Welcome to Working in a POD

This course is intended for anyone who might be asked to work in a public health POD. This might include members of the Medical Reserve Corps (MRC) or Community Emergency Response Teams (CERT) and other volunteers as well as public health staff members. The course will provide you with an understanding of what a POD is, how it operates, and what functional roles you may be assigned as a POD worker. (In this course we will use "POD" and "mass dispensing" interchangeably.)

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Learning Objectives

After completing this module, you will be able to describe:

- The purpose of a POD
- POD models
- The general process flow of a public health POD
- How POD operations function within the National Incident Management System (NIMS) structure and Incident Command
- System (ICS) chain of command
- How public health POD operations will function in collaboration with first responders and other community-based agencies utilizing the ICS structure
- How public health POD operations will be activated
- Emergency response functional roles within a typical public health POD operation

Scenario

In January public health workers in Albania began seeing cases of a new infectious disease that soon came to be called "blue spot fever."* At first the disease seemed to be limited to a few isolated cases in the capital of Tirana. However, as more cases were identified, it became clear that the disease was spreading to other cities and towns.

Over the next month, neighboring Greece and Macedonia reported numerous cases. After spreading west across Europe, the disease first appeared in several regions of the western United States in May. Scientists with the World Health Organization determined that blue spot fever is a potentially fatal illness that spreads easily fromperson to person. However, certain medications called "antispotics"** seemed to provide effective protection if given within a few days of contact with an infected person.

When a disease like blue spot fever rapidly spreads to a large number of people in a specific geographic region or population in excess of what is normally expected, it is called an epidemic. What we have here is a pandemic, an outbreak of a disease that spreads to many countries throughout the world.

The Centers for Disease Control and Prevention (CDC) has recommended that everyone living within a 50-mile radius of the identified cases receive the antispotics. (For the purpose of this example, we will assume that there is a sufficient quantity of the medication for everyone.)

As a volunteer or public health staff member, you have been told to report to your local community health center to help distribute the antispotics. This course will tell you what to expect and how to prepare for your role in this mass dispensing of medication.

_____
*A fictitious communicable disease
**A fictitious medication given in pill form

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1. What is a POD?

What is a POD?

A Point of Dispensing (POD) is an operation where prophylactic medications or vaccinations can be quickly distributed to a large group of people in the event of a public health emergency.

Local public health agencies have developed plans for operating a POD based on guidelines from the Centers for Disease Control and Prevention (CDC) and state government. The details of the plans will vary depending on the nature of the public health emergency.

Public health staff members plus volunteers from the Medical Reserve Corps (MRC), Community Emergency Response Teams (CERTs), and other sources are essential to help fulfill public health POD surge capacity needs.

Blue Spot Fever
In order to give medications to everyone designated by the CDC, local health departments will have to mobilize large numbers of volunteers. As a public health employee or volunteer, you will very likely be asked to help meet this challenge.

What kind of public health emergencies might require a POD?

PODs may be required in several kinds of public health emergencies where a concerted response is needed to prevent or lessen the negative impact of the emergency.

These public health emergencies may be the result of:

- **The spread of an infectious disease**
  - To protect the public against a disease like avian flu, the local health department may provide vaccinations.

- **A natural disaster**
  - After the flooding caused by Hurricane Katrina along the Gulf Coast, a number of people received emergency vaccinations against diseases like Hepatitis A and Hepatitis B at mass dispensing sites

- **An act of terrorism**
  - Terrorism can take the form of biological, chemical or radiological agents. For instance, some people who worked in places where the anthrax-contaminated envelopes were received in fall 2001 received the antibiotic <u>Ciprofloxacin</u> to try and prevent their developing anthrax.

- **Accidents**

POD Locations

Ask yourself

- What are some places in your community where PODs could be located?

POD Locations

More examples

- Fairgrounds
- Local health department, arenas, schools
- Near costal area
- Churches
- Schools/Universities, Firehouses
- High School; Church; Court house
- Schools and universities; community centers; public arenas and businesses

Who would staff a POD?

The POD may be staffed in a number of ways. However, it will generally include public health personnel, first responders, MRCs, CERTs, and other volunteer groups.

As a POD worker, you will probably be working with people from many disciplines and agencies.

What are the basic components of a POD?

Most PODs will have these components:

- Registration
- Triage (sometimes called Screening)
- Medical Evaluation
- Dispensing
- Education
- Command Post
- Pharmacy

The layout and order of flow will vary from site to site. Also the flow may vary depending on the situation. For example, in some cases there may be an education phase both before and after individuals get their medication or vaccination. In other PODs, individuals may be given educational materials as they stand in line.

As an individual moves from station to station, staff members make notations on the forms the individual received at registration.

As a POD worker, you may have an emergency response role in any of these components.

POD Components

Registration

Registration may be in electronic or paper form and will include information such as name, address, date of birth, and medical history. Localities may have the capacity to scan the driver's license or other identification into the electronic system or may ask participants to pre-register online.

Triage

Staff members review the patient-completed forms to identify people who require further medical and/or mental health evaluation. Generally if they check 'yes' for any of the medical conditions listed on the medical history form, they are sent to the medical evaluation. People who do not need further evaluation can proceed directly with dispensing.

Medical evaluation

Appropriately credentialed providers (physician, nurse practitioner, physician assistant) determine whether the person should receive the medication or vaccination, should receive an alternative medication or vaccination, or should not receive any medication or vaccination.

