [Insert Contact Person] at [Insert Phone Number].

Regards,

[Insert Organization’s Official Name and Title]
[Insert Organization Name] has been preparing to protect you and your family in case of an emergency, such as a widespread disease outbreak, natural disaster or a bioterrorism attack. In order for us to do this, we must ensure we have the resources and staff needed to help in an emergency. We have worked closely with the local health department to develop a plan for setting up a Private Medication Center for your convenience and safety during a public health emergency.

A Private Medication Center will allow us to:

- Provide free medicine on-site for you and your family
- Give important information during and after an emergency
- Answer questions and address concerns about the event

[Specific information about business plans or pictures can be inserted here]

If you are interested in volunteering to help with the setup and operations of our on-site Private Medication Center, contact [Insert Contact Person] at [Insert Phone Number]. As we continue to develop our emergency plans, we will provide additional communications about our endeavors as well as more specifics about your role in keeping yourselves and your families safe. We are committed to preparedness because it is important to the [Insert Organization Name] family, and it is important to the entire community.
Position Assignment: Private Medication Center Supervisor

Mission: Coordinate the medication dispensing effort at your agency.

---

**Get Ready**
- Read this entire Job Action Sheet
- Receive notification from local public health authority that your Private Medication Center is activated (via email/phone/website)
- Receive medication for self and family first before dispensing to others; take first dose
- Obtain contact information for the public health liaison supporting your organization
- Review your Private Medication Center Dispensing Plan
- Inform employees that the Private Medication Center is activated and assign tasks
- Provide orientation and position training to those assisting the dispensing effort
- Prepare the site, obtain basic supplies and get vehicles dispatched (if required)
- Communicate to your employees that you will be dispensing medications
- Obtain and don appropriate Personal Protective Equipment (PPE)
- Follow Incident Command Structure (ICS)

**Get Medications**
- Send an authorized staff member to the Private Medication Center Delivery Site/Distribution Site to receive medications
- Lock medication in secure location away from extreme heat or cold; inventory initial supply
- Copy dispensing materials (medical screening forms, drug information sheets, others) or post to website for downloading by employees

**Dispense the Medications**
- Monitor dispensing of medications
- Dispense medication to Private Medication Center staff first
- Ensure appropriate screening and drug dispensing
- Ensure distribution of drug information sheets
- Request additional medications from the local public health authority if required
- Update your public health liaison with dispensing status and forecast estimates according to the prescribed schedule or as needed

**Follow up**
- Return all medical screening forms and inventory control forms to public health liaison
- Dispose of PPE appropriately
- Complete and submit timesheets
- Participate in after-action meetings, as directed
Position Assignment: Logistics Coordinator
You report to: Private Medication Center Supervisor

Staff Name: __________________________

Mission: Coordinate the medication dispensing effort at your agency.

Get Ready
☐ Read this entire Job Action Sheet
☐ Receive medication for self and family first before dispensing to others; take first dose
☐ Receive and participate in briefing with POD Division Supervisor
☐ Review instructions, become familiar with primary tasks and reporting structure
☐ Meet with, brief and conduct just in time training with Logistics Leads (direct reports)
☐ Obtain and don appropriate Personal Protective Equipment (PPE)
☐ Put on ID badge and introduce self to all staff in assigned area
☐ Follow Incident Command Structure (ICS)
☐ Assure that the receipt of the SNS is coordinated appropriately
☐ Ensure that all communications equipment has been set up, tested and is in working order.
☐ Ensure that all staff understand inventory management and request procedures.
☐ Obtain and don appropriate Personal Protective Equipment (PPE)
☐ Follow Incident Command Structure (ICS)

During Operations
☐ Maintain Incident Command Structure (ICS)
☐ Coordinate with the Operations Chief to ensure that all logistical needs for dispensing area met.
☐ Meet with ‘direct reports’ regularly to coordinate needs and conduct a status check.
☐ Report critical issues or necessary changes to POD Division Supervisor
☐ Assure the privacy, confidentiality and security of all protected health information
☐ Maintain Universal Precautions
☐ Interface with the Security Lead (Police representative) to ensure that all security issues are being addressed.
☐ Arrange for procurement of additional equipment/supplies as needed and as authorized by the PMC Division Supervisor.
☐ Keep dispensing stations stocked with supplies

