

Closed Point of Dispensing PLANNING TOOL

CPODs may vary in size, capability, and complexity. The following planning considerations may or may not be applicable to your organization.

Staffing

Medical CPODs

If your organization is hosting a medical CPOD, your plan may address:

- Staff qualified to administer vaccine
- Cold storage location with temperature monitoring to keep vaccine at manufacturer recommended temperature.
- Biohazard plan (how to dispose of used needles).

Medical personnel at non-medical CPODs

Non-medical CPODs are not *required* to have medical personnel available, however, it may be helpful to have on-site or available-by-phone medical personnel if medical consultations are needed, or if minor medical emergencies occur.

Do you have medical or occupational health personnel on staff? Yes No

CPOD Staff

CPODs are staffed by your organization's personnel. Here are some basic CPOD positions. More staff may be required for larger CPODs.

CPOD Job Position	Staff From (Worker's Safety, Human Resource, etc.)	Number of Staff Required Per Shift
CPOD Manager		
Screener		
Dispenser		
Inventory Manager		
Security		

Communication

Communication is important before, during, and after a public health emergency. Information will be available from your public health department and/or the Minnesota Department of Health (MDH).

Depending on the size of your organization, you may want to develop a communication plan (*For example, what method will you use to communicate with all of your employees and CPOD staff in the event of a CPOD activation?*).

Receiving and managing medications or vaccines

Depending on size and other factors, your organization's medications may be delivered directly or available for pick-up from a local distribution site. If CPODs are activated, your public health partner will provide you with the pick-up/delivery details (i.e. times, location, etc.).

Medication(s) must be stored in accordance with manufacturer instructions. A secure, dry space maintained at room temperature (68-77°F) will suffice. Vaccines must be refrigerated.

Location for secure storage of medications:

Delivery (if available)

Street Address

City

State

Zip Code

Dispensing site

Planning considerations for the dispensing site should include the size of room(s)/parking given the size of population. This may not be applicable for all organizations (for example, a long-term care facility dispensing medication room-by-room rather than centralized dispensing).

Very large CPODs should include characteristics of loading docks or receiving areas, including availability of pallet jacks and/or forklifts (plus staff qualified to operate).

Internet and printer/copier access is often useful at the dispensing site if additional forms or communication is required.

Floor plan and flow of traffic

Consider attaching the following flow charts or diagrams:

- Dispensing site(s) floor plan with table set up, including flow of people through CPOD
- Diagram of dispensing facility entrance/exit & parking lot with foot traffic flow

- Diagram of vehicle traffic flow with surrounding streets. Include bus lots, if applicable.

Note: Agencies are required to provide any needed support for staff members or clients with access or functional needs to ensure that all staff have access to needed medications and/or vaccines being distributed. More information on [access and functional needs planning](https://dps.mn.gov/divisions/hsem/access-functional-needs/Pages/default.aspx) can be found at on the HSEM website (dps.mn.gov/divisions/hsem/access-functional-needs/Pages/default.aspx).

Inventory management of medications

When the medications arrive, it is your organization's responsibility to track depletion of supplies. Notify Minnesota Department of Health promptly if you will need resupply of medications. Consider requesting a resupply when 1/3 of the initial supply remains, if remaining quantities will be insufficient.

Consider attaching an inventory management plan which includes how inventory will be managed (i.e. electronic spreadsheet, paper based system, etc.).

Security considerations

Depending on the nature of the public health emergency or dispensing site, it may be important to provide site security for the CPOD staff, employees, clients, and medications at the site.

Consider attaching a security plan which includes instructions for security personnel or CPOD staff to report unusual activities or emergencies.

Training resources

Organizations are welcome and encouraged to train and/or exercise potential CPOD staff prior to an emergency. There are many training resources available online for prior-to-incident or just-in-time training. Two websites that offer online training are the MDH website (health.state.mn.us) and the [Centers for Disease Control & Prevention \(CDC\) website](https://www.cdc.gov/orr/readiness/resources/healthcare/closedPODtoolkit.htm) (<https://www.cdc.gov/orr/readiness/resources/healthcare/closedPODtoolkit.htm>).

Demobilization

Once the public health emergency has ended, Minnesota Department of Health will communicate how and when unused medication may be returned. Medications should be stored securely and in accordance with manufacturer specifications until then (i.e. dry, room temperature, refrigerated) until demobilized.

Attachments

The following attachments are optional, scalable components of your CPOD plan. Your plan may have more/less attachments to fit your organization's needs.

CPOD Enrollment Form

Dispensing site information for additional dispensing sites

- CPOD staff
- Site information
- Storage location
- Security plans
- Floor plans and traffic flow diagrams

Security Plan

Medical POD attachment (details of staff, cold chain management, and biohazard disposal)

Communications Plan

Other: