

CITY OF LOS ANGELES



Medical Points of Dispensing (MPODs) Annex

**Approved by Emergency Management Committee
on July 3, 2019
Approved by Emergency Operations Board
On July 16, 2019**

This Annex is not a standalone document. It is intended to augment the City of Los Angeles Emergency Operations Plans and Procedures and the City of Los Angeles Public Health Emergency Response Plan, along with departmental plans, provide direction and guidance to City departments when responding to public health emergency. This Annex is applicable to those City departments with Emergency Operations Organization (EOO) responsibilities and all other City agencies with essential EOO needs or resources and facilities available to the EOO.

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ANNEX DEVELOPMENT AND MAINTENANCE

This Annex is developed in support of the City of Los Angeles Emergency Operations Plan (EOP) to facilitate response to incidents with significant public health impacts requiring activation of Medical points of dispensing (MPODs) in the City of Los Angeles. This Annex is developed in cooperation and with input from City departments with primary response or support activities, as well as input from appropriate non-City agencies with identified activities related to public health incidents and/or incidents requiring mass medication dispensing to the general population.

This Annex is developed to describe the overall Citywide response function and capabilities, and is to be used by each department identified within this Annex to develop their own standardized operating procedures (SOPs) specifically for their department to direct tactical operations. When developing SOPs, each department is to take into consideration all of the activities identified in this document directly related to their own department, as well as how those activities interact with, support, or require support from other departments identified within this plan. Departments must ensure that their SOPs are inclusive of planning for people with disabilities and others with access and functional needs. If, at any time, any department identifies a conflict in how their field response or support activities are performed in comparison to what is described in this Annex or identifies a conflict between their listed activities and/or responsibilities within this Annex and how they relate to or support another department's listed activities, such conflict is to be immediately reported to the Emergency Management Department (EMD) – Planning Division.

This Annex is to be corrected immediately upon notification or observation of any operational errors or conflicts. If, at any time, a department, agency, or stakeholder to this document changes, develops, or amends any policy, procedure, or operation that will change or affect the contents of this document, that entity is to immediately notify the Emergency Management Department–Planning Division.

Such corrections are to be reflected within the Record of Changes. The Emergency Management Department, working with the Los Angeles County Department of Public Health, may update, modify or change the approaches listed in the Annex on short notice to deal with new public health threats. This Annex is written with the most current best practices available as related to MPOD planning.

Every other year, a formal review of this Annex will be conducted by departments and agencies that are identified within the Annex, as well as any other departments or agencies that may need to be part of the review process. The Emergency Management Department–Planning Division will lead such an effort. Upon completion of such formal review, all corrections to the document will be reflected within the Record of Changes.

Updates, modifications or changes will be brought before the Emergency Management Committee (EMC) and Emergency Operations Board (EOB) for consideration as soon as possible, but this could be after the updates, modifications or changes have been implemented.

APPROVAL AND IMPLEMENTATION

This document is a Hazard Specific Annex to the City of Los Angeles EOP. It serves as a companion document to the Mass Care and Sheltering Functional Annex. The Annex was developed with input from all applicable City of Los Angeles departments and allied stakeholders. Upon completion, it is reviewed by the City's Emergency Management Committee. When approved by the Emergency Management Committee, it presents the document to the EOB with a recommendation for approval. Upon review and approval by the EOB, the document goes to the Mayor of the City of Los Angeles with a recommendation to approve and forward to the City Council for adoption.

This Annex was developed with input from all applicable Los Angeles City departments. It is compliant with the Federal Emergency Management Agency (FEMA) Comprehensive Preparedness Guide (CPG) 101, Developing and Maintaining Emergency Operations Plans, Version 2.0 (CPG 101 V.2)¹.

Upon formal approval by the Mayor and adoption by the City Council, this document becomes an official Annex to the City of Los Angeles EOP.

¹*Developing and Maintaining Emergency Operations Plans. Comprehensive Preparedness Guide (CPG) 101, version 2.0 ed.* (n.p.: U.S. Department of Homeland Security, Federal Emergency Management Agency, 2010).

CITY EMERGENCY OPERATIONS PLAN/ANNEX CROSS REFERENCE

The City has several plans and annexes addressing emergency response and recovery. The Pandemic Annex will be implemented in conjunction with the following plans, as applicable:

- Public Health Emergency Response Annex.
- Pandemic Influenza Continuity of Operations Annex.
- Zika Virus Readiness, Response, and Recovery Plan Concept of Operations (CONOPS).

During the response to this identified hazard, the following functional support shall be used as deemed necessary:

- Throughout this document, where public information and communication with the public is referenced, see the **Emergency Public Information Annex**.
- Where internal communications systems are referenced, see the **Communications Annex**.
- Where early warning and notification is referenced, see the **Early Warning and Notification Annex**.
- Where sheltering, mass care, mass feeding and the provision of functional needs support services (FNSS) is referenced, see the **Mass Care and Sheltering Annex; Resettlement Processing Center Annex;** and the **Logistics Annex**.
- Where reference is made to evacuations, see the **Evacuation Annex**.
- Where reference is made to Federal, State, Local or Non-Governmental Organizations providing recovery information, see the **Local Assistance Center Annex** and **Recovery Annex**.
- Where reference is made to response and restoration of critical infrastructure, see the **Critical Infrastructure Annex**.
- Hazard Specific Annexes include the **Tsunami Annex, Earthquake Annex, Adverse Weather Annex, Brushfire Annex, Urban Flooding Annex, Off-Airport Major Aircraft Response Annex, Debris Flow Annex, Civil Disturbance Annex, Terrorism Prevention and Protection Annex** and the **Chemical, Biological, Radiological, and Nuclear (CBRN) Annexes**.
- All actions related to fulfilling the purpose of this Annex will adhere to the City of Los Angeles Citywide American with Disabilities Act (ADA) guides, documents, and checklists.
- Where City Departments have tasks assigned relative to this Annex, please refer to that specific department's Standard Operating Procedures (SOP).