POD Components

Dispensing

Staff members give the medications or vaccinations. This process may be fairly simple or more complicated depending on the nature of the POD.

Education

Staff members give individuals information about how to take medications, what side effects they might expect, what follow-up they need to do, etc. This information may be in writing, verbally, or both. In some PODs, education will be done before registration as well as after dispensing.

Command Post

This is the location of all oversight functions including the Incident Commander and Safety Officer.

Pharmacy

Additional supplies of medicine or vaccination are stored and secured in the pharmacy. If required, medications or vaccinations are kept cold here.

How does a POD work?

Individuals (citizens, residents, visitors, etc.) either come to a specific location or the POD goes to where the individuals are located. When individuals come to a central location, this is called a "pull POD." If the vaccinations or medications are taken to the individuals' location, this is called a "push POD."

A pull POD would be effective where most people have cars or there is good public transportation.

A push POD might be necessary for groups of people who don't have transportation. For instance, the DOH might plan a POD at a senior citizen's center or a nursing home. A push POD may be more efficient where there is a large concentration of people such as a large urban housing project.
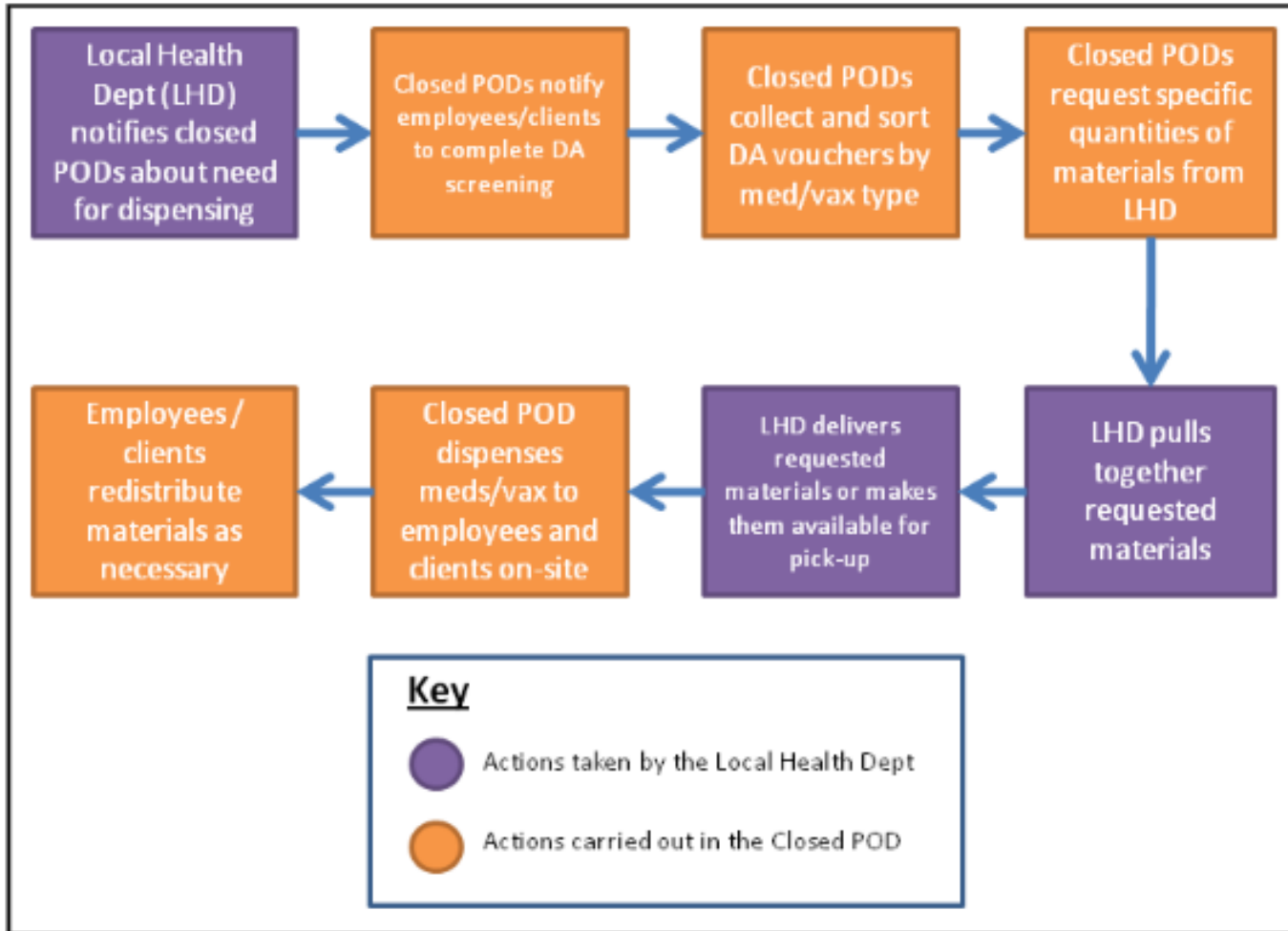
San Mateo County Model

San Mateo County operates on Closed Site/Push POD Model:

Closed PODs encourage an agency or organization to dispense medications to their own staff and stakeholders. Closed PODs can support emergency planning for at-risk populations by providing an alternate venue for vulnerable community members to receive medication. Closed PODs are operated in partnership with the local health department.

