

# Emerging Infectious Disease Guidance for EDS Planning

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## Participant Workbook



OFFICE OF  
PREPAREDNESS  
AND EMERGENCY  
MANAGEMENT

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# Emerging Infectious Disease Planning Guidance for Medical Counter Measures

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At the municipal level, local public health departments play a prominent role in the prevention and mitigation of, and response to, infectious disease threats. A successful response to an infectious disease emergency requires the implementation of evidence-based protocols and procedures by authorities. The Massachusetts Department of Public Health (MDPH) is the lead public health agency responsible for protecting and improving the public's health throughout the Commonwealth. In the event of an infectious disease emergency, known or emerging, MDPH will coordinate with partners at all levels of government and private sector to ensure a comprehensive and effective response.

Local Public Health has a deliverable for the Budget Period 1 Supplemental to incorporate Emerging Infectious Disease (EID) planning into Emergency Dispensing Plans (EDS). To support that deliverable the Office of Preparedness and Emergency Preparedness has developed a tool for planning considerations and associated resources intended to support discussions relative to EDS Plans and the dispensing of Medical Counter Measures for EID.

**Disclaimer:** Although there are a number of other considerations for EID, this workshop is focused solely on incorporating EID considerations into EDS Plans



# Surveillance

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Use the blank space to jot down examples of how you use each consideration in your current EDS Plan. Include examples.

1. What mechanism does your community utilize to monitor unusual infectious disease activity?

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2. How would your community notify municipal and/or state authorities of unusual infectious disease activity?

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3. What resources are available for questions about unusual disease activity?

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### List of Resources for Surveillance

- The Immunization Program sends out clinical advisories and associated guidance on an as needed basis. These advisories are typically first emailed to Massachusetts providers through a listserv service then posted to the website. If you have any questions about the content of these advisories, please contact the Division of Epidemiology and Immunization at (617) 983-6800. **See all alerts and advisories (S1)**
- MDPH Influenza Web Site: MDPH maintains an influenza web page ([www.mass.gov/flu](http://www.mass.gov/flu)), with a direct link from the MDPH home page. This web page has links to the CDC, is continually updated, and will be a primary source of information for providers and the public during a pandemic. **(S1 and S3)**

*A complete list of resources can be found on the last page of your Participant Workbook.*

## Risk Communication

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Use the blank space to jot down examples of how you use each consideration in your current EDS Plan. Include examples.

1. How will your community communicate prioritization strategies for vaccination use?

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2. What materials/methods will be used to communicate vaccine or medication availability and allocation?

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3. What resources are available for community members seeking additional information?

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### List of Resources for Risk Communication

- **Access for Infectious Disease fact Sheets:** <https://www.mass.gov/service-details/infectious-diseases-a-z> **(RC3)**
- MDPH Influenza Web Site: MDPH maintains an influenza web page ([www.mass.gov/flu](http://www.mass.gov/flu)), with a direct link from the MDPH home page. This web page has links to the CDC, is continually updated, and will be a primary source of information for providers and the public during a pandemic. **(RC2, RC3)**
- Before you administer each dose of certain vaccines, **you are required by law** to provide a copy of the most current **Vaccine Information Statement (VIS)** to either the adult vaccinee or to the child's parent/legal representative. VIS are developed by the CDC and discuss the benefits and risks associated with specific vaccines. You must also record in the patient's chart the date that the VIS was given and the publication date of the VIS. Current VISs are available on CDC's Vaccine Information Statements page. Translations in over 40 languages are available on the **Immunization Action Coalition's Vaccine Information Statements** website. **(RC3)**
- All public clinics will be listed on <http://flushot.healthmap.org/>. **(RC3)**
- **Risk Communication:** The Local Public Health Institute offers a free online basic training in [Emergency Risk Communication for Public Health Professionals](#) and advanced classroom training in [Emergency Risk Communication in Practice](#). The DelValle Institute for Emergency Preparedness offers free classroom training in [Emergency Risk Communication](#). **(RC1, RC2)**
- Advanced level PIO training is available through the [FEMA PIO training resources](#) **(RC2)**

*A complete list of resources can be found on the last page of your Participant Workbook.*



# Vaccine Management

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Use the blank space to jot down examples of how you use each consideration in your current EDS Plan. Include examples.