Background

A Medical Point of Dispensing (MPOD) site is a location that provides medications, vaccinations, and medical supplies to the population during a public health emergency, such as a pandemic influenza or bioterrorism event. As part of a response to such emergencies, preventative medication may be dispensed to reduce morbidity and mortality in the affected community. The Los Angeles County Department of Public Health (LACDPH) is charged with dispensing life-saving medications to local populations. Various strategies exist to ensure timely delivery of preventative medication in an emergency, including the utilization of MPOD sites.

MPOD sites will be activated in order to provide medication and/or medical ancillary supplies to a healthy community prior to the onset of illness in order to decrease illness and prevent death. MPOD sites are not intended to dispense medications to already-ill individuals; persons who are already sick will not be able to seek treatment at an MPOD and will have to be seen at their primary care doctor's office or a hospital.

I. PURPOSE, SCOPE, SITUATION AND ASSUMPTIONS

A. Purpose

The Annex details roles and responsibilities for the managed response to an emergency incident requiring mass medication dispensing to the general public, and can be used in conjunction with other plans designed for the safety and protection of the population.

The main purpose of MPOD operations is to quickly distribute medications, vaccines, and medical supplies to a large number of people in a short period of time in order to prevent illness and death. The purpose of this MPODs Annex is to enable the City of Los Angeles to respond effectively and efficiently to ensure public health and safety and that essential operations are maintained during a significant public health incident.

The City of Los Angeles' objectives during an incident with significant public health impacts are to reduce transmission of the virus strain or agent among staff, clients, and partners, minimize illness among staff and clients, maintain mission-critical operations and services, and minimize social disruptions and the economic impact of a significant public health event. To this end, this Annex will support and enhance each Department's continuity of operations planning efforts, and has been developed to meet the following objectives:

- Provide a concept of operations and identify roles and responsibilities for each appropriate department within the City of Los Angeles;
- Define communication and coordination guidelines for rapid notification and response of City departments, stakeholders and the public in the event of a public health emergency or other incident requiring mass medication dispensing;

- Identify actions that can be accomplished within a few minutes to a few days to mitigate any adverse public health impacts;
- Describe roles and responsibilities related to public health issues between local, state and federal responding agencies and organizations;
- Detail the interagency coordination related to public health incidents between local, state and federal responding agencies and organizations;
- Provide a flexible, scalable approach; and
- Ensure consistency in local, state, and federal responding agencies and organizations emergency response plans and operations.

B. Scope

The scope of this Annex is applicable to Los Angeles City departments with Emergency Operations Organization (EOO) responsibilities and other departments with essential resources. Of particular importance to this document are:

- City Departments with emergency public safety functions;
- City Departments having routine interaction with the public; and
- City Departments performing emergency public safety or other critical services.

This Annex will be activated by the LACDPH, under the authority of the County Public Health Officer, in coordination with partnering agencies after a public health emergency is officially announced and life-saving preventative medication is available.

C. Situation Overview

Location

The City of Los Angeles covers 498 square miles with approximately 468 square miles of land (214 square miles of which are hills and mountains) and approximately 29 square miles of water. The San Gabriel and Santa Susana Mountains bound the City on the North and the Santa Monica Mountains extend across the middle of the City. The Palos Verdes Hills and Pacific Ocean bound the City on the South and West.

Demographics

According to the California Department of Demographic Research Unit's "*E-1 Population Estimates for Cities, Counties, and the State*",² the 2016 population estimate for the City of Los Angeles is 4,030,904. This is approximately 8,094 persons per square mile.

The City of Los Angeles is one of the most diverse cities in the world. Angelenos come from dozens of countries, speak nearly 200 languages, and represent a wide range of religions and ethnicities. The community members who live, work, and play in Los Angeles include persons with disabilities

² California Department of Finance, E-1 Population Estimates for Cities, Counties, and the State, January 1, 2015 and 2016

and others with access and functional needs. This plan will use the phrase *people with disabilities and others with access and functional needs* to describe both those that meet the definition of disability as well as people who may or may not meet the definitions of civil rights laws or some of the 60+ diverse definitions of disability.³

The phrase “people with disabilities and others with access and functional needs” is inclusive of broad and diverse groups of people who also directly benefit from physical, communication, and program access. By accommodating the needs of these populations and others with access and functional needs, a much larger portion, estimated to be up to 50% of the City’s population, benefits (including people of all ages with vision and hearing loss; those with physical, mental health, developmental, intellectual and other cognitive disabilities; those with behavioral health issues; people with learning, understanding, remembering, reading, and speech and mobility limitations; people from diverse cultures and limited or no English proficiency; and those who are transportation disadvantaged).⁴

Vulnerabilities

The City of Los Angeles recognizes that disasters may exhaust local resources. The City continues to develop, update and/or maintain memorandum of understandings (MOUs), memorandum of agreements (MOAs), and contract amendments with private vendors to increase response capability and available resources.

Factors to consider are the type of disaster, the population density, and the terrain in areas of Los Angeles. In some instances, the consequences of a disaster along with terrain, and the geographical area, may impact the effectiveness of notification systems. The City of Los Angeles has multiple, accessible, redundant warning and notification systems that it will utilize to reach the public for warnings, notification, and support.

Due to the population density and terrain of the City of Los Angeles, the City recognizes that, despite a good faith effort, it may not have the capabilities or resources to reach every individual in terms of public warnings, notification and/or support.

Past Occurrences

To date, there have been no public health incidents requiring the activation of public MPODs in the City of Los Angeles. MPOD site setup and medication dispensing has been tested during routine influenza vaccinations in addition to the exercise described below:

2017 MPOD for Vaccine Exercise

A pandemic influenza exercise was planned and conducted at two recreational centers in the City of Los Angeles. The exercise was designed to test the set-up and operation of the vaccine-model for a public MPOD site, utilizing free seasonal influenza vaccines for the

³ Los Angeles Department of Public Health, “Adult Disability in Los Angeles County.” LA Health. Sept. 2006.