Dispensing materiel can be pulled from designated caches or be requested from the local health department through activation of the Strategic National Stockpile. Examples of Closed POD partners include: school districts, large businesses, detention facilities, volunteer organizations and mental health agencies.

San Mateo County Model

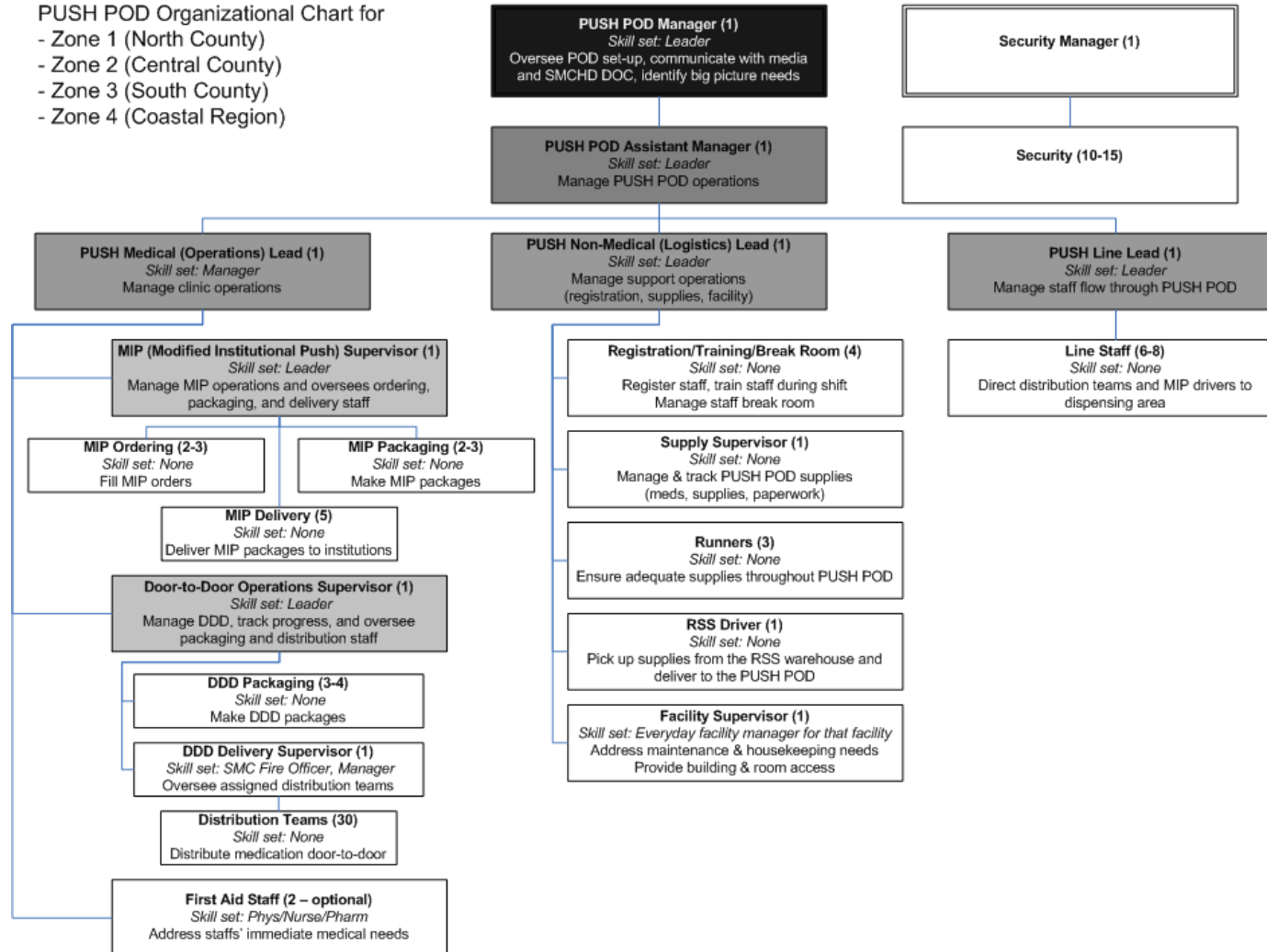Closed Site POD Model workflow example using Dispense Assist (DA):

San Mateo County Model

Closed Site POD Organizational Chart

Other POD Models

Medical vs. Non-Medical Model

The Medical Model – Is similar to a flu clinic, where patients are screened and evaluated by health professionals. Medical personnel can assess the patient for contraindications and other special considerations before dispensing any countermeasures. The objective is to assure that individuals receive the appropriate countermeasure and to decrease the potential for adverse events.

A non-medical model provides countermeasures using a population approach, where no individual examinations or assessments are conducted. In the event of a public health emergency, standards of care may be altered. In the United States, public health agencies are expected to have the capability to distribute medical countermeasures to the entire population within 48 hours. The non-medical model may be implemented to allow localities to dispense countermeasures quickly with fewer staff and medical personnel.

Source: Dispensing Medical Countermeasures for Public Health Emergencies; Workshop Summary. Institute of Medicine. National Academies Press (2008).

Head of Household Model

In this model, one individual from each household will receive the medications for the entire household.
- May be push or pull model
- Reduces number to actually attend the POD
- Accountability - Head of Household must be aware of medical history and other pertinent information to ensure that the correct countermeasure is dispensed. Can't ensure that household members receive the medication.

