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I. SITUATION

A. In the event of a natural or man-made epidemic, the SHSU will establish and operate a closed Point of Dispensing (POD) intended to serve the SHSU community (students, faculty, staff and their respective family members) only. The primary purpose of a closed POD is to get needed drugs to a population as quickly and efficiently as possible. A rule of thumb is one POD per 20,000+ individuals. Therefore, with SHSU population from 20,000 to 30,000 (employees, families) the SHSU closed POD is intended to only serve this specific population group and their dependents.

B. The call to activate the SHSU closed POD will come from the Walker Office of Emergency Management. Activation will occur in response to an impending or actual outbreak of a public health emergency caused by one or more of the following agents:

1. Pandemic influenza
2. Anthrax
3. Small pox
4. Plague
5. Tularemia

C. In an emergency, the principal concern is to immunize and/or treat the largest number of individuals in the shortest possible time. A network of public, private PODs throughout Walker County is intended to provide this capability, prevent illness, and save lives. There is no standard formula for the composition or operation of a POD. Each organization structures its POD, the location, logistics and operations according to unique environmental capabilities and constraints. In the case of SHSU, the environment and availability of resources lend themselves to successful POD establishment. However, the fact that the campus is open to the community and the SHSU closed POD is intended to serve a specific population makes both security and crowd control significant planning issues.

D. The following sections outline composition, location, set-up, logistics, activation, patient flow, and operation of the SHSU closed POD. It is intended as an overview requiring specific duties and procedures to be developed by the various teams responsible for each task. This plan is a work in progress. It will require updating and clarification based on revised capabilities and new information received from exercises and a variety of other sources.

II. ROLES & RESPONSIBILITIES
A. POD Manager

1. Responsible for the command and control activities.
2. Manages and controls the total operations of the facility.
3. Ensures the POD functions at the highest level of efficiency with the given staff and supplies.

Directly oversees the operations, logistics, planning, and administration by working closely with the section chiefs and coordinators for all shifts.

4. Communicates/coordinates with the campus Emergency Operations Center (EOC).

B. Public Information Officer (PIO)

1. Establishes and maintains a relationship with all stakeholders to provide information and receives information.
2. Coordinates media activities and information releases with the campus EOC and the local EOC PIO and Walker Office of Emergency Management.

C. Safety & Security Officers

1. Ensures the POD is free from health and safety hazards before, during, and after operations.
2. Collaborates with the section chief(s) regarding the resolution of any safety issues.
3. Determines primary and alternate locations for medication to be delivered, secures medications when delivered, secures POD exterior, secures POD interior, secures dedication storage area and attends to crowd control and people movement through the POD.

D. Staging Area Manager

1. Establishes a staging area in a parking lot in close proximity to the POD and coordinates shuttling of special needs populations and others as the need arises.
2. Coordinates with safety & security officers to ensure a logical, smooth flow of traffic, parking, and shuttling in a safe and secure manner.

E. Operations Section Chief

1. Responsible for all clinical areas of the POD.

2. Ensures the staff in the respective services fulfills the requirements of the standard operations guidelines (SOG) and is within their scope of practice and training. If staffing adjustments are needed, the plan or recommendations will be modified.

3. Responsible for the supervision of staff involving the efficiency, effectiveness, coordination, and operational aspects of the dispensing site.

4. Ensures staff has all equipment and supplies needed to carry out their function.

5. Ensures that proper documentation is maintained for all activities.

F. Logistics section Chief

1. Organize and direct operations associated with maintenance of the physical environment

2. Provides adequate levels of food, water, snacks, etc. for volunteers.

3. Ensures that drug information sheets are available.

G. Communications Unit Leader

1. Organizes and coordinates communications.

2. Acts as the custodian of all logged and documented communications.

3. Organizes and coordinates information technology communications.

4. Acts as the custodian of all informational technology logged and documented communications.

5. Ensures that systems are protected.
H. Planning Section Chief

1. Monitor the need for human resources to support the POD.

2. Collects documentation of expenditures relevant to the emergency incident and received all documentation (unit logs, forms, etc.) from POD management and staff.

I. Volunteer Coordinator Group Supervisor

1. Provides support to all sections needing volunteer support.

2. Make sure staff has all equipment and supplies needed to carry out their function.

J. Greeter/Floater Unit Leader

1. Assure that all persons entering the POD are welcomed and initially screened for obvious signs of illness and/or injury.

2. Ensuring all identification is checked prior to picking up medications.

III. LOCATION

A. The primary location for SHSH POD operations is the HKC and the Coliseum.
B. Alternate location includes the Lowman Student Center Ballroom.
C. Upon notification, the emergency planning group will determine the location based on several variables.

   1. Is the campus open?
   2. Are we in school?
   3. Are there athletic events scheduled?
   4. Do we anticipate sheltering needs or support operations?
   5. What are the planning estimates given the situation?
   6. Do we expect inclement weather?

