

Alternative Methods of Dispensing: Model Highlights



Closed PODs: Partnering with Residential Boards and Gated Residential Communities

Palm Beach County Health Department, Florida



Background

Palm Beach County is located in southeast Florida and borders the Atlantic Ocean. As the third most populous county in the state, it is home to 1.3 million people. In the event of a public health emergency that would require medical prophylaxis of 100% of the County's residents within 48-hours as required by the Cities Readiness Initiative, Palm Beach County Health Department has determined that 5400 volunteers and personnel would be needed to staff 45 public Points of Dispensing (POD) sites.

Currently the health department employs more than 900 staff; all of whom have signed an agreement to be available at anytime to respond in the event of an emergency. Additionally, the United Way has been recruiting volunteers from local programs such as Community Emergency Response Teams (CERT) and Citizens On Patrol (COP) to assist the health department staff in an emergency. Despite these efforts, the number of available personnel and volunteers has significantly fallen short of their projected staffing needs.

The Plan

To address the staffing challenge, Palm Beach County Health Department explored alternative ways to reduce the number of public POD sites and consequently, the staffing needed to provide medical countermeasures to all of the County's residents; namely the recruitment of private entities to serve as closed PODs. A closed POD is one that is operated by an organization, business or other entity for its own members, employees, employees' family members, etc., and is not open to the general public.

The development of the health department's hybrid plan of public and closed PODs began with partnerships with gated residential communities, many of which are retirement communities with residents 65 years of age and older. This partnership was a result of many requests from local CERT and COP members who, after having been recruited to serve as a POD volunteers, suggested the health department present the county's volunteer program to their residential communities. In turn, the health department quickly identified this as an opportunity to modify the public POD plan to both meet the needs of the residential communities, as well as those of the health department.

What is unique about the partnerships between the health department and the residential communities is the way in which potential legal and liability challenges are circumvented. A lease agreement is established between the residential board and Palm Beach County Health Department and is attached to the POD Memorandum of Agreement (MOA). During an emergency, the lease agreement temporarily donates a portion of property to the health department for the purpose of dispensing medication to community residents. This donation of real property as a service allows the residential board to register with the county and become classified as a Florida Statute 110 Volunteer. Under Florida Statute 110, all volunteers are provided state liability protections and workers compensation.

The establishment of state liability protections to residential communities that have agreed to serve as closed PODs allowed the health department to further leverage these protections and in turn, expand response plans to include recruitment of local universities, large businesses, and faith-based organizations to operate as closed PODs. Currently, recruitment and partnership establishment efforts for each entity are in different stages of development, but the health department's efforts are focused on the establishment of partnerships with residential boards and the gated communities they represent.

Overall, entities serving as closed PODs are responsible for the recruitment of their own logistics, security, and volunteers. They are also responsible for providing a licensed medical professional (pharmacist, physician, physician assistant, nurse practitioner, podiatrist, or dentist) to oversee dispensing operations. If the community is unable to provide their own licensed professional, the health department will identify an appropriate Medical Reserve Corps member to assist in this capacity.

The local health department will supply the closed POD with the appropriate forms, medications, and supplies during the emergency as well as provide training in advance of an event.

The first phase of training involves a table top exercise that provides

[Article 3]

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general information about Anthrax as well as how it is diagnosed and treated. Additionally, the health department consults with the closed POD on Incident Command Structure and provides general planning assistance around POD set-up and the appropriate use of the forms. The second phase of the training culminates a full-scale exercise based on the community's POD plan and utilizes exercise participants.

In an actual event, the closed PODs will be closely monitored by the health department. Reports must be submitted twice daily to the County's Emergency Operations Center (EOC), which will track POD flow, medication, and supply usage.

Due to the significant number of gated communities within Palm Beach County, the impact of the modified plan to utilize private communities, organizations and large businesses is substantial. The health department conservatively estimates that partnering with residential boards —given the assumption that not all will agree to participate —could reduce the number of public PODs needed by 10 sites. When considering the hybrid plan as a whole, including businesses and the like, there exists the potential to reduce the public POD burden by approximately 50-60%.

Pros

- Partnering with specific communities, such as gated or retirement communities discussed here, allow the local health department to enhance the communication infrastructure and the trust factor to more effectively reach out to these communities in the event of other potential public health activities (i.e., health education and promotion, response to pandemic influenza and social distancing measures, environmental emergencies, etc.).
- · Potentially reduces morbidity and mortality in an at-risk population; this model focuses on gated communities, many of which are retirement communities whose residents are adults 65 years of age and older.
- This model has the potential to significantly reduce the burden on public PODs and therefore reduce the quantity of volunteers and personnel needed to staff and secure them.
- This model provides an additional pool of trained and/or prophylaxed individuals that can later serve as volunteers at public PODs or provide assistance in other capacities or situations.

Cons

- Liability is still a concern for organizations, businesses, and other entities even with state protections afforded to registered volunteers and can delay or inhibit the establishment of partnerships.
- With any closed dispensing model, there exists the potential for public misperception that the closed POD groups are receiving special treatment.

Costs/Resources Needed

- Health Department personnel are needed to contact outreach and provide training to potential closed POD partners. The Centers for Disease Control and Prevention provides grant funding for the Health Department personnel to plan and oversee the program and to conduct the outreach and training.
- Printing and supply of materials for the closed PODs are costs that would need to be covered. However, such costs would be a trade-off as they would need to be incurred if the constituents of the PODs had to report to the public PODs. Nevertheless, these overall costs will be reduced, as the closed PODs will assist in providing the printing of the documents for their respective constituents, that is, (1) Registration Forms, (2) Anthrax Information Sheets, (3) Acute Symptoms Screening Forms, and (4) Medication Instruction Sheets. The closed PODs will also be provided with an Excel program for accountability of the medication delivered, dispensed, and on-hand.
- The delivery of the medication and medical supplies to all PODs, public and closed, will be supported by the County Emergency Support Functions. ESF-1 will assist with Transportation; ESF-16 will assist with Law Enforcement; and, Branch 5 will assist with Logistics. The Palm Beach County Sheriff's Office, Palm Beach County Fire Rescue, and Palm Beach County Medical Society/Medical Reserve Corps will be staging areas for the re-distribution of medication and medical supplies to all first responders, including municipal law enforcement, fire rescue, and hospitals; and, to nursing homes and assisted living facilities.

Planning Tips

- Develop and enhance relationships with a broad range of stakeholders within public health, emergency management, epidemiology, poison control, the medical community, etc., as well as the private sector. Include these and other potential partners in the brainstorming and response planning process and summit regularly to share ideas, information, and helpful tools.
- Focus efforts towards prevention. Work with response and community partners and provide education on potential threats and response plans in advance of an emergency event can help to mitigate the impact should an actual event occur.

Resources

- Memorandum of Understanding Template (Word)
- Mass Antibiotic Dispensing at Residential Associations and Home Owners Associations as Points of Dispensing (PPT)
- Volunteer Training at Points of Dispensing (PPT)
- Johnson, K. (2008, September 13). Volunteers needed for medical emergency sites. South Florida Sun - Sentinel, pp. B5

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