Other POD Models

Drive-through POD

This POD models is a method of dispensing countermeasures that relies on the public's access to personal transportation such as a car or motorcycle. This method has been used to quickly dispense medications in some high population density locations.

- Limits transmission of infectious diseases
- Easily serves populations that cannot stand or walk for long periods of time (such as chidren or the elderly)
- May increase throughput numbers

Closed POD (Business Model)

This model pushes out the countermeasures to a hospital, nursing home, school or business and the organization takes responsibility for dispensing the medication to its employees, patients and students. The Closed POD model can be either medical or non-medical depending on the staffing at each specific organization. Aspects of the Closed POD model include:

- Self-dispensed
- Reduces population to serve at Open PODs
- Best interests of the organization
- Partnerships and Memorandums of Understanding (MOU)
- Regular training and exercising is provided/required

U.S Postal Service Delivery Model (or other delivery system including school buses, meals on wheels programs)

Under this program postal carriers and other volunteers are trained to provide countermeasures in the event of a public health emergency. The objective is to push out medications to residents by direct delivery within 12 hours of activation. Designated employees and volunteers are provided with personal protective equipment and counseling and are required to participate in regular drills.

Who would get the prophylaxis or vaccination?

Determine which category each group belongs in: highest, medium, or lowest priority

- Medical workers involved in direct patient contact
- Healthy persons 2 to 64 years old
- Vaccinators
- Healthy persons over 65
- Public safety workers (police, fire, EMS)
- Healthy infants 6 to 23 months old

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Who would get the prophylaxis or vaccination?

This is an example of how the groups might be prioritized:

Highest

- Medical workers involved in direct patient contact
- Vaccinators
- Public safety workers (police, fire, EMS)

Medium

- Healthy persons over 65
- Healthy infants 6 to 23 months old

Lowest

- Healthy persons 2 to 64

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When will POD workers be vaccinated?

In some POD plans, depending on the situation, the medicine or vaccinations may be administered in two phases.

Phase 1 - First responders will receive prophylactic medications or vaccinations. If workers need prophylaxis or vaccinations to work safely in the POD, they will also be in this first phase. Some plans call for including families of first responders and POD workers in this first group for some emergencies.

Phase 2 - The general public will be vaccinated or receive medication.

2. How is a POD managed?

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How is a POD managed?

National Incident Management System

A POD will be managed within the National Incident Management System (NIMS) framework utilizing the Incident Command System (ICS).

POD workers will each be assigned a specific emergency response functional role. This will specify to whom they report and who, if anyone, reports to them.

The National Incident Management System is a core set of doctrines, principles, terminology, and organizational processes. These were developed by the Department of Homeland Security to be used in planning and response to any emergency event on the local, regional, state and national levels. This consistent nationwide approach allows "Federal, State and local governments to work together effectively and efficiently to prepare for, respond to, and recover from domestic incidents of any size, cause or complexity."

Blue Spot Fever
Government agencies at all levels will have to be involved in a pandemic. A well-integrated interagency response system is essential to successfully conduct a POD that will protect the public's health.

What is NIMS?

NIMS covers:

- the incident command system, or ICS (more on this later)
- multi-agency coordination systems
- unified command
- training
- identification and management of resources (including systems for classifying types of resources)
- qualifications and certification
- the collection, tracking, and reporting of incident information
- incident resources

NIMS consists of these key components:

Command and management — systems used to facilitate domestic incident command and management

Preparedness — specific measures and capabilities that jurisdictions and agencies develop and incorporate into an overall system to enhance operational preparedness for incident management. Preparedness involves a continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action.

Resource management — coordinating and overseeing the application of tools, processes and systems that provide incident managers with timely and appropriate resources during an incident. This enables jurisdictions to effectively share and integrate critical resources during a disaster.

Communications and information management — effective communications, information management, and information and intelligence sharing to support all aspects of domestic incident management.

Ongoing Management and Maintenance — FEMA works with stakeholders to support on-going maintenance and continuous refinement of NIMS concepts and principles.

# Within NIMS, what steps are addressed in a public health emergency?

1. **Preparedness:** planning, infrastructure building, surveillance for emerging threats, training
   - In the case of the ***Blue Spot Fever*** outbreak, preparation would include surveillance to identify cases of the disease in the community

2. **Mitigation:** preventing or lessening the effect of threats before they develop; for example, building codes in earthquake-prone areas so buildings are less likely to collapse and kill people
   - In the case of the ***Blue Spot Fever*** outbreak, people who have maintained good general health will be less likely to have serious complications if they do get the disease.

3. **Response:** activities to characterize an unfolding public health emergency (e.g., epidemiology) and to intervene to prevent or lessen the negative impact of the emergency, such as provision of antibiotic prophylaxis or vaccination to prevent development of disease in exposed persons
   - In the case of the ***Blue Spot Fever*** outbreak, response would probably include operating the PODs.

4. **Recovery:** actions to put lives and infrastructure back together to the extent possible, and studying lessons learned
   - In the case of the ***Blue Spot Fever*** outbreak, recovery would include having the sponsoring agencies get reimbursed for the resources they used in the POD. This requires careful recordkeeping.

What is the Incident Command System (ICS)?

