



## **BEST PRACTICE**

Using Mass Dispensing Preparedness Resources to Deliver Routine Services

### **PURPOSE**

This document details the use of regional emergency preparedness resources to fulfill the delivery of normal immunization services to help ensure the community is prepared for an event that may require mass dispensing or immunization.

### **SUMMARY**

Public health agencies are charged with the responsibility to ensure the safety of the public during widespread public health emergencies. The regional planning efforts in the Kansas City metropolitan area incorporate public and private interests in developing plans to respond to regional events. Regional planning is coordinated through a regional council of governments and includes representatives from local government, local public health agencies, hospitals, first responders, private businesses, and others. One focus of the regional initiatives was the development and testing of a mass dispensing/immunization plan. The use of the mass dispensing system for routine vaccinations helps to ensure organization and regional readiness in the event of a widespread public health emergency.

### **DESCRIPTION**

The Public Health response plans for a crisis must be tested using the resources made available. Plans without testing are of little value in safeguarding the public. More importantly, the stewardship of resources must be carefully measured to ensure the most effective plans are implemented. Routine exercises which use local assets are an effective way to ensure the community is prepared.

Multiple exercises and actual uses of a mass dispensing system have been conducted expressly for the purpose of ensuring readiness of Clay County Public Health Center staff to respond during a crisis. The partnerships established during the exercises are expected to be long-standing relationships that will help support a staff of only 78 people in providing services to more than 204,000 people in the county.

## ***Resources***

A mass dispensing system was developed by a local company and was first tested in June, 2004 during a state SNS exercise. After multiple successful exercises throughout the region, the system was implemented in all local public health agencies and hospitals throughout the region. A crucial requirement of the regional adoption was the ability to share the assets across the regional organizations. The interoperability of the system is ensured by a standardized implementation that allows the equipment to be shared across organizations. The result is that limited physical assets such as computers and personnel can be maximized to provide the response capability needed during a mass dispensing event (i.e. significantly more people can be accurately assessed, processed, and prophylaxed in a quicker time frame using fewer LHD staff).

Many areas have been tested during multiple exercises and normal business operations, including:

- Local Jurisdiction Coordination - Community Partners, Public Health, Hospitals and Emergency Management
- Regional Community Resources, including equipment and personnel
- System interoperability
- Personnel knowledge and comfort with the mass dispensing system
- The Use of the Incident Command System

## ***Training & Exercises***

The system was first used by Clay County Public Health Center in the Fall of 2005. Equipment was loaned to the Health Department by a local hospital to operate a public flu clinic. The lessons learned from the event included the first use of the Incident Command System, the first use of a local church as the dispensing site, and a test of a real patient surge that followed a media broadcast of the clinic location.

The Health Department received our own equipment in the Spring of 2006. Planning began almost immediately to conduct a larger exercise to ensure ongoing familiarity with the system as well as ensuring ongoing regional collaboration with other agencies. An exercise was conducted in June, 2006 to test the mass dispensing capability and interoperability of equipment. More than 250 volunteers were treated during the mass dispensing exercise. Volunteers and equipment were used from more than 10 area organizations during the two hour exercise. The result of the exercise confirmed the ease of user training, interoperable design, and patient throughput.

## **Normal Business Procedures**

Based in part on the experience gained during the use of the system in various exercises and clinics, the decision was made to use the system to operate a large public flu clinic during the Fall of 2006. This off-site clinic was preceded by multiple communication and outreach efforts to ensure public awareness. Approximately four hundred patients were processed in 90 minutes during the clinic with minimal disruption to the normal health department operation staffing.

After this large clinic, the system was used in all the smaller flu clinics offered across the county. A much smaller amount of equipment was taken to each site where flu shots were to be offered as part of the community outreach efforts.

## **RESULTS**

Clay County Public Health Center continually stretches our capabilities both by engaging community partners and through the use of assets acquired through regional initiatives. It was clear that without the MEDS|POD system, our ability to effectively respond to an event requiring mass dispensing would be much slower and less effective.

An additional benefit of this system was also observed. Routine testing of our emergency plans and the MEDS|POD system has provided confidence in our ability to fulfill our responsibility to protect the public from the spread of disease during a disaster.

## **REFERENCES**

Zaborac, Gary, et.al. Using a Flu Clinic to Test Emergency Response Plans, poster presentation at NACCHO Meeting, June 2006.

## **Links**

Clay County Public Health Center. <http://www.clayhealth.com>

Mid America Regional Council. <http://www.marc.org>

National Association of City and County Health Officials (NACCHO), CRI Alternative Dispensing Guide. <http://www.naccho.org/topics/emergency/SNS.cfm>

NexGenisys, LLC, developer of MEDS|POD (Medical Emergency Decision System for Points of Dispensing). <http://www.nexgenisys.com>