Follow up
☐ Breakdown and put away station materials
☐ Participate in debrief if indicated
☐ Report any changes to protocol
☐ Dispose of PPE appropriately
☐ Complete and submit timesheets
Participate in after-action meetings, as directed

IF YOU ENCOUNTER A PROBLEM WHILE DISPENSING, CONTACT YOUR PRIVATE MEDICATION CENTER SUPERVISOR IMMEDIATELY

Attachment C: Sample Job Action Sheets
Position Assignment: Operations Coordinator

You report to: Private Medication Center Supervisor

Staff Name: ________________________

Mission: ________________________

Get Ready
- Read this entire Job Action Sheet
- Receive medication for self and family first before dispensing to others; take first dose
- Receive briefing from PMC Supervisor
- Review instructions, become familiar with primary tasks and reporting structure
- Meet, brief and provide on the job training for direct reports
- Obtain and don appropriate Personal Protective Equipment (PPE)
- Put on ID badge and introduce self to all staff in assigned area
- Follow Incident Command Structure (ICS)
- In coordination with Logistics Chief: assure efficient set up of clinic and establish efficient clinic flow
- Assure adequate staffing of designated functions.
- Ensure that leads inform staff on inventory request procedures

During Operations
- Maintain constant communication with PMC Supervisor
- Maintain constant communication with Logistics Coordinator
- Meet with ‘direct reports’ regularly to coordinate needs and conduct a status check.
- Assure appropriate implementation of Practice Procedures and Guidelines
- Maintain quality of care standards
- In coordination with Logistics Chief maintain efficient clinic flow
- In coordination with Logistics Chief identify and request additional staff if needed
- Assure appropriate use of universal precautions
- Assure appropriate use of PPE
- Problem solve operational issues
- Report critical issues or necessary changes to Station Lead
- Assure the privacy, confidentiality and security of all protected health information
- Maintain the use of Incident Command Structure (ICS)

Follow up
- Breakdown and put away station materials
- Participate in debrief if indicated
- Report any changes to protocol
- Plan for the possibility of extended deployment
- Dispose of PPE appropriately
- Complete and submit timesheets

IF YOU ENCOUNTER A PROBLEM WHILE DISPENSING, CONTACT YOUR
Position Assignment: Security Coordinator

You report to: Private Medication Center Supervisor

Staff name: ____________________________________

Mission: Manage site safety

Get Ready
☐ Read this entire Job Action Sheet
☐ Receive assignment from Private Medication Center Supervisor
☐ Receive orientation and position training from Private Medication Center Supervisor
☐ Read the current Operational Objectives, Incident Action Plan, and Situation Report
☐ Receive medication for self and family first before dispensing to others; take first dose
☐ Obtain and don appropriate Personal Protective Equipment (PPE)
☐ Follow Incident Command Structure (ICS)

During Operation
☐ Act as liaison to Local, County, State, Tribal & Federal Law Enforcement agencies and implement the security plan as agreed on by the PMC operating organization and designated law enforcement agency
☐ Provide protection for the dispensing site staff and citizens.
☐ Secure the facility
☐ Ensure that traffic flow to the PMC is being addressed adequately by “Event Staff”
☐ Respond to, or designated security personnel to respond to security issues

Follow Up
☐ Breakdown and put away station materials
☐ Brief the incoming Security Lead
☐ Develop items for After Action Discussion
☐ Dispose of PPE appropriately
☐ Complete and submit timesheets
☐ Participate in after-action meetings, as directed

IF YOU ENCOUNTER A PROBLEM WHILE DISPENSING, CONTACT YOUR PRIVATE MEDICATION CENTER SUPERVISOR IMMEDIATELY
Position Assignment: Communications Coordinator

You report to: Private Medication Center Supervisor

Staff name: ____________________________________

Mission: Manage communication to and from the Private Medication Center

Get Ready
☐ Read this entire Job Action Sheet
☐ Receive assignment from Private Medication Center Supervisor
☐ Receive orientation and position training from Private Medication Center Supervisor
☐ Read the current Operational Objectives, Incident Action Plan, and Situation Report
☐ Receive medication for self and family first before dispensing to others; take first dose
☐ Obtain and don appropriate Personal Protective Equipment (PPE)
☐ Follow Incident Command Structure (ICS)

During Operation
☐ Ensure that all technical hardware being utilized at the POD has been set up, tested and is operational.
☐ Ensure that staff have required and designated communication devices.
☐ Ensure that staff has been trained to use the designated devices necessary to fulfill their roles.
☐ Ensure staff has been trained in communications protocol related to the device they are required to use.
☐ Problem-solve communication issues
☐ Bring unresolved issues to the attention of the Logistics Chief

Follow Up
☐ Breakdown and put away station materials
☐ Brief the incoming Communications Lead
☐ Participate in after-action meetings, as directed
☐ Dispose of PPE appropriately
   Complete and submit timesheets

IF YOU ENCOUNTER A PROBLEM WHILE DISPENSING, CONTACT YOUR PRIVATE MEDICATION CENTER SUPERVISOR IMMEDIATELY
JOB ACTION SHEET – GREETER

Position Assignment: Greeter

You report to: Private Medication Center Supervisor

Staff name: ____________________________________

Mission: To answer questions and educate clients about what to expect at the medication center.

Get Ready
- Read this entire Job Action Sheet
- Receive assignment, orientation and position training from Private Medication Center Supervisor
- Familiarize self with Private Medication Center layout, especially noting restrooms, emergency exits and PMC flow
- Make copies of medical screening forms and educational material
- Set up station with medical screening forms, clipboards, pens and educational material (Fact Sheets)
- Receive medication for self and family first before dispensing to others; take first dose
- Obtain and don appropriate Personal Protective Equipment (PPE)
- Follow Incident Command Structure (ICS)

During Operations
- Set up station with appropriate materials
- Greet clients as they enter and provide necessary forms – in addition to medical screening forms, consider distributing the patient education and information forms also.
- Answer client questions within scope of training and qualifications
- Direct clients to fill out forms then move to screening area
- Maintain adequate supply levels.
- Provide routine reports to Private Medication Center Supervisor
- Report disruptive client behavior to team leader
- Performs other duties as assigned by Private Medication Center Supervisor

Follow Up
- Brief replacement as necessary
- Return all materials to Private Medication Center Supervisor
- Breakdown and put away station materials
- Participate in after-action meetings, as directed
- Sign-out after approval from Private Medication Center Supervisor
- Dispose of PPE appropriately
- Complete and submit timesheets

IF YOU ENCOUNTER A PROBLEM, CONTACT YOUR PRIVATE MEDICATION CENTER SUPERVISOR IMMEDIATELY
# JOB ACTION SHEET – MEDICAL DISPENSER

<table>
<thead>
<tr>
<th>Position Assignment:</th>
<th>Medical Dispenser</th>
<th>Qualifications: Ability to dispense prescription medications in the State of Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>You report to:</td>
<td>Private Medication Center Supervisor</td>
<td></td>
</tr>
<tr>
<td>Staff name:</td>
<td>____________________________</td>
<td></td>
</tr>
<tr>
<td>Mission:</td>
<td>Dispense appropriate medication</td>
<td></td>
</tr>
</tbody>
</table>

## Get Ready
- [ ] Read this entire Job Action Sheet
- [ ] Receive assignment from **Private Medication Center Supervisor**
- [ ] Receive orientation and position training from **Private Medication Center Supervisor**
- [ ] Familiarize self with screening and dispensing process (including algorithms)
- [ ] Set up station, or prepare supplies needed if dispensing in the field
- [ ] Receive medication for self and family first before dispensing to others; take first dose
- [ ] Obtain and don appropriate Personal Protective Equipment (PPE)
- [ ] Follow Incident Command Structure (ICS)

## Dispense the Medications
- [ ] Assure that each client completes an medical screening/screening form
- [ ] Review client medical screening form for completeness
- [ ] Weigh children as needed and note weight on medical screening form (delete if not required)
- [ ] Dispense appropriate medications based on patient’s health history and medication algorithm
- [ ] Response to clients with medical questions
- [ ] Remove lot # labels from pill bottles or label sheet. Put one on clinic medical screening form and one label on drug information sheet
- [ ] Fill out information on prescription label and adhere to pill bottle or to drug information sheet.
- [ ] Record medication dispensed on medical screening form, initial medical screening form and retain form
- [ ] Remind client to complete the entire dosing regimen
- [ ] Provide dispensing status updates to your **Private Medication Center Supervisor** as required

## Follow Up
- [ ] Return all materials to **Private Medication Center Supervisor**, including medical screening forms and any unused medication
- [ ] Dispose of PPE appropriately
- [ ] Breakdown and put away station materials
- [ ] Sign-out after approval from Private Medication Center Supervisor

Complete and submit timesheets
- Participate in after-action meetings, as directed

---

**IF YOU ENCOUNTER A PROBLEM WHILE DISPENSING, CONTACT YOUR PRIVATE MEDICATION CENTER SUPERVISOR IMMEDIATELY**
<table>
<thead>
<tr>
<th>Facility Information</th>
<th>Suggested Equipment and Supply List</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate Parking</td>
<td>Clipboards</td>
</tr>
<tr>
<td>Adequate HVAC capacity</td>
<td>Janitorial supplies (i.e. toilet paper, paper towels, hand soap, etc)</td>
</tr>
<tr>
<td>ADA Accessible restrooms</td>
<td>Extension cords</td>
</tr>
<tr>
<td>Electricity</td>
<td>Wastebaskets and trash bags</td>
</tr>
<tr>
<td></td>
<td>File folders and file boxes</td>
</tr>
<tr>
<td></td>
<td>Tactical Communications</td>
</tr>
<tr>
<td></td>
<td>Pens (preferably blue or black ink)</td>
</tr>
<tr>
<td></td>
<td>Staplers</td>
</tr>
<tr>
<td></td>
<td>Copier</td>
</tr>
</tbody>
</table>
What is Dispense Assist?
Per a directive from the Centers for Disease Control and Prevention large metropolitan regions have been tasked with delivering medication to the public within 48 hours after notification of a biological emergency event. Dispense Assist supports public health agencies with accomplishing this mission by providing an online screening tool that allows users to generate vouchers for medication.

For more information about Dispense Assist including project history and past system updates, visit the History tab at the top of the page.

What’s New?
To facilitate an easier transition to Dispense Assist a comprehensive User’s Guide is available under the Downloads tab, along with Disease Planning Guides, Model Antibiotic Labels and a Paper Screening Form for Antibiotics.

A quick and easy method of collecting data from the QR codes has been developed that utilizes a simple word processor and Microsoft Excel, a downloadable walk-through is now available under the Downloads tab.

What’s Next?
Formation of a Dispense Assist Users Group has begun. This group will connect DA users and provide a forum for agencies and developers to share tips on usage and systems implementation while providing valuable feedback and enhancement ideas. Those interested in participating please contact the DA Project Lead under the Contacts tab to be added to the ListServ.

Development of the Client Records Database is currently underway. Work has begun on an initial version that will be tested Spring 2012 with a final product tentatively available for download by Summer 2012. Funding was provided by Kansas City regional partners.

https://www.dispenseassist.net/
Attachment E: Dispense Assist

https://www.dispenseassist.net/anthrax.html
Attachment F: Medical Screening Form

**Antibiotic Medical Screening Form**

I am picking up medications for myself and/or I am picking up medications for others in my household or people who are unable to pick up their own medications. I agree to provide medications and instructions to all of them.