ICS is a management model for **command**, **control** and **coordination** of an organization's emergency response activities. It employs a management structure with:
- Defined responsibilities
- Clear reporting channels
- Common terms

A generic ICS organization tree looks like this:
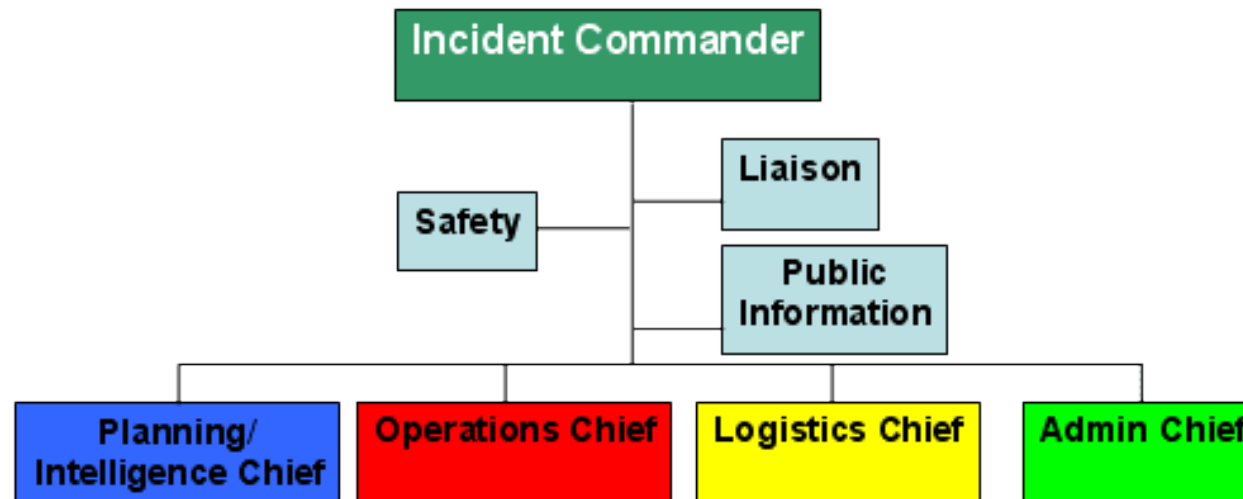
What are the functions of the various sections in a POD?

Each section has a particular function in a POD as summarized below.

Command staff
- Incident commander (IC)—overall in charge
- Safety officer—assures safety of POD staff
- Liaison officer—interfaces with Emergency Operations Center (EOC), Office of Emergency Management (OEM), Department of Health (DOH) and other agencies
- Communications officer—maintains ongoing communication with EOC

Planning Section
- Makes projections of number of persons to receive meds or vaccinations
- Evaluates operation for future improvement opportunities
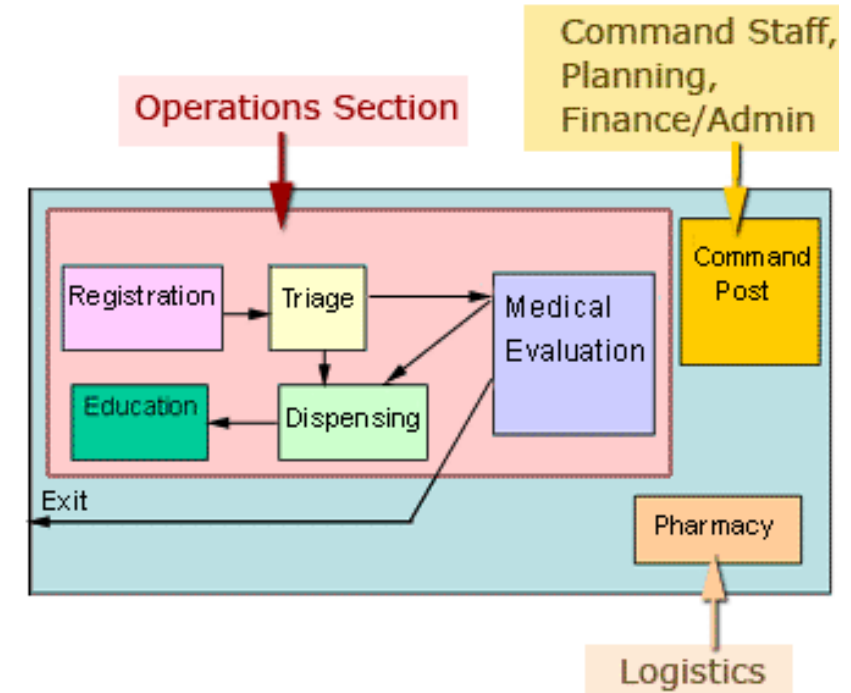
Logistics Section
- Procures the required supplies (meds or vaccine as well as tables, chairs, pads, pencils, forms, food, water)

Operations Section
- Processes the people and gives vaccinations or dispenses meds

Finance/Administration Section
- Manages documentation
- Keeps track of expenses

What is the role of POD workers?

Which of these roles would you expect to perform in a POD?

- Triage officer
- Screener
- Vaccinator
- Educator
- Flow Controller
- Runner
- Clerk

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What is the role of POD workers?

Which of these roles would you expect to perform in a POD?

- Triage officer
- Screener
- Vaccinator
- Educator
- Flow Controller
- Runner
- Clerk

You may actually be assigned to fill *any* of these roles. Wherever possible the Incident Commander will match the POD workers' emergency roles to their skills. For instance, a nurse might be a vaccinator or triage officer while a non-clinical volunteer might be a flow controller. In fact, in some cases you may be asked to fill more than one functional role.