1. Cold chain storage capacity/plan

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2. Disposal of Medical waste

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3. Throughput plan

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4. Privacy considerations (privacy screens etc.)

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5. Staffing considerations

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### List of Resources for Vaccine Management

- Emergency Dispensing Sites (EDS) Guidance Document, October 2017: Emergency Dispensing Sites (EDS) (PDF 3.21 MB) NAPH (name, address and patient history) Medication Form & Algorithm-page 66 & 67 in document. **(VM 1)**
- The **Standards for Pediatric Immunization Practices** are recommended for use by all health professionals in the public and private sector who administer vaccines to or manage immunization services for infants and children. **(VM5)**
- The **Standards for Adult Immunization Practice** call on all healthcare professionals - whether they provide vaccinations or not - to take steps to help ensure that their adult patients are fully immunized. **(VM5)**
- The Immunization Program sends out clinical advisories and associated guidance on an as needed basis. These advisories are typically first emailed to Massachusetts providers through a listserv service then posted to the website. If you have any questions about the content of these advisories, please contact the Division of Epidemiology and Immunization at (617) 983-6800. **See all alerts and advisories (VM5)**
- **Vaccine Administration and Clinical Guidance**: This page reviews communication on vaccine decisions, vaccine administration, clinic protocols, provider resources, and model standing orders. **(VM1, VM3, VM4, VM5)**
- Bloodborne Pathogen Exposure Control Plan Template (DOLS) **Open DOCX file, 24.24 KB, for Bloodborne Pathogens Exposure Control Plan (DOCX 24.24 KB) (VM2)**

*A complete list of resources can be found on the last page of your Participant Workbook.*

# Personal Protective Equipment

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Use the blank space to jot down examples of how you use each consideration in your current EDS Plan. Include examples.

1. Does your community have a cache of PPE?

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2. Who determines the need for PPE during dispensing operations?

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3. Who in your community maintains the inventory of PPE?

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4. Does your community's EDS plan include training on PPE (JIT)?

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**List of Resources for PPE**

- Responsibilities of Local Infectious Disease Coordinator-Checklist **(PPE2)**
- Checklist for Use of Personal Protective Equipment (MDPH)-dated Nov 2005 **(PPE2)**

*A complete list of resources can be found on the last page of your Participant Workbook.*

## Behavioral Health

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Use the blank space to jot down examples of how you use each consideration in your current EDS Plan. Include examples.

1. Does your community's EDS plan have a listing of behavioral health resources available in your community?

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2. Has your community previously engaged in discussions with local behavioral health resources relative to EDS planning and the potential behavioral health needs associated with that plan?

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## Resources

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- EID Resources Document
- Responsibilities of Local Infectious Disease Coordinator-Checklist (PDF)
- Checklist for Use of Personal Protective Equipment
- Demobilization Check-Out (ICS 221) Form
- CDC Pandemic Influenza Planning Checklist

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF PREPAREDNESS AND EMERGENCY MANAGEMENT  
Emerging Infectious Disease Resources for Emergency Dispensing Sites (EDS)**

S=Surveillance RC = Risk Communication PPE = Personal Protective Equipment VM = Vaccine Management BH = Behavioral Health