Name of person picking up medicines: __________________________ Date: __________________________
Signature of person picking up medicines: __________________________ Zipcode of person picking up medications: __________________________

Provide information on yourself in the sections below. If you are picking up medication for others, then fill out additional forms.

<table>
<thead>
<tr>
<th>First Name: __________________________</th>
<th>Last Name: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth: __________</td>
<td>Age: __________</td>
</tr>
</tbody>
</table>

**Step 1**

- Have you ever had an allergic* reaction to doxycycline (Doxy) or any other tetracycline** medicine? [ ] Yes [ ] No
- Are you pregnant? [ ] Yes [ ] No
- Do you have difficulty swallowing pills? [ ] Yes [ ] No

If NO answer to ALL questions in Step 1 → Stop! Do not complete rest of form. Go to medication line and get Doxy.

If Yes to ANY question → Fill out Step 2.

**Step 2**

- Have you ever had an allergic* reaction to ciprofloxacin (Cipro) or other quinolone*** medicine? [ ] Yes [ ] No
- Do you have a history of epilepsy or seizures (fits)? [ ] Yes [ ] No
- Are you currently taking Tizanidine (Zanaflex)? [ ] Yes [ ] No
- Do you have a history of severe kidney disease (been on dialysis)? [ ] Yes [ ] No
- Do you have difficulty swallowing pills? [ ] Yes [ ] No

If NO answer to ALL questions in Step 2 → Go to medication line and get Cipro.

If Yes to ANY question in Step 2 → Go to consultation line.

---

*Allergic reaction*: when you have one or more of the following symptoms: skin rash, hives, or itching; wheezing; shortness of breath or trouble breathing; and/or swelling of the face, lips, or throat. If you have had one or more of these symptoms when you take this medication, check the "yes" box next to the medication.

**Tetracycline Drug List**: demeclocycline (Declomycin); doxycycline (Adoxa, Alodox, Atridox, Avidoxy, Doryx, Doxy, Monodox, Morgidox, Ocuadox, Oracea, Oraxyl, Periostat, Vibramycin); minocycline (Arestin, Dynacin, Minocin, Solodyn, Ximino)

**Quinolone Drug List**: ciprofloxacin (Cipro); gatifloxacin (Tequin); levofloxacin (Levaquin); moxifloxacin (Avelox); n adidas (Acuatum); nor floxacin (Noroxin); ofloxacin (Floxin)

**For Staff Use Only**

Attach Label

Dispenser (print name):

Check when the following handouts are provided:

- Pill crushing instructions
- Antibiotic information sheet
- Anthrax information sheet
- Letter to Medical Provider
- Prescription for

(Insert name of prescription)
**To be completed by organizations to track daily dispensing totals. Please email an updated copy of this log to healtheoc@kingcounty.gov every 12 hours.**
Private Medication Center Supervisor: All Staff Briefing Checklist

- Welcome and thank volunteers
- Introduce self
- Review org chart and introduce section chiefs
- Define chain of command and stress the importance of communicating with lead
- Reference handouts in staff packets
  - Job action sheet
  - Floorplan
  - Daily schedule
- Review daily schedule
  - Open/close times
  - Break/lunch times and procedures
  - Shift change briefing
  - Debrief (if scheduled)
- Overview of operations
  - Site layout and patient flow
  - Communication procedures when patient flow changes are needed
  - Life threatening emergency procedures
- Intercultural considerations
  - Neighborhood demographics
  - Language and other resources available on-site
  - Emphasize need for respectful communication
- Safety briefing (conducted by Safety Officer)
  - Safety first
  - Safety/health resources on-site, e.g. First aid station
  - On-site emergency protocol
- Media interaction protocol – refer to Communications Chief
Appendix H: Just in Time Training Checklist

