

Considerations for a CLOSED Dispensing Site

The following questions will help you determine whether your organization has the capabilities needed to function as a CLOSED Dispensing Site. After completing this questionnaire, you'll have a better idea of what your business can or can't do to dispense medications in an emergency. Your management team should discuss these questions and answers with your local public health partners for further planning assistance. You can contact Public Health Preparedness at 707-565-4496.

Name of facility: _____

How many doses of medication will be needed?

1 How many people does your business employ?

Full-time	
Part-time	
Contract	
Seasonal	
Total Employees	

2 Do you have residents, patients, or clients to whom you will provide medication?

Yes No

If so, how many?

3 Will you offer medication to employees' family members, too?

Yes No

4 If you plan to offer medications to employees' families, it is imperative that you work with your local public health agency to decide how you will define a "family member" and determine the amount of medication

needed. For purposes of this checklist, you can use an estimate of three additional individuals per employee (one spouse and two children).

Total Employees	
Multiplied by 3*	
Total Family Members	

* Or other factor provided by your local public health agency

5 Using the answers from Questions 1, 2 and 4, calculate how many individuals your organizations will need to supply with medication.

Employees	
Residents, Patients, Clients	
Family Members	
TOTAL	

Where will the medication be dispensed?

6 Does your facility have a large enough space to conduct dispensing operations, such as a large conference room, cafeteria, or auditorium?

Yes No

(Please refer to the Sample Dispensing Site Flow Diagram included in this workbook for an example of how the space will be utilized.)

Who will dispense the medication?

7 Who will serve as the on-site, licensed medical professional(s) required for your dispensing operation?

- On-staff medical professional (nurse, doctor or pharmacist)
- Contract medical personnel (arranged via insurance, occupational health, etc.)

Will these individuals be available to help the company dispense medication during an emergency?

How will you handle the paperwork?

8 Does your organization currently require pre-employment health screenings?

- Yes No

9 Would your organization be willing to collect medical information (related to emergency dispensing) from your employees PRIOR to an actual event?

- Yes No

[Note: The type of information collected will be similar to that provided on standard health assessment forms included in this workbook.]

10 If you answered YES to Question 9, how would you maintain/update those records?

- Use current employee records system
 Develop a separate, dedicated system

[As you think about Question 10, you may want to examine any human resource policies already in place regarding the maintenance and storage of health-related information.]

How will you manage the event?

11 Has your organization identified a Command Staff/Crisis Management Team?

- Yes No

12 If you answered YES to Question 11, will this team be responsible for planning, exercising and commanding all aspects of your dispensing operations?

- Yes No

13 Do you have security measures in place at your facility, such as security personnel; limited or controlled access; and/or video surveillance to protect the medications and control access to the site?

- Yes No

14 Will your Command Staff/Crisis Management Team utilize the Incident Command System (ICS)?

- Yes No

Have team members completed basic ICS training (ICS-100, -200 and -700)?

- Yes No

Has your Command Staff/Crisis Management Team participated in disaster exercises?

- Yes No

15 Will your organization provide pre-event education to your employees about your dispensing plans?

- Yes No

16 Do you have supplies and equipment already on-site, or would additional items need to be stockpiled? (Please refer to the CLOSED Dispensing Site Workbook for a suggested supply list.)

- Yes No

17 Would you be able to provide local public health agencies with a breakdown of the counties your employees reside in?

- Yes No



Sonoma County
Department of Health Services
Public Health Division
[www.sonoma-county.org/
phpreparedness](http://www.sonoma-county.org/phpreparedness)



Cities Readiness Initiative
www.marc.org/cr