EID Resource #	Planning Consideration	EID Resource Description and hyperlinks when available
1	VM1	Emergency Dispensing Sites (EDS) Guidance Document, October 2017: <a href="#">Emergency Dispensing Sites (EDS)</a> (PDF 3.21 MB)  NAPH (name, address and patient history) Medication Form & Algorithm (page 66 & 67 in document)
2	RC3	Infectious Disease fact Sheets: <a href="https://www.mass.gov/service-details/infectious-diseases-a-z">https://www.mass.gov/service-details/infectious-diseases-a-z</a>
3		The <a href="#">Epidemiology and Prevention of Vaccine-Preventable Diseases (aka the Pink Book)</a> provides physicians, nurses, nurse practitioners, physician assistants, pharmacists, and others with the most comprehensive information on routinely used vaccines and the diseases they prevent.
4	VM5	The <a href="#">Standards for Pediatric Immunization Practices</a> are recommended for use by all health professionals in the public and private sector who administer vaccines to or manage immunization services for infants and children.
5	VM5	The <a href="#">Standards for Adult Immunization Practice</a> call on all healthcare professionals - whether they provide vaccinations or not - to take steps to help ensure that their adult patients are fully immunized.
6	S1, VM5	The Immunization Program sends out clinical advisories and associated guidance on an as needed basis. These advisories are typically first emailed to Massachusetts providers through a listserv service then posted to the website. If you have any questions about the content of these advisories, please contact the Division of Epidemiology and Immunization at (617) 983-6800. <a href="#">See all alerts and advisories</a>



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EID Resource #	Planning Consideration	EID Resource Description and hyperlinks when available
7	VM1, VM3, VM4, VM5	<a href="#">Vaccine Administration and Clinical Guidance</a> : This page reviews communication on vaccine decisions, vaccine administration, clinic protocols, provider resources, and model standing orders
8		<p><b>Standing Orders:</b> Standing orders are written protocols, approved by a physician or other authorized practitioner, that authorize nurses, pharmacists or other health care personnel (where allowed by state law) to: Assess a patient’s need for vaccination and; Administer the vaccine without a clinician’s direct involvement with the individual patient at the time of the interaction</p> <p><a href="#">Here is a list of Model Standing Orders</a>, written either by the Massachusetts Department of Public Health or the Immunization Action Coalition.</p> <p>For general guidance on standing orders, refer to <a href="#">Using Standing Orders for Administering Vaccines: What You Should Know</a></p>
9	RC3	<p>Before you administer each dose of certain vaccines, <a href="#">you are required by law</a> to provide a copy of the most current <a href="#">Vaccine Information Statement (VIS)</a> to either the adult vaccinee or to the child’s parent/legal representative. VIS are developed by the CDC and discuss the benefits and risks associated with specific vaccines. You must also record in the patient’s chart the date that the VIS was given and the publication date of the VIS. Current VISs are available on CDC's Vaccine Information Statements page.</p> <p>Translations in over 40 languages are available on the <a href="#">Immunization Action Coalition's Vaccine Information Statements</a> website.</p>
10	S1, S3, RC2, RC3,	MDPH Influenza Web Site: MDPH maintains an influenza web page ( <a href="http://www.mass.gov/flu">www.mass.gov/flu</a> ), with a direct link from the MDPH home page. This web page has links to the CDC, is continually updated, and will be a primary source of information for providers and the public during a pandemic.

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EID Resource #	Planning Consideration	EID Resource Description and hyperlinks when available
11	RC3	All public clinics will be listed on <a href="http://flushot.healthmap.org/">http://flushot.healthmap.org/</a> .
12		<p><b>Show ME Tool</b> The booklet or app includes a series of pictograms designed to promote universal access to emergency dispensing site services. The pictograms represent the clinic stations as well as questions that staff may ask a client. This tool was developed to be used to aid in language identification and pictographic communication of screening and treatment concepts.</p> <p>Link to Show Me Tool website and free app information:  <a href="http://www.mass.gov/eohhs/gov/departments/dph/programs/emergency-prep/additional-access-needs/show-me.html">http://www.mass.gov/eohhs/gov/departments/dph/programs/emergency-prep/additional-access-needs/show-me.html</a></p>
13		All adverse events will be reported through the federal Vaccine Adverse Events Reporting System (VAERS). VAERS forms and instructions are available in the FDA Drug Bulletin, the Physician's Desk Reference, or by calling VAERS at 1-800-822-7967. Providers can also report adverse events on line by utilizing the VAERS web site at <a href="http://www.vaers.hhs.gov/">www.vaers.hhs.gov/</a> .