**Section Chief (Operations, Logistics, Planning) Briefing Checklist**

- Welcome section staff
- Introduce self
- Review section org chart and introduce unit/team leads
- Review pre-shift procedures
  - Sign-in
  - Store belongings
  - Setup stations
  - Check out tactical communications equipment
- Break/lunch procedures for section
- Review post-shift procedures
  - Break down stations
  - Timekeeping procedures
  - Return tactical communications equipment
  - Turn in forms / documentation
  - Retrieve personal belongings
  - Debrief procedures
  - Sign out
- Tactical communications training and practice (e.g. two way radios)
- Detailed walk through of section work areas
  - Locations of supplies, other resources
  - Work flow
- Safety issues
Appendix H: Just in Time Training Checklist

**Unit/Group Lead Briefing Checklists**

- Unit / group member introductions
- Review chain of command and stress the importance of communicating with lead
- Overview of equipment, supplies, forms
- Instructions and demonstration for specific job tasks
- Safety reminders
Healthcare facilities may call the Public Health Duty Officer or Health and Medical Area Command (HMAC) to:

- **Report emergency events that significantly affect your operations**
  e.g., outages, services down or restored, patient evacuations

- **Make a resource request during an emergency response**
  First contact your vendor and exhaust normal supply chain channels. HMAC facilitates medical resource requests, and will coordinate with local emergency management for non-medical resource requests

### Contact Information

**Telephone:**
*also the Public Health Duty Officer Line*
(206) 296-4606  
* monitored 24/7 (not a public number)

**Email:**
healtheoc@kingcounty.gov  
* not monitored 24/7; only active during a response

**800 MHz:**
DPH Common Talk Group  
HAM 147.080 MHz Repeater

**Fax:**
(206) 296-1372  
* only monitored during a response

**Satellite Phone:**
(254) 219-2758  
* only used when other communication systems fail

**www.watrac.org:**
* for regional healthcare plans, regional status screen and online chat  
* not for resource requesting

Login and password required  
* to request access, contact your facility’s WATrac lead: __________________________ at  
________________________ or (______) - _______  
* backup contact: healtheoc@kingcounty.gov

---

*This project is endorsed by Public Health – Seattle & King County  
To learn more about the Network, visit [www.nwhrn.org](http://www.nwhrn.org)*
Need Resources During An Emergency?

Call Public Health If Normal Supply Chains Fail

**Step #1: Contact your vendor or utility provider**

If issue is not resolved proceed to step #2

**Step #2: Request Assistance**

*from Public Health Duty Officer/ Health and Medical Area Command (HMAC)*

(206) 296 – 4606

**Public Health will:**
- Prioritize resource requests
- Coordinate mutual aid with other healthcare organizations
- Check Public Health regional supplies
- Share Public Health regional vendor lists

**For medical resources:**
- If necessary, Public Health will make a medical resource request to WA State

**For non-medical resources,**

*Public Health will coordinate with local emergency management agencies to:*
- Leverage local emergency management contacts and vendor/utility lists
- Check regional caches
- If necessary, make a non-medical resource request to WA State through the local emergency management agency

*Resources identified for a healthcare facilities are the financial responsibility of that facility. HMAC and local emergency management agencies may identify available resources, but may not be able to procure those resources on behalf of your organization.*
Entrance

Entrada
Войти
Đi Vào
入口
Prohibited

- Photography
- Weapons
- Video or sound recording
- Pets (service animals allowed)
- Smoking
- Alcohol
Anthrax Symptoms

If you have recently developed the following symptoms, go to the hospital now:

- Fever
- Cough
- Headache
- Chills
- Weakness
- Difficulty Breathing
- Chest Discomfort
Medication Center

• Free medicine — large supply
• We are here to help
• Four simple steps
Four Simple Steps

1. Fill Out Form
2. Show Form
3. Pick Up Medicine
4. Turn In Form & Exit
Please Wait

Por favor espere
Просьба подождать
Xin Vui Lòng Chờ
請等候
Example Signage

Exit
Salida
уйти
Ди Рая
出口

Spanish, Russian, Vietnamese, and Chinese
No Entrance

No entrar
Không Được Vào
입장 금지
Hindi Pasukan

Spanish, Vietnamese, Korean, and Tagalog
No Exit

No es una salida
Нет выхода
Không Phải Lỗi Ra
無出口

Spanish, Russian, Vietnamese, and Chinese