⁴ Kales, J. and Enders, A. in “Moving Beyond ‘Special Needs’ A function-Based Framework for Emergency Management Planning,” Journal of Disability Policy Studies, Vol./No. 44/207, pp. 230-237.

community. The scenario was based on the detection of influenza-like illness at several hospitals in the City of Los Angeles. In the scenario, samples were sent to the CDC for testing and identified as a novel influenza strain with high transmission and virulence with a 30% illness attack rate and two percent case fatality rate. A significant and sustained surge on healthcare delivery systems and multiple waves of disease is experienced, and public MPOD sites are opened to dispense vaccines.

2009 – 2010 H1N1 Vaccination Program

The Vaccination Program was a combined effort of the City of Los Angeles and the LACDPH to provide H1N1 vaccinations to the public using MPODs. Over the course of 12 weeks, 72,261 vaccinations were provided through City of Los Angeles facilities.

D. Assumptions

This Annex was created to integrate the concepts and structures defined by the National Incident Management System (NIMS), the California Standardized Emergency Management System (SEMS), and the National Incident Command System (ICS). All City, county, state, and federal processes, procedures, and protocols reflected or referenced in this document were current as of the date of approval of this Annex.

The course of action in response to a significant public health incident requiring the activation of this plan will be governed by many factors that cannot be fully known in advance. The objectives and activities contained in this Annex are based on scientific data, historical events and recommendations available at the time of this writing. The planning assumptions and principles are as follows:

- A serious public health incident will place a great strain on existing health care resources and will rapidly take on substantial political, social, and economic dimensions.
- Speedy provision of preventative medications to potentially exposed individuals is the most effective intervention to prevent disease and save lives in the early phase of a public health emergency.
- The federal government maintains and will deliver sufficient amounts of preventative medication to Los Angeles County for mass dispensing.
- The Los Angeles County Public Health Officer (PHO) has requested the activation of the Public MPOD strategy.
- The LACDPH will be the lead agency in management of a serious virus outbreak or other public health emergency and will promote and coordinate the use of vaccines or antivirals based on their availability and the best scientific evidence at the time.
- Coordination among local and regional agencies and representatives on MPOD activities is essential for an effective response.
- County and City partners are jointly responsible for staffing any public MPOD sites.
- Upon activation and pursuant to the MOU, the City of Los Angeles has the capability to mobilize their personnel resources to dispense life-saving preventative medication to the population under unified command with LACDPH.

- Each public MPOD site will be managed by Incident Command System (ICS) principles and processes under unified command between City and LACDPH staff (for MPOD sites held in municipal jurisdictions).
- The public MPOD sites will be open to provide preventative medication to the entire population.
- In the event the City of Los Angeles activates a public MPOD, all personnel involved in the mass dispensing of preventative medical countermeasure (MCM) medications in response to the request of the PHO to a public health emergency, will be provided liability immunity provided by a Public Readiness and Emergency Preparedness (PREP) Act declaration.
- When antivirals and vaccines become available, they will be allocated either on a target group or goal area basis. Pandemic pharmaceutical responses (e.g., vaccination and antivirals) may be unavailable and/or limited, and non-pharmaceutical responses (i.e., strict adherence to respiratory hygiene, hand washing, self-isolation, and social distancing) will be the most effective preventive and control measures and strategies to limit virus transmission.
- Public MPOD sites will continue to operate and mass dispense preventative MCM medications until demand has ceased and/or MPODs are demobilized by the PHO.
- The incident will trigger:
 - a. Significant public and social concern and anxiety;
 - b. Large numbers of “worried well”;
 - c. Significant demand for timely public information and risk communication;
 - d. Elevated potential for social disruption and disorder;
 - e. Significant and widespread disruption to economic, transportation, educational, and other aspects of day-to-day activities; and
 - f. Significant and sustained media attention and requests for information:
 - Management and control of misinformation is essential and a significant challenge.

II. CONCEPT OF OPERATIONS

The primary goal of activating a public MPOD site is to protect the public's health by preventing disease and death through rapid provision of preventative antibiotics and other medications. Objectives include:

- Implementing mass dispensing of preventative MCM medications at public MPOD sites with LACDPH and the City of Los Angeles;
- Ensuring safety for all MPOD response personnel and clients; and
- Maintaining communication and situational awareness throughout the duration of the incident and MPOD operations.

Response to a public health emergency will be coordinated and implemented based on the initial size-up, initial response, extended response, and recovery activities required by the incident and as detailed below.

A. Initial Size-Up

The Initial Size-Up Phase of response occurs when pre-identified stakeholders take precautionary measures to ensure response capability or take immediate mitigation measures. The best initial action for the public in the case of a public health emergency is to take appropriate hygiene precautions and listen for instructions from local public health authorities.

Distribution of prophylactic drugs to the City population will be at the direction of the Los Angeles County PHO. Upon such direction, MPOD sites will be utilized at points throughout the City. To accomplish MPOD site activation, advance planning is required to establish mutual aid agreements and response protocols. The following agencies should be notified:

- The EMD Duty Officer/Duty Team can be contacted at [REDACTED] to facilitate coordination and notification of City resources. EMD will contact the appropriate personnel, additional departments, and resources for assistance.
- LACDPH can be contacted at [REDACTED]
- Notification to the United States Department of Health and Human Services (HHS) and FEMA will activate Emergency Support Functions (ESFs) in support of the event. The Secretary of the Department of Health and Human Services can declare a public health emergency if necessary.

B. Initial Response

Initial response actions will typically be provided from LACDPH and the City of Los Angeles EMD. Information related to the virus or incident requiring MPOD activation and its effects on human populations as well as instructions on hygiene, social distancing, and other relevant details will be released to the public as part of the initial response. LACDPH and the City of Los Angeles may activate their respective Emergency Operations Centers (EOC)/Department Operations Center (DOC) to identify and coordinate necessary resources. As soon as the EOC/DOC is activated, it will provide the coordination of resources to support the incident and the situational awareness for all supporting agencies.

i. Activation

In accordance with the MOU between LACDPH and the City of Los Angeles, the decision to activate public MPOD site(s) is determined under the authority of the Los Angeles County PHO in response to a major public health emergency accompanied by a declaration of a local, state, and/or federal disaster or emergency. However, it is understood that at the time of the event, pre-identified MPOD site(s) may not be activated.

Upon the decision from both parties (LACDPH and the City) to activate MPOD site(s) as outlined in the MOU, the following parties will be notified to ensure coordination and communication:

	Name	Title / Role	Contact Information
City of Los Angeles	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
County of Los Angeles Public Health Department (LACDPH)	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]

ii. Notification

Upon notification to activate the public MPOD site(s), representatives from both agencies (LACDPH and the City) will coordinate and/or confirm the following logistical and operational issues:

- Securing and providing access to pre-identified public MPOD site(s);
- Opening time of the MPOD site(s) to the general public;
- Duration of MPOD operations;
- Location and delivery of medications;
- The name and contact information for person(s) responsible for overall operations of the MPOD site(s) (e.g., name, title, phone number, email);
- Communication of situational status reports; and
- Deployment of personnel to operate public MPOD site(s) under unified command between LACDPH, the City, and law enforcement.

The City of Los Angeles will activate their EOC and notify their designated personnel to secure and provide access to the pre-identified site(s).

The City of Los Angeles will utilize the City notification system to contact the pre-designated MPOD team and dispensing operations personnel. They will be notified to report to the pre-designated MPOD site(s) and to bring work identification with them.

MPOD Designated Personnel

Each pre-identified MPOD site will have designated personnel that will be notified in the event the site they are assigned to is activated. Personnel will secure the site and provide access to the facility (see MPOD site-specific plans). In addition, a minimum of one (1) City of Los Angeles personnel will be identified per MPOD site to fulfill the role of the City MPOD leader and to operate the MPOD in unified command with LACDPH and law enforcement. There will be, at minimum, two (2) law enforcement personnel present throughout the operational period at the MPOD site. The City of Los Angeles will designate and deploy additional personnel for MPOD positions as agreed upon in site-specific plans. A table outlining the minimum number of City personnel designated to assist with MPOD response can be found in *Attachment C: MPOD Personnel Requirements*. Staffing any remaining MPOD positions will be the responsibility of LACDPH. A table describing MPOD positions and responsibilities can also be found in *Attachment B: Roles and Responsibilities*.

iii. Preparation

The medication will be delivered to the public MPOD site(s). Unified command at each site will be responsible for taking receipt and confirming delivery of MPOD supplies and medication. In addition, they will coordinate the setup of table and chairs, stanchions, and station supplies as designated in the MPOD site-specific plans and as accordance with the MPOD Field Operations Manual. This manual provides a step-by-step procedure for all the specific tasks to be completed in preparing for mass dispensing operations.

iv. Operation

MPOD operations will be conducted in accordance with MPOD site-specific plans and the MPOD Field Operations Manual. Review site-specific plans for site(s) that are to be opened and utilize the MPOD Field Operations Manual, which provides a step-by-step procedure for all the specific tasks to be completed in operating mass dispensing operations.

v. Demobilization

MPOD demobilization operations will be conducted in accordance with MPOD site-specific plans and the MPOD Field Operations Manual. Review site-specific plans for site(s) that are to be opened and utilize the MPOD Field Operations Manual, which provides a step-by-step procedure for all the specific tasks to be completed in demobilizing mass dispensing operations.

C. Expanded Response

MPOD operations will be conducted in accordance with MPOD site-specific plans and the MPOD Field Operations Manual.

D. Immediate Recovery

The key objectives of recovery from an incident requiring MPOD activation are identical to that of any other public health incident – to restore baseline levels of public health and to restore jobs, services and facilities quickly and efficiently. All actions described in the response phase as secondary emphasis are actually recovery efforts. These include restoration of vital services that may have been negatively affected by high rates of absenteeism and/or a reduced workforce.

E. Documentation and Time-Keeping

During an emergency situation or incident, it is important to keep specific records related to staff assignments and costs, related to the response to and recovery from the emergency/incident. Each department has their own internal processes for ensuring proper documentation of actions, incident specific cost tracking, personnel time keeping, and record retention of these documents.

In accordance with standard cost accountability practices for unique events, man-made and/or natural disasters, all City Departments are required to document their financial costs of labor, materials and equipment in addressing the event. The Office of the City Administrative Officer (CAO) is the Applicant's Authorized Representative to CalOES and FEMA. Financial tracking and management will be coordinated through Group 10 of the CAO Disaster Grants Finance and Administration Section and appropriate units in accordance with the ICS as required by SEMS and NIMS.

Each City department, proprietary and City Council controlled agency operates their respective accounting operations/practices within the guidelines of the Mayor's Executive Directives, the California Natural Disaster Assistance Act and the Federal Code of Regulations Title 44 of the Stafford Act to maximize potential reimbursement eligible costs and minimize ineligible costs.

III. Organization and Assignment of Responsibilities

Successful emergency management requires that the City have the ability to effectively coordinate every available resource (public and private) during a crisis. Accomplishing this task requires multifaceted interdepartmental and inter-agency cooperation and the resolution of complex operational, legal, legislative and administrative issues.

The EOB supervises the EOO during all periods of emergency preparation, response and recovery. The Los Angeles Administrative Code empowers the EOB to make and enforce all necessary rules and regulations necessary for governing the EOO. EOO policies and procedures are contained in the Emergency Operations Master Plan and Procedures (Master Plan), its many annexes, and the EOO Policy and Procedures Manual.

During a declared emergency the Mayor, as EOO Director, is authorized to promulgate, issue and enforce rules, regulations, orders and directives which are considered necessary for the protection of life and property (e.g., curfews, curtailing the sale of dangerous products, commandeering personnel and property, etc.).

Upon receipt of official warning of an impending or threatened emergency, or upon the declaration of a local emergency, the EOO is immediately activated and all necessary personnel, as the Mayor may direct, are called into active service. The Mayor's oversight of EOO activities is normally accomplished through coordination with the EOB.

In the case of a pandemic or other public health-related emergency incident in the City of Los Angeles, the LACDPH will be the lead agency with the City EMD as support. The responsibilities of the City and County of Los Angeles, as well as the State of California, the federal government, and non-governmental organizations are detailed below. Roles and responsibilities for additional City departments can be found in Annex B: Roles and Responsibilities.

F. City of Los Angeles

The City's EMD and RAP have primary roles in response coordination to an incident requiring activation of MPOD site(s) within the City of Los Angeles. The EMD, via its Public Health Liaison, will coordinate with LACDPH to activate, staff, operate, demobilize, and document all MPOD activities. EMD and Rap will coordinate with LACDPH and agree to perform and/or assist in coordinating the following activities:

1. Securing and providing access to the pre-identified MPOD site(s);
2. Ensuring the opening of the MPOD site(s) at the agreed upon, pre-designated opening time;
3. Ensuring pre-identified MPOD site(s) are open for the duration of mass dispensing operations;
4. Providing the name and contact information for person(s) responsible for overall operations of the MPOD during each operational period;
5. Providing facility support services throughout the duration of MPOD operations;

6. Deploying City of Los Angeles personnel to operate MPOD site(s) in accordance with site-specific plans;
7. Ensuring the presence of law enforcement at MPOD site(s) in accordance with site-specific plans;
8. Assisting with dispensing of preventative medications in accordance with procedures provided by LACDPH; and
9. Communicating with LACDPH, the City of Los Angeles, and law enforcement emergency operations centers during MPOD operations in order to provide situational status reports.

In addition to EMD and RAP, the Los Angeles Police Department (LAPD) will provide site security at MPOD locations as well as provide security for the transport of medications and supplies. Additionally, the Department of Water and Power (DWP), the Department of Transportation (DOT), and the Department of Public Works (DPW) may be requested to assist in operations related to non-clinical, security, traffic and crowd control at PODs. For more information, see *Attachment B: Roles and Responsibilities*.

G. County of Los Angeles

Any significant public health incident in the City of Los Angeles requiring the activation and use of this MPOD Annex will be led by the LACDPH. In the event that the City of Los Angeles activates public MPOD site(s) at the request of the Los Angeles County PHO, LACDPH agrees to perform the following activities:

1. Coordinating the provision of preventative MCM medications and instructions for their use;
2. Providing procedures and protocols for the mass dispensing of MCM medications;
3. Delivering preventative MCM medications to MPOD site(s);
4. Deploying LACDPH and other County personnel to operate MPOD site(s) under unified command as outlined in the City of Los Angeles Public MPOD Dispensing Plan;
5. Mass dispensing of preventative medications to the general population; and
6. Providing personal protective equipment (PPE) to all personnel deployed to operate MPOD sites under unified command.

H. Other Entities

The activation of public MPOD sites may require additional support outside of that provided by EMD, RAP, and LACDPH. Although the City of Los Angeles has no authority to assign responsibilities to county departments, many county departments are the primary agency responsible for providing certain services to the City of Los Angeles as related to public health. Those county departments are listed below, along with the services they are responsible for providing in the event of an incident requiring MPOD activation:

Sheriff's Department, Los Angeles County (LASD)

The Los Angeles County Sheriff's Department is the primary public safety agency for jurisdictions within the County of Los Angeles. The department maintains patrol divisions and homeland security, among many other responsibilities, for the County.

Fire Department, Los Angeles County (LACoFD)

The LACoFD is a first-responder agency responding to life and health threats of varying scope and degree. The fire department will likely serve as a source of information from the field level back to the LACDPH DOC and/or City of Los Angeles EMD EOC.

Health Services, Los Angeles County Department of (LACDHS)

[insert info]

Los Angeles County Emergency Medical Services Agency (EMS Agency)

The EMS Agency coordinates and supports the County’s emergency medical services system with hospitals, fire departments, ambulance providers and other healthcare partners to provide emergency medical services and maintains the County’s emergency supplies. The EMS Agency serves as the lead for the emergency medical services system in the County and is responsible for coordinating all system participants in its jurisdiction, encompassing both public and private sectors.

I. State of California

In California, the State’s main role in any public health-related incident is to assist local government. The City of Los Angeles has no authority to assign responsibilities to State of California departments; however, many State departments have primary or support responsibilities for providing certain services to the City of Los Angeles. Those state departments are listed below, along with the services they are responsible for providing in the event of an incident requiring MPOD activation:

California Department of Public Health (CDPH)

CDPH is the state agency responsible for protecting and ensuring the health of Californians. CDPH manages Branches, Divisions, and Laboratories to support the response to and recovery from public health emergencies.

California Division of Occupational Safety and Health (Cal/OSHA)

Cal/OSHA develops and implements a statewide emergency action plan for responding to significant events anywhere in the State of California. Regional and District Emergency Response Investigation Teams will assist federal, state and local Incident Command Systems in managing and investigating significant events such as catastrophic incidents, accidents, uncontrolled releases of hazardous substances, natural disasters, or pandemics.

California Governor’s Office of Emergency Services (Cal OES)

Cal OES exists to enhance safety and preparedness in California to protect lives and property by effectively preparing for, preventing, responding to, and recovering from all threats, crimes, hazards, and emergencies. Cal OES is the coordinating entity between agencies.

J. Federal Government

Although the City of Los Angeles has no authority to assign responsibilities to Federal agencies, many federal agencies provide support services to the City of Los Angeles. Those Federal agencies that may provide assistance include:

United States Department of Health and Human Services (HHS)

HHS is the United States government's agency for protecting the health of Americans and providing essential health services. In a pandemic emergency, HHS provides guidance for health care providers, primary physicians, and public health emergency responders with information on clinical diagnosis and treatment of illnesses during pandemic emergencies.