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Following the chain of command is essential to ensuring a smooth emergency response

Did you know that…

During an influenza vaccination POD run by the Nassau County Department of Health in 2004, 7,600 senior citizens were vaccinated over the course of 2 days in one location. The average through-put time was 15 minutes from entrance to exit. More than 98% of the seniors who received vaccinations rated the experience as superior to excellent.

The New York City Department of Health and Mental Hygiene (DOHMH) operated 58 points of dispensing (PODs) over 5 weekends to provide influenza A (H1N1) vaccination to residents in 2009. Almost 50,000 New Yorkers were vaccinated in that event.*

_____
* Rinchiuso-Hasselmann A., et al. *Protecting the Public from H1N1 through Points of Dispensing*. Biosecur Bioterror. 2011 Mar;9(1):13-21.

Pod Triage Exercise

You are a screener for a POD to give flu shots. You have been asked to check each Patient Information form and send to Medical Evaluation any person who has checked "yes" or "not sure" for any of the health questions on the form. Otherwise, the person can go directly to Dispensing for a vaccination.

Review the following forms and decide which to which POD component you would send that individual

The two options are:

- Medical Evaluation

- Dispensing

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POD Triage Exercise – Patient 1

Please answer the following questions	Yes	No	Not Sure
Is this your first time getting the flu vaccine?	○	●	○
Have you ever received a pneumonia shot?	○	●	○
Do you have a chronic medical condition?	○	●	○
Are you currently receiving radiation, chemotherapy, or immunosuppressive therapy?	○	●	○
Do you have close contact with anyone with a weakened immune system?	○	●	○
Are you a healthcare worker?	○	●	○
Are you allergic to latex or rubber?	○	●	○
Are you allergic to eggs?	●	○	○
Have you ever had a serious reaction to a flu shot?	○	●	○
Have you ever had Guillian Barre Syndrome?	○	●	○
Are you sick with fever?	○	●	○
	○	○	○
	○	○	○

Draft

Patient Consent

I, _____ give consent for evaluation, diagnosis and/or treatment of
Print Name

or

○ myself

○ _____
Print Name

X _____
Sign name

○ Self
○ Parent / Guardian

X _____
Witness (sign name)

_____ / _____ / _____
Date

POD Triage Exercise – Patient 2

Please answer the following questions	Yes	No	Not Sure
Is this your first time getting the flu vaccine?	○	●	○
Have you ever received a pneumonia shot?	○	●	○
Do you have a chronic medical condition?	○	●	○
Are you currently receiving radiation, chemotherapy, or immunosuppressive therapy?	○	●	○
Do you have close contact with anyone with a weakened immune system?	○	●	○
Are you a healthcare worker?	○	●	○
Are you allergic to latex or rubber?	○	●	○
Are you allergic to eggs?	○	●	○
Have you ever had a serious reaction to a flu shot?	○	●	○
Have you ever had Guillian Barre Syndrome?	○	●	○
Are you sick with fever?	○	●	○
	○	○	○
	○	○	○

Draft

Patient Consent

I, _____ give consent for evaluation, diagnosis and/or treatment of   ○ myself
    Print Name

or ○ _____
                                                                                                                        Print Name

X _____   ○ Self   X _____   ___/___/___
      Sign name   ○ Parent / Guardian   Witness (sign name)   Date

For Staff Use Only

Disposition at Triage	Disposition at Medical Evaluation	
○ Referred for Treatment	○ Referred for Treatment	Place Medication Barcode
○ Referred for Medical Evaluation	○ Referred for Medical Care	
○ Treatment Declined	○ Treatment deferred due to Medical Contraindication	
○ Other	○ Other	

Draft

POD Triage Exercise – Patient 3

Please answer the following questions	Yes	No	Not Sure
Is this your first time getting the flu vaccine?	○	●	○
Have you ever received a pneumonia shot?	○	●	○
Do you have a chronic medical condition?	○	●	○
Are you currently receiving radiation, chemotherapy, or immunosuppressive therapy?	○	●	○
Do you have close contact with anyone with a weakened immune system?	○	●	○
Are you a healthcare worker?	○	●	○
Are you allergic to latex or rubber?	○	●	○
Are you allergic to eggs?	○	●	○
Have you ever had a serious reaction to a flu shot?	○	●	○
Have you ever had Guillian Barre Syndrome?	○	●	○
Are you sick with fever?	○	○	●
	○	○	○
	○	○	○

Draft

Patient Consent

I, _____ give consent for evaluation, diagnosis and/or treatment of ○ myself
Print Name

or ○ _____
Print Name

X _____   ○ Self
Sign name   ○ Parent / Guardian

X _____
Witness (sign name)

_____/_____/_____
Date

For Staff Use Only

Disposition at Triage
○ Referred for Treatment
○ Referred for Medical Evaluation
○ Treatment Declined
○ Other

Disposition at Medical Evaluation
○ Referred for Treatment
○ Referred for Medical Care
○ Treatment deferred due to Medical Contraindication
○ Other

Area Inoculated

Place Medication Barcode

Draft

POD Triage Exercise – Patient 4

Please answer the following questions

	Yes	No	Not Sure
Is this your first time getting the flu vaccine?	○	●	○
Have you ever received a pneumonia shot?	○	●	○
Do you have a chronic medical condition?	○	●	○
Are you currently receiving radiation, chemotherapy, or immunosuppressive therapy?	●	○	○
Do you have close contact with anyone with a weakened immune system?	○	●	○
Are you a healthcare worker?	○	●	○
Are you allergic to latex or rubber?	○	●	○
Are you allergic to eggs?	○	●	○
Have you ever had a serious reaction to a flu shot?	○	●	○
Have you ever had Guillian Barre Syndrome?	○	●	○
Are you sick with fever?	○	●	○
	○	○	○
	○	○	○