IV. SET-UP. The SHSU closed POD will be divided into the following seven areas:

   A. Forms area. All individuals will be asked if the appropriate forms are completed prior to entering the building. Forms will be posted on the SHSU website to facilitate completion. Those with completed forms will proceed through the check points and then go to the Screening Area. Those without forms will receive a paper copy and be asked to proceed to the entry door.

   B. Entry door of the POD. Greeters will be stationed at the entry door to ensure that individuals have SHSU identification and that their forms are completed. A floater will be available to help individuals fill out paper work.

   C. Screening area. Individuals will hand in the form(s). Special needs of any individual will be identified at the screening area. Individuals will then be directed to the Dispensing Area.

   D. Dispensing area. Medications are distributed in this area.

   E. Medication storage areas. The storage area is used for dry medications; the Lowman Student Center kitchen for heat sensitive vaccines. Security will guard medications as an ongoing task (see Support Document 14, Drive-Thru Prophylaxis Logistical Support).

   F. Holding area. This area is intended for patients requiring transportation for various reasons.

V. ACTIVATION

   A. A call from the Walker Office of Emergency Management to SHSU Director of Emergency Management will initiate activation.

   B. The Director of Emergency Management will assemble the emergency planning group to develop the response and recommendations for the University President.
C. In addition to a call for activation, team members will receive reporting instructions during the initial call.

D. After team members report to the location, each team is responsible for setting up their respective areas.

E. The section chief(s) and unit leaders will coordinate with the appropriate site POC for set up equipment such as required tables, chairs and other supplies and equipment.

F. A kit will be deployed by the logistic section chief from its storage located at Walker County or forward location at SHSU.

G. The Kit will contain directional signs, office supplies, first aid equipment, forms, and other items as appropriate.

H. UPD will establish vehicular and pedestrian routes for POD operations.

I. The Texas Department of State Health Services will deliver the medications to the location of the closed POD.

J. The incident command post (ICP) will be staged on site. EOC will be at the PACE CR if operations are run from the HKC/Coliseum.

K. Dry medications are secured in a storage room, whereas medications needing refrigeration are secured in refrigerators.

L. The emergency planning group will develop and issue campus-wide KatSafe notification of medication availability as directed by the EOC/POD manager.

M. Before the public receives their medication, all volunteers and their family members will receive the medication.

N. Students can be asked to report to the site for medication distribution (alphabetically or by identification number).

O. Forms will be available on the SHSU website. Individuals will be instructed to download forms and complete them prior to arriving at the site in order to speed up the process.

P. All family members do not have to be present to receive medication. The SHSU student (18 or older), faculty or staff member will show their current SHSU identification and then they can pick up prophylactic medicines for themselves and family members. The individual receiving the medications must complete a patient Health Screening Consent form and list each person on the form for whom he/she receives medications.
Q. Administrative section chief will develop a shift schedule.

R. The site will operate in two 12-hour shifts, around the clock until the mission is complete. It is estimated that this may take three days.

S. A section chief briefing will occur daily, one hour prior to shift change. All section chiefs are required to attend.

T. Meetings will be held in the PACE CR or designated EOC.

VI. PATIENT FLOW

A. The Forms Area is located outside the building. Patient flow is intended to move continuously to avoid congestion.

B. If the weather does not support lines forming outside, then the lines will be formed inside at appropriate areas to support an orderly flow of traffic.

VII. LOGISTICS. The following equipment items will be pre-positioned and/or designated:

- 35 - 6 foot rectangle tables
- 100 - folding chairs
- Rope and directional signs
- Supply of required forms (POD kit)
- Office supplies (POD kit)
- Computers lines
- Radios
- 2 - bull horns
- 100 - N-95 respirators (POD kit)
- 10 - boxes of gloves of varying sizes (POD kit)
- First-aid supplies (Health Center)
- Signage (POD kit)
- Pallet jack for medication movement

VIII. OPERATIONS

A. The SHSU closed POD operates according to NIMS/ICS principles.

1. Manager is responsible for the overall operation section.

2. All operational decisions will follow chain of command.
3. SHSU president or designee is responsible for the entire operation.

B. Close coordination will occur through the Walker Office of Emergency Management, SHSU closed POD, and the SHSU EOC.

IX. ORIENTATION & TRAINING OF VOLUNTEERS

A. Pre-event preparation should include community-training opportunities for both professional and non-professional volunteers. SHSU will use appropriate media venues such as videos, community presentations, web-based instruction, and collaborative partnerships between organizations to provide the training.

B. Staff briefing and just-in-time training should occur by section chiefs or designee. Preplanning will make this process effective and efficient. Suggested training materials may include educational videos, job action guidelines, agent specific information (e.g., fact sheets), samples of accurately completed forms, written scripts when applicable, and an organizational chart outlining the chain of command and communication flow.

C. The staff should be clear about whom to report to regarding questions. The organizational chart should be clearly posted for staff to use as a reference tool.

D. Training (pre-event or on-site) by the emergency management staff, Environmental Health & Safety (EH&S) and/or section chief(s) must include the use of personal protective equipment and relevant infection control measures, SOG, information on the agent and prophylaxis measures/standing orders, standard reporting procedures, response to outside requests for information, and patient confidentiality.

E. Universal precautions should be routinely practiced by health care workers and volunteers.

F. Hand washing or waterless hand sanitizer use is paramount. Hazardous waste should be disposed of appropriately.

X. RECEIPT OF MEDICINE & SUPPLIES

A. The POD must have the ability to maintain appropriately controlled temperature settings for medications/pharmaceuticals. The United States Pharmacopoeia defines as “the usual and customary working environment of 20° C to 25° C (68-77° F) that allows for brief deviations between 15° C and 30° C (59-86° F) that are experienced in pharmacies, hospitals, and warehouses.”

B. When the site receives the medications and supplies from the state, the material must be formally accepted, and stored immediately by the logistic section chief.
C. The received pharmaceuticals and supplies must be inventoried by the recipient. Any discrepancies (excess/deficiency or wrong medications/supplies) between the order and delivery require the logistics section chief be notified in order to contact the Walker Office of Emergency Management or Texas Department of State Health Services area coordinator for reconciliation.

D. The delivery invoice is checked, signed off by a representative from Student Health and Counseling, Student Affairs, or Emergency Management. This is then forwarded to the planning section for delivery to Walker Office of Emergency Management.

E. POD delivery points should be designated and will not be clearly marked due to security issues. The medical distribution point of contact State Public Health, Strategic National Stockpile representative, or Walker Office of Emergency Management will have the address of the site delivery point(s).

XI. LABELING OF PRESCRIPTIONS

A. Under the assumption that the Governor of Texas will declare a disaster, the Texas Disaster Act, Gov. Code 418, Section 418.016 states that the governor can suspend the provision of any regulatory statute or rules of a state agency if strict compliance would hinder or delay necessary action.

B. This allows pharmacists to dispense medication without patient labels. Therefore, there will be no placement of patient labels on the bottles of medication. If labels are required, Walker Office of Emergency Management will provide the site with labels.

XII. PATIENT HEALTH HISTORY/RELEASE OF INFORMATION

A. Hard copies of the Patient Health Consent Form will be stored in the kit. Walker County will supply copies of the needed forms which will be delivered, if available, along with the medication.

B. SHSU closed POD will forward data to Walker Office of Emergency Management for aggregate databases in accordance with established guidelines.

XIII. PUBLIC INFORMATION & RISK COMMUNICATION

A. During a large-scale emergency, SHSU will develop a health communications plan in conjunction with community officials and Walker Office of Emergency Management designed to inform and reassure the students and staff.

B. Prepared messages and information materials will quickly be modified with incident specific facts and data.
C. SHSU’s health communications plan will include the following aspects:

- Public service announcements
- Informational materials
- Forms scripts
- Videos, if available, that the dispensing site will use to provide medications
- Parking and directions to support POD operations.

D. Methods for reproducing and disseminating informational materials during the emergency.

E. Specific communication channels, partnerships, and staffing pools that support all of the health communications activities.

F. Health communications information

1. Posters and other appropriate media will have the agent and the threat to the public health.
2. If it is contagious?
3. Who should be concerned about exposure?
4. Who should seek prophylaxis at dispensing sites and who should seek treatment at treatment centers?

G. Informational media should contain directions to and information about dispensing site locations will be disseminated by Marketing and Communications department.

1. When will operation start and what hours will the site be open?
2. Where is the nearest POD?
3. What is the best street access?
4. Where should the public park?
5. What is the best way to get to the site (walk, public transportation, drive)?
6. What is the dispensing process within the POD?
7. What types of identification are needed?
8. What information must be brought to pick up medications for other family members?

H. Information about the medication for the campus population will be received at the site:

1. Reasons for using specific drugs or changing drug regimens
2. Importance of taking all of the medication
3. Danger of over medicating
4. 24-hour information phone number for medication questions
5. Medications are not intended for pets
XIV. INFECTION CONTROL

A. The SHSU campus will use infection control measures to prevent transmission to health care staff and close household contacts.

B. If a client presents with symptoms, then they will be sent to an off-campus clinic or hospital. They will not be allowed to enter the site.

C. The following steps should be taken to ensure the safety of other individuals at the closed POD:
   
   1. Separate from other clientele at entrance site or triage area.
   2. Clean or remove items handled by the sick client if appropriate.
   3. Notify SHSU EOC and staging area manager of needed transport.