Centers for Disease Control and Prevention (CDC)

The CDC is one of the major operating components of the United States Department of Health and Human Services. The CDC Emergency Preparedness and Response website is CDC's primary source of information and resources for preparing for and responding to public health emergencies. The CDC Director's EOC may be contacted at 770-488-7100. The CDC provides surveillance tools to monitor the state of health in the nation. These surveillance tools are crucial in the discovery and assessment of public health emergencies:

a) National Notifiable Diseases Surveillance System (NNDSS)

NNDSS is a public health disease surveillance system that allows health officials monitor the occurrence and spread of diseases. Data is published in weekly and annual Morbidity and Mortality Weekly Report.

b) The Strategic National Stockpile (SNS)

The SNS is the pharmaceutical and vaccine stockpile to counter potential biological and chemical threats and threats from widespread diseases that could affect large numbers of persons in the civilian population. The SNS is managed jointly by the Department of Homeland Security (DHS) and HHS.

United States Department of Homeland Security (DHS)

DHS maintains one vital mission: to secure the nation from the many threats we face and ensure a homeland that is safe, secure, and resilient against terrorism and other hazards. DHS prevents terrorism and enhances national security, secures and manages federal borders and ensures resilience to disasters.

Federal Emergency Management Agency (FEMA)

FEMA is the lead agency for consequence management, which entails both preparedness for and dealing with the consequences of any incident that has large-scale impacts on the public. Although the affected State and local governments have primary jurisdiction for emergencies, a pandemic could stress the local healthcare system to the point of it being unable to effectively meet the demands of the incident. In case of a pandemic emergency requiring more resources than the local jurisdiction can provide, requests for assistance will first go to the County level then to the State of California. If a pandemic incident exceeds the ability of the State to effectively manage and respond to, requests for assistance from the federal government may be required. FEMA is the lead Federal agency for providing assistance to State, Tribal, and local governments.

K. Non-Governmental Organizations (NGOs)

Although the City of Los Angeles has no authority to assign responsibilities to non-governmental organizations, many NGOs provide support services to the City of Los Angeles. Those NGOs that may provide assistance include:

American Red Cross Los Angeles Region (ARC)

The Red Cross has responsibilities as outlined in the EOPs of Los Angeles County and the State of California as well as federal plans, and provides services associated with the mass care of populations. In the event of a pandemic incident requiring evacuation and sheltering, the Red Cross will engage in pre-determined operations for evacuation, mass care, and sheltering, and will deploy an agency representative to the City EOC unless otherwise notified.

Hospitals (Non-Profit and For-Profit)

Local hospitals and doctors will be the first to see illness in the event of a pandemic. Health care staff assists in early detection efforts by reporting unusual disease occurrence to the Public Health Department.

IV. DIRECTION, CONTROL, AND COORDINATION

This Annex may be activated when the Los Angeles County PHO proclaims a public health emergency or if there is an automatic activation. An automatic activation follows a disaster or event that the City has identified, in advance, as one that requires an immediate response. Disasters requiring automatic activation are those events that pose an immediate threat to public safety.

This Annex is only activated when an incident grows in scope to a point where activation of MPODs are necessary. Activation of the EOC is not necessarily automatic or necessary with public health incidents.

In advance of or simultaneous with this Annex activation, City departments and agencies will also activate their departmental public health-related plans.

V. ADMINISTRATION, FINANCE, AND LOGISTICS

Each department is required to have documented internal administrative procedures in place to track financial costs related specifically to the response and/or recovery of an incident. These procedures must include tracking all expenditures specifically related to the incident, including personnel costs such as straight and overtime payroll costs related specifically to the incident. Departments are also required to have in place, documented internal administrative procedures for requesting, fulfilling and tracking internal resource requests, department to department (DOC-to-DOC) resource requests, field to department (field-to-DOC) and department to EOC (DOC-to-EOC). Each department is responsible for the tracking of their own resources, including the tracking of personnel.

If an incident meets designated thresholds for Proclamation or Declaration of a State and/or Federal Emergency or Disaster, the Department of the CAO, acting as the City's Authorized Agent, will develop a method for collecting financial documentation from departments as needed for submission as part of the City's reimbursement application process.

VI. AGREEMENTS AND UNDERSTANDINGS

Currently, there are no Contracts, Memoranda of Agreements or Understandings for this Annex.

VIII. AUTHORITIES AND REFERENCES

A. Authorities

i. Federal

- a) Americans with Disabilities Act of 1990, as amended. <http://www.ada.gov/pub/ada.htm>
- b) Comprehensive Environmental Response, Compensation and Liability Act (CERCLA or Superfund) 42 U.S.C. §9601 et seq. (1980). <http://epw.senate.gov/cercla.pdf>
- c) Emergency Planning and Community Right-to-Know Act (EPCRA) 42 U.S.C. 116. <http://www.gpo.gov/fdsys/pkg/USCODE-2010-title42/html/USCODE-2010-title42-chap116.htm>
- d) Executive Order 12656 of November 18, 1988.
- e) Homeland Security Act of 2002 (PL 107-296 Section 301) http://www.dhs.gov/xlibrary/assets/hr_5005_enr.pdf
- f) Homeland Security Presidential Directive-5 (HSPD-5). <http://www.gpo.gov/fdsys/pkg/PPP-2003-book1/pdf/PPP-2003-book1-doc-pg229.pdf>
- g) National Incident Management System. Department of Homeland Security. December 2008. http://www.fema.gov/pdf/emergency/nims/NIMS_core.pdf.
- h) National Response Framework. Department of Homeland Security. January 2008. <http://www.fema.gov/pdf/emergency/nrf/nrf-core.pdf>
- i) Public Health Service Act (PHSA)
- j) Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288, as amended. <http://www.fema.gov/about/stafact.shtm>
- k) Title 50, U.S. Code, War and National Defense
- l) Centers for Disease Control and Prevention's "National Strategy for Pandemic Influenza Implementation Plan."