Draft

Patient Consent

I, _____ give consent for evaluation, diagnosis and/or treatment of ○ myself
Print Name

or ○ _____
Print Name

X _____   ○ Self
Sign name

○ Parent / Guardian

X _____ _____
Witness (sign name)   Date

For Staff Use Only

Disposition at Triage
- ○ Referred for Treatment
- ○ Referred for Medical Evaluation
- ○ Treatment Declined
- ○ Other

Disposition at Medical Evaluation
- ○ Referred for Treatment
- ○ Referred for Medical Care
- ○ Treatment deferred due to Medical Contraindication
- ○ Other

Place Medication Barcode Here

Draft

Last 4 Digits of Staff SSN

Area Inoculated
○ Left Arm   ○ Left Thigh   ○ Left Buttock

Pod Triage Exercise

Answers

- Patient 1, 3, and 4 all checked either "yes" or "not sure" to at least one health question on the Patient Information Form and should be sent to Medical Evaluation.

- Patient 2 checked "no" to all health questions and should be sent to Dispensing.

3. POD Roles and Responsibilities

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When and where will I respond?

You will be contacted by a designated person in your organization or local health department. Many organizations (government agencies, schools and businesses) have developed Health Alert Network systems that will provide mass notifications to employees during an emergency via phone, text or e-mail. You will be given specific information about where and when to report. You will also be told what ID to bring, but you should always bring a photo identification card.

When you arrive, you will report to the staff sign-in area where you will be given an assignment. You will also be given an orientation about what you are to do, to whom you are to report, and, if applicable, who reports to you. In addition, you will receive a Job Action Sheet and Just in Time training which will describe the duties associated with your role.

Blue Spot Fever
Local and state health agencies will develop POD plans for specific public health emergencies, often based on guidelines from the CDC and other federal agencies. For example, in the blue spot fever pandemic, there might be a two-phase approach to dispensing the antispotics. During the first phase first responders and their families plus POD workers might be vaccinated. This POD might take place at a site like the firehouse. The second phase where the general public would be given medications might be held in one or more PODs in large public facilities.

How long will I be working in the POD?

This will depend on the nature of the event and the number of people to be processed through the POD. PODs usually operate in shifts of 6-12 hours. However, you will be informed the length of time you can expect to be there.

Person being vaccinated
Getting most citizens through a POD is a rather quick process. Certain things can speed up or slow down the process for a given individual. For instance, if an individual pre-registers online or comes to the POD with a screening form already completed, the process may go more quickly. (Agencies may distribute the POD screening forms in advance of the POD operation.)

Blue Spot Fever
The CDC has recommended that everyone living within a 50-mile radius of the identified cases receive the antispotics within a 48-hour period. Therefore, you might expect to work several shifts over that period.

What should I bring with me?

There is limited space to store personal belongings at the POD. Therefore, you should bring as little as possible.

You will be told if you need to bring specific equipment (e.g., a stethoscope).

If you are part of a volunteer organization, your individual unit may also have specific items they ask you to bring. For instance, some units may have a "go pack" with things like basic personal protective equipment, resource material, material for taking notes, etc. that they are asked to always have with them.

How will I know what to do?

When you arrive at the initial POD site, you will report to the staff sign-in area. There you will be given an assignment and an orientation about what you have to do, to whom you will report, and who, if anyone, reports to you.

Your specific tasks will be listed on a Job Action Sheet (JAS) that gives:
- Job title
- Job mission
- To whom you report
- Immediate tasks to perform
- Ongoing tasks to perform

You will be given a demonstration of what you have to do. This is usually referred to as Just In Time Training. There will also be supervisors or unit leaders in place to assist you.

Example Job Action Sheet

Division of Public Health and Community Services

JOB ACTION SHEET

Position: Triage

Role: Responsible for sorting clients in groups and direct client to appropriate area of the clinic. Preferably a public health nurse, other clinician or physician with experience in clinical triage. Works closely with Clinical Manager (Operations Section Chief), Screeners and Medical Evaluators. Reporting to this role are Clinic/Dispensing Runners. Located in the clinic/dispensing area.

You report to: Triage Team Leader

Before your shift:
- Register at Staff Check-in
- Clearly display ID badge
- Familiarize self with location of all clinic areas
- Review your Job Action Sheet
- Attend clinic orientation
- Check in with your Supervisor
- Review job responsibilities with your Supervisor
- Receive vaccine/medication if not already treated

During your shift:
- Wear appropriate PPE, as needed
- Assess and sort ill persons, those not eligible and those eligible for vaccine/antibiotic treatment to minimize bottlenecking
- Consult with Medical Evaluators as needed

After your shift:
- Assist with teardown or cleanup of clinic
- Attend staff debriefing at shift change and/or at close of clinic
- Prepare clinic for next day operations, as needed
- Brief incoming Triage staff
- Sign out with Finance/Administration
- Return ID, PPE and any other supplies and documentation

Job Action Sheets - Vaccinator

Fill in the blanks below with what you think might be included on a JAS for a Vaccinator.

Position Assigned To: Firehouse #3 POD Report To: John Jackson (medical coordinator)

Mission: _____

Upon Activation:

- _____
- _____

Ongoing Operations :

- _____
- _____
- _____
- _____
- _____

Compare your answers to the example below.

VACCINATOR / VACCINATOR ASSISTANT   3/23/05

Mission: *Administration of vaccine following non-patient-specific standing orders.*

Upon Activation:
- Obtain briefing from Medication Coordinator and special instructions for this event.
- Determine if you will be in the Vaccinator or Assistant (if activated) role and plan for rotation of roles.

Ongoing Operations for Vaccine Administrator:
- Check client's forms for GREEN indicator to verify that the client is approved to receive the vaccine.
- Administer vaccine per established protocols provided by Medication Coordinator.
- Observe vaccine recipients for immediate reaction or complications and respond according to POD protocols.
- Attend briefings scheduled by Medication Coordinator to keep appraised of current conditions.

Ongoing Operations for Vaccinator Assistant (if activated):
- Activities **may** include ensuring that vaccination station maintains adequate supplies; instructing recipients on location of vaccination; assist vaccine recipients in preparing vaccination site (roll up sleeve, remove arm from shirt/blouse etc.); application of dressing to vaccination site.
- Complete, sign and date vaccine administration documentation on client form.
- Issue vaccination documentation and information to client per forms protocol.
- Direct client to Post Vaccination Education Station or exit according to protocol.

How are roles assigned?

Generally, your role will be matched to your skills and competencies. This will be within the context of what is most important for the operation. You may be assigned to do tasks at a lower lever than what you normally do. However, all roles are critical for the efficient operation of the POD.

There will be ongoing communication with you throughout the POD. You will get information when you check in. You may also be given additional information during the POD, or you may be assigned and re-assigned to different roles depending on what is needed at the time.

You will also be told when you may check out.

Will I be trained?

In addition to the Job Action Sheets, you may be given additional just-in-time training including a demonstration of any tasks you may not know how to do. Supervisors and unit leaders will be available to assist you.

For more information and sample Just In Time Trainings, please check out the link below:
- [Alameda County Public Health Department](#)

Will I be protected?

Definitely!

If you require a vaccination or prophylactic medication to safely work in a POD, you will be vaccinated or given the medication.

If you require personal protective equipment (PPE) to safely perform your work in a POD, you will be provided the PPE.

As part of the ICS, there is always a Safety Officer onsite who is responsible for assuring your safety.

Blue Spot Fever
Some plans may call for both you and your family to receive prophylactic medications before you work in a POD. "Family" can include whomever you define as family (e.g., your spouse and children, others who live with you or are dependent on you for care).

How can I be ready to serve as a POD worker?

To be an effective worker in a POD, you should:

- Have a *Personal Emergency Plan*

- Have a *Family Disaster Plan*

- Monitor and be aware of your own health and mental health needs

- Participate in drills and exercises

- Attend MRC, CERT or other relevant meetings

- Participate in training

- Be prepared to work under the ICS

- Be sure the volunteer coordinating agency or health department has your current contact information

What do I do when it's time to leave?

You will be told when your shift is complete or when your services are no longer needed.
- Brief incoming staff, as needed
- Attend staff debriefing at shift change and/or at close of clinic

When you leave the POD for any reason, it is very important that you check out at the staff desk.

Conclusion

A POD may be established by first responders and other public health professionals so that prophylactic medications or vaccinations can be quickly distributed to the local population during a public health emergency. A POD may be set up in a number of public facilities.

Generally, a POD consists of several components to:

- Greet the arriving public and perform preliminary triage (Griage)

- Acquire initial documentation (Registration)

- Identify those in need of further medical and/or mental health evaluation (Triage)

- Identify specific medication and vaccination requirements (Medical Evaluation)

- Administer the medications and vaccinations (Dispensing)

- Provide information regarding medications (Education)

- Store and secure medical supplies (Pharmacy)

- Oversee and coordinate POD functions (Command).

PODs are managed according to the doctrines, principles and organizational processes established by the National Incident Management System (NIMS). NIMS is used in planning and response to any emergency event at the local, regional, state and national levels. The Incident Command System (ICS) is a management model within NIMS for command, control and coordination of an organization's emergency response activities (including PODs).

As a public health staff member or volunteer, you may be called to duty during a local public health emergency. When you arrive at a POD, you may be assigned a specific functional role by the ICS Incident Commander. This role might be: clerk; educator; flow controller; forms collector; runner; screener; triage officer; or vaccinator. Any of these roles will be explained by a specific Job Action Sheet (JAS).

To be an effective POD worker, you should:

• Have a Family Disaster Plan and a Personal Emergency Plan

• Attend MRC, CERT or other relevant meetings

• Participate in emergency preparedness drills, exercises and other trainings

• Understand the ICS

• Make sure the volunteer coordinating agency or health department has your current contact information.

Ready to test your knowledge?

At this point you should be able to describe:
- The purpose of a POD
- The general process flow of a public health POD
- How POD operations function within the National Incident Management System (NIMS) structure and Incident Command System (ICS) chain of command
- How public health POD operations will function in collaboration with first responders and other community-based agencies utilizing the ICS structure
- How public health POD operations will be activated
- Emergency response functional roles within a typical public health POD operation

If you feel that you can satisfy these objectives, then continue to the quiz.

COUNTY OF **SAN MATEO**

References

All content in this training was adopted from the
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