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF PREPAREDNESS AND EMERGENCY MANAGEMENT  
Emerging Infectious Disease Resources for Emergency Dispensing Sites (EDS)**

EID Resource #	Planning Consideration	EID Resource Description and hyperlinks when available
14		<p>List of Infectious Diseases Reportable by Law:</p> <p><b>Regulations and summary of recent amendments (2017)</b>  <a href="#">Open RTF file, 123.15 KB, for Summary of Reportable Diseases, Surveillance, and Isolation and Quarantine Requirements (includes disease-specific isolation and quarantine requirements) 2017</a> (RTF 123.15 KB)</p> <p><a href="#">Open RTF file, 39.09 KB, for Summary of Significant Amendments to 105 CMR 300.000: Reportable Diseases, Surveillance and Isolation and Quarantine Requirements</a>(RTF 39.09 KB)</p>
15	VM2	<p>Bloodborne Pathogen Exposure Control Plan Template (DOLS)  <a href="#">Open DOCX file, 24.24 KB, for Bloodborne Pathogens Exposure Control Plan</a> (DOCX 24.24 KB)</p>
16		<p><b>Legal considerations related to isolation and quarantine</b> Isolation and quarantine are used routinely in Massachusetts to control the spread of communicable diseases. Isolation refers to separating people who are ill from other people to prevent the spread of a communicable disease. Quarantine refers to separating and restricting the movement of people who have been exposed to a communicable disease and are not yet ill. This list is an online resource for those who are responsible for protecting the public health, including health care providers, public health nurses, health directors, school nurses, emergency medical technicians, etc.</p> <p>A. <a href="#">Helpful background documents</a>  B. <a href="#">Specific professional responsibilities or jurisdictional issues</a>  C. <a href="#">Isolation and quarantine case study examining fictitious mass exposure to an infectious agent</a>  D. <a href="#">Technical resources that include information about isolation and quarantine</a>  E. <a href="#">Examples of legal documents for use by municipal attorneys and local boards of health when ordering and enforcing isolation</a></p>

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
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Emerging Infectious Disease Resources for Emergency Dispensing Sites (EDS)**

EID Resource #	Planning Consideration	EID Resource Description and hyperlinks when available
17	PPE2	Responsibilities of Local Infectious Disease Coordinator-Checklist <i>(see actual document in Participant Workbook -no hyperlink)</i>
18	PPE2	Checklist for Use of Personal Protective Equipment (MDPH) dated Nov 2005 <i>(see actual document in Participant Workbook -no hyperlink)</i>
19		Demobilization Check-Out (ICS 221) Form <i>(see actual document in Participant Workbook -no hyperlink)</i>
20		CDC Pandemic Influenza Planning Checklist <i>(see actual document in Participant Workbook -no hyperlink)</i>
21	RC1, RC2	<p>Risk Communication Training: The Local Public Health Institute hosts a free online basic training in <a href="#">Emergency Risk Communication for Public Health Professionals</a> and advanced classroom training in <a href="#">Emergency Risk Communication in Practice</a></p> <p>The DelValle Institute for Emergency Preparedness offers free classroom training in <a href="#">Emergency Risk Communication</a> for allied health professionals</p>
22	RC2	Advanced level PIO training is available through the <a href="#">FEMA PIO training resources</a>

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF PREPAREDNESS AND EMERGENCY MANAGEMENT  
Emerging Infectious Disease Resources for Emergency Dispensing Sites (EDS)**

<b>EID Resource #</b>	<b>Planning Consideration</b>	<b>EID Resource Description and hyperlinks when available</b>
<b>23</b>	<b>S1, S2, S3</b>	<p>Information about infectious disease surveillance and reporting can be found at <a href="https://www.mass.gov/infectious-disease-surveillance-reporting-and-control">https://www.mass.gov/infectious-disease-surveillance-reporting-and-control</a></p> <p>The Local Public Health Institute hosts a free online training about MAVEN <a href="http://sites.bu.edu/masslocalinstitute/2011/06/08/massachusetts-virtual-epidemiologic-network-maven/">http://sites.bu.edu/masslocalinstitute/2011/06/08/massachusetts-virtual-epidemiologic-network-maven/</a></p>

ANNEX J2.

**Responsibilities of Local Infectious Disease Coordinator**

<b>CHECKLIST</b>	<b>PRE-EMERGENCY ACTIVITIES</b>
	