ii. State of California

- a) California Code of Regulations, Title 19, Chapters 1 through 6, including:
 - Chapter 1, Standardized Emergency Management System. <https://law.resource.org/pub/us/ccr/gov.ca.oal.title19.html>
 - Chapter 6, Disaster Assistance Act Regulations. <http://www.kintera.org/atf/cf/%7BE475D1A4-FB9C-4135-AE8B-9310119C7F19%7D/CHAPTER%206%20%20CDAA.pdf>
- b) California Constitution. <http://law.justia.com/california/constitution/>
- c) California Emergency Services Act, 2006. <http://hazardmitigation.calema.ca.gov/docs/ESA-all8-06-final.pdf>
- d) California Health and Safety Code.
- e) California Code - Section 25507: CAL. HSC. CODE § 25507. <http://codes.lp.findlaw.com/cacode/GOV/1/3/d2/2/5/7/s25507>

- f) Safe Drinking Water and Toxic Enforcement Act of 1986, Proposition 65. Section 25249.5 and 25249.6. <http://oehha.ca.gov/prop65/pdf/P65LAW6.pdf>
- g) California State Emergency Plan.
<http://www.calema.ca.gov/PlanningandPreparedness/Pages/State-Emergency-Plan.aspx>

iii. County of Los Angeles

- a) Operational Area Emergency Response Plan <http://lacoa.org/PDF/OA%20ERP.pdf>
- b) Los Angeles County Department of Public Health’s “Biological Incident Plan Pandemic Influenza Guidelines.”
- c) Los Angeles County Emergency Medical Services Agency’s “Recommended Actions to Prepare EMS Providers for Pandemic Influenza.”

iv. City of Los Angeles

- a) City of Los Angeles EOP:
 - <http://emergency.lacity.org/EmergencyCheckList/EmergencyPlansAnnexes/index.htm>
- b) Mayor’s Executive Directive No. 15, Emergency Management. Issued March 17, 2011.
- c) Mayor’s Executive Directive No. 16, Disaster Service Workers. Issued March 17, 2011.
- d) Mayor’s Executive Directive No. 17, Emergency Operations Center. Issued March 17, 2011.
- e) Mayor’s Executive Directive No. 18, National Incident Management System. Issued March 17, 2011.
- f) Mayor’s Executive Directive No. 19, Mayor’s Emergency Response Council. Issued March 17, 2011.
- g) Mayor’s Executive Directive No. 23, Individuals with Disabilities and Access and Functional Needs. Issued May 23, 2011.

B. References

i. City of Los Angeles Department Emergency Plans

- a) Los Angeles World Airports
- b) Los Angeles Department of Building and Safety
- c) Department on Disability
- d) City of Los Angeles Emergency Management Department
- e) Los Angeles Fire Department
- f) City of Los Angeles General Services Department
- g) Los Angeles Housing Department
- h) Los Angeles Police Department
- i) Port of Los Angeles
- j) City of Los Angeles Department of Recreation and Parks (RAP)
- k) City of Los Angeles Department of Public Works

l) Los Angeles Department of Water and Power (LADWP)

ii. Federal Emergency Management Agency (FEMA) Biological Incident Annex.

a) http://www.fema.gov/pdf/emergency/nrf/nrf_BiologicalIncidentAnnex.pdf

iii. Federal Emergency Management Agency (FEMA) Emergency Support Function (ESF) #10 – Oil and Hazardous Materials Response Annex.

a) <http://www.fema.gov/pdf/emergency/nrf/nrf-esf-10.pdf>

iv. 2012 Emergency Response Guidebook.

a) <http://phmsa.dot.gov/staticfiles/PHMSA/DownloadableFiles/Files/Hazmat/ERG2012.pdf>

v. Local, Operational, and National COOP Plans and References

a) <http://www.fema.gov/about/org/ncp/coop/index.shtm>

Attachment A: Acronyms

Table 2: Acronyms

Acronym	Full Name
ADA	Americans With Disabilities Act
ARC	American Red Cross
Cal OES	California Governor's Office of Emergency Services
Cal OSHA	California Division of Occupational Safety and Health
CAO	City Administrative Officer
CBRN	Chemical, Biological, Radiological, Nuclear
CDC	Centers for Disease Control and Prevention
CDPH	California Department of Public Health
CFR	Code of Federal Regulations
CONOPS	Concept of Operations
CPG	Comprehensive Preparedness Guide
DHS	United States Department of Homeland Security
DOC	Department Operations Center
DOT	Department of Transportation
DPW	Department of Public Works
DWP	Department of Water and Power
EMC	Emergency Management Coordinator
EMD	Emergency Management Department
EMS Agency	Los Angeles County Emergency Medical Services Agency
EOB	City of Los Angeles Emergency Operations Board
EOC	Emergency Operations Center
EOO	Emergency Operations Organization
EOP	Emergency Operations Plan
ESF	Emergency Support Function
FEMA	Federal Emergency Management Agency
FNSS	Functional Needs Support Services
HHS	United States Department of Health and Human Services
ICS	Incident Command System
LACDHS	Los Angeles County Department of Health Services
LACDPH	Los Angeles County Department of Public Health
LACoFD	Los Angeles County Fire Department
LAPD	Los Angeles Police Department

LASD	Los Angeles County Sheriff's Department
MCM	Medical Countermeasures
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
MPOD	Medical Point of Dispensing
NGO	Non-Governmental Organization
NIMS	National Incident Management System
NNDSS	National Notifiable Diseases Surveillance System
NRF	National Response Framework
PHERT	Public Health Emergency Response Team
PHO	Public Health Officer
PPE	Personal Protective Equipment
PREP	Public Readiness and Emergency Preparedness
RAP	Recreation and Parks Department
SEMS	Standardized Emergency Management System
SNS	Strategic National Stockpile
SOP	Standard Operating Procedure

Attachment B: Roles and Responsibilities

In the case of an incident requiring the activation of MPODs, primary public health response roles and responsibilities are performed by LACHDPH, the City of Los Angeles Emergency Management Department, and the City of Los Angeles Recreation and Parks Department. Other City departments including the Los Angeles Police Department (LAPD), Department of Water and Power (DWP), Department of Transportation (DOT), and Department of Public Works may be requested for additional support and resources related to traffic and crowd control at PODs, POD security, and transport of vaccines and other medical supplies.

Agencies and departments that have additional responsibilities during a suspected or confirmed pandemic incident are detailed in the table below.

Table 3: Roles and Responsibilities

Organization	Description	Key Roles and Responsibilities
City of Los Angeles – Emergency Management Department (EMD) and Recreation and Parks Department (RAP)	<p>The City of Los Angeles EMD is responsible for coordinating emergency preparedness and response activities within the City of Los Angeles. The RAP also has emergency preparedness and response duties during an emergency incident.</p> <p>All public MPOD sites in the City of Los Angeles are located on RAP sites, and accordingly managed and operated by RAP personnel, with support from EMD and LACDPH.</p>	<ul style="list-style-type: none"> • Securing and providing access to the pre-identified MPOD site(s); • Ensuring the opening of the MPOD site(s) at the agreed upon, pre-designated opening time; • Ensuring pre-identified MPOD site(s) are open for the duration of mass dispensing operations; • Providing the name and contact information for person(s) responsible for overall operations of the MPOD during each operational period; • Providing facility support services throughout the duration of MPOD operations; • Deploying City of Los Angeles personnel to operate MPOD site(s) in accordance with site-specific plans; • Ensuring the presence of law enforcement at MPOD site(s) in accordance with site-specific plans; • Assisting with dispensing of preventative medications in accordance with procedures provided by LACDPH; and

	<p>In the case of a significant public health incident requiring the activation of public MPOD sites, EMD’s Public Health Liaison will be the primary point of contact between the City and LACDPH.</p>	<ul style="list-style-type: none"> • Communicating with LACDPH, the City of Los Angeles, and law enforcement emergency operations centers during MPOD operations in order to provide situational status reports.
<p>The Los Angeles County Department of Public Health (LACDPH)</p>	<p>LACDPH is the lead agency in coordinating City public health functions. The Los Angeles County Public Health Officer has broad powers to address both seasonal and pandemic influenza and/or other pandemic emergency.</p> <p>Under California law, a local health officer who believes a contagious, infectious or communicable disease exists within the territory under his or her jurisdiction <i>“shall take measures as may be necessary to prevent the spread of the disease or occurrence of additional cases”</i> and to protect the public’s health (California Health and Safety Code Section 120175).</p> <p><i>NOTE: The Cities of Pasadena and Long Beach each have their own health departments and are responsible for public health</i></p>	<ul style="list-style-type: none"> • Coordinating the provision of preventative MCM medications and instructions for their use; • Providing procedures and protocols for the mass dispensing of MCM medications; • Delivering preventative MCM medications to MPOD site(s); • Deploying LACDPH and other County personnel to operate MPOD site(s) under unified command as outlined in the City of Los Angeles Public MPOD Dispensing Plan; • Mass dispensing of preventative medications to the general population; and • Providing personal protective equipment (PPE) to all personnel deployed to operate MPOD sites under unified command.

	<i>functions and decisions in their jurisdictions.</i>	
<p>City of Los Angeles:</p> <ul style="list-style-type: none"> • Police (LAPD) • Department of Water and Power (DWP) • Department of Transportation (DOT) • Department of Water and Power (DPW) 	<p>City departments aside from EMD and RAP may be asked to assist in MPOD operations. This will primarily occur in relation to site security, crowd control, and traffic management.</p>	<ul style="list-style-type: none"> • Be prepared to assist LACDPH in providing non-clinical, security, traffic and crowd control at PODs. • Be prepared to assist LACDPH in providing trucks to transport vaccines and medical supplies to PODs and hospitals.

Attachment C: MPOD Personnel Requirements

Each public MPOD site will have designated personnel that will be notified in the event this Annex is activated. The table below details personnel needs at these sites:

Table 4: Medical Point of Dispensing (MPOD) Site Personnel Requirements

Position	Number of Personnel Required			Source of Personnel
City of Los Angeles MPOD Leader	1			EMD/RAP
Facility Support	Low <i>(1 dispensing operation)</i> 4-6	High <i>(2+ dispensing operations)</i> 8-12		RAP
Law Enforcement*	Low 2	Medium 6	High 10	LAPD
Construction Staff	1-2			RAP
Maintenance Staff	2-4			RAP

*Law enforcement personnel requirements will depend on specifics of the incident requiring MPOD site activation. For example, MPODs being utilized to dispense routine influenza vaccinations will likely require less law enforcement presence than a situation in which MPODs are opened in order to dispense medications to the population due to a biological attack.

If it is anticipated that additional LAPD personnel are required to staff the MPOD, the MPOD leader should notify the on-scene LAPD supervisor, if present, or initiate a request through LAPD Communications Division.

Attachment D: City of Los Angeles Public MPOD Sites

The table below lists every MPOD site in the City of Los Angeles. Detailed site plans for each MPOD have been developed and both hard and electronic copies are kept on-site at each location as well as in the main office at EMD.

Table 5: City of Los Angeles Public MPOD Sites

Number	Site Name
1	Algin Sutton
2	Alpine
3	Andreas and Maria Cardenas
4	Balboa
5	Baldwin Hills
6	Bellevue
7	Branford
8	Culver Saulson
9	Cabrillo Bath House
10	Cheviott Hills
11	Delano
12	Denker
13	E. Willmington
14	El Sereno
15	EXPO Alhmanson
16	Fernangeles
17	Fred Roberts
18	Glassell Park
19	Granada Hills
20	Green Meadows
21	Harvard
22	Highland Park
23	Jim Gilliam
24	Lafayette
25	Lake Street
26	Lake View Terrace
27	Lanark
28	Las Palmas
29	Mason
30	MLK
31	North Hollywood
32	Palisades
33	Pan Pacific

34	Peck
35	Poinsettia
36	Queen Anne
37	Ross Snyder
38	Sepulveda
39	Shatto
40	Sherman Oaks
41	Slauson
42	South LA Sports Activity Center
43	South Park (Barry White)
44	Stoner
45	Trinity
46	Van Ness
47	Westchester
48	Westwood
49	Wilmington
50	Yosemite