

Operational Readiness Review (ORR) Workshop Distribution Planning



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July 26, 2017



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Background/Overview on Distribution Planning

Why is this information collected?

- ❑ The distribution planning form provides insight about procedures for handling medical materiel management and distribution.
- ❑ Although the primary focus is Capability 9, additional questions from Capability 3 – emergency operations coordination are included for situational awareness.

What impacts achieving “Established” status?

- ❑ Elements noted with an asterisk (*) on the following slides must be addressed to achieve an implementation level of “Established. “

Background/Overview on Distribution FSE

Who must complete this form?

States	Annual requirement (Budget period 1, 2017-18)
Directly funded localities	Annual requirement (Budget period 1, 2017-18)
Territories or freely associated states	Annual requirement (Budget period 1, 2017-18)
CRI local planning jurisdictions	Annual requirement (Budget period 1, 2017-18)

Question

Sufficient Evidence

Date of most recent preparedness plans review/update

- All-Hazards Plans that include MCM distribution and dispensing that:
 - Maintain a record of change
 - Identify the signatory authority
 - Are signed off on by PHEP Director within two years of review date
 - Are in final or draft status

Plan/s include strategies to coordinate with subject matter experts (SMEs) to inform incident management decision making

- A well-defined process for identifying appropriate SMEs for a particular incident
- A process for incorporating those SMEs in to the development of a response strategy

Subject matter experts involved in developing plans

- SME involvement is assumed if the plan follows CDC guidance and follows a logical progression

Question

Sufficient Evidence

***Standard Operating Procedures:**

- 1. Full activation procedures**
- 2. Notification procedures**
- 3. Partial activation procedures**
- 4. Staff (by functional role/name) authorized to activate EOC**

- Triggers
- Pre-event indicators
- EOC activation levels
- Activation processes
- Notification processes
- Staff authorized to activate the EOC
- Minimum staffing requirements
- Logistics
- Process for demobilization
- Plan for sustained operations

***Identified incident command staff:**

- 1. Incident Commander**
- 2. Finance/Admin Section Chief**
- 3. Logistics Section Chief**
- 4. Operations Section Chief**
- 5. Planning Section Chief**
- 6. Public Information Officer**
- 7. Safety Officer**
- 8. Liaison Officer**

- Job Action Sheet or other documents that outline:
 - Roles and responsibilities
 - Required qualifications and skills sets
- Rosters or staffing matrices that indicate a jurisdiction has sufficient staff to fill all positions for a 24-hour operational period

Question

Sufficient Evidence

*Transportation agreements:

1. Primary transportation
2. Back-up transportation
3. Number of operators
4. Types of drivers
5. Number of vehicles
6. Types of vehicles
7. Vehicle load capacity
8. Cold chain procedures
9. Response time for initial transportation requirements

- Signed MOAs, MOUs, IGAs, IAAs, contracts, or a promulgated plan indicating how transportation will be procured
- Agreements that address identified components (1-9 in the left column)
- If there are agreements with other agencies for transportation (UPS, DOT, etc.), that determine number of vehicles based on scale of incident, enter 000 and specify in the “other” category.

*RSS/RDS/LDS staff identified:

1. Distribution lead
2. Logistics Lead
3. Receiving site lead
4. Security coordinator
5. DEA registrant (or designee)

- Job Action Sheet or other documents that outline:
 - Roles and responsibilities
 - Required qualifications and skills sets
- Rosters or staffing matrices that indicate a jurisdiction has sufficient staff to fill all positions for a 24-hour operational period

Question

Sufficient Evidence

***Requesting medical materiel:**

- 1. Assessment of local inventory/MCM caches**
- 2. Decision process**
- 3. Identification of pharmaceutical/medical supply wholesalers**
- 4. Process for requesting MCM**

- Procedures to assess local, regional, and state inventory levels, and inventory/MCM caches available for the response
- Appropriate, jurisdictionally-defined procedures to request MCM from local, state, regional or federal entities (as applicable to the jurisdiction)

**Locals providing inventory level elements to state or federal authorities
(State Recipients only)**

- Protocol to use IMATS and/or another IDE-compliant IMS to collect inventory data from local entities and consolidate that information to send to CDC

Question

Sufficient Evidence

***Security plans for primary RSS:**

- 1. Security lead**
- 2. Evacuation plans**
- 3. Exterior physical security**
- 4. Interior physical security**
- 5. Security breach plans**

- Plans that address identified components (1-5 in left column)
- U.S. Marshals Service (USMS) Inspectors are the SMEs who can verify RSS site-specific security plans and can provide feedback to MCM Specialists and Law Enforcement

***Transportation security plans:**

- 1. Crossing jurisdictional lines**
- 2. Crossing governmental sovereignty (if applicable)**
- 3. MCM arriving at RSS**
- 4. MCM transported from RSS to RDS/LDS/POD**
- 5. MCM transported from RDS/LDS to POD**

- Signed MOAs, MOUs, IGAs, IAAs, and contracts with security partners, or a promulgated plan that address identified components (1-5 in left column)
- If such a document exists, but is not available for review, verification from a trusted agent is acceptable

Question

Sufficient Evidence

***Allocation and distribution elements include:**

- 1. Chain of custody**
- 2. Cold chain**
- 3. Delivery locations**
- 4. Delivery schedule**
- 5. Transportation method(s),**
- 6. Transportation routes**
- 7. Receipt from intermediary site (if applicable)**

- Allocation tables, routes, load plans, a delivery schedule, and a decision-making process to handle factors that could affect the delivery schedule (e.g., road closures, alternative routes)
- The process to monitor and maintain appropriate temperature at fixed locations and during transport, available freezer or refrigeration capabilities, and/or processes to acquire these assets

***Recovery and demobilization elements include:**

- 1. Recovery of durable medical equipment**
- 2. Recovery of materiel**

- Responsible personnel
- A description of the process
- Assets needed (i.e. vehicles) for recovery of durable medical equipment and MCM
- Where durable medical equipment and MCM will be taken/stored (e.g., back to RSS)

Questions?



For more information please contact Centers for Disease Control and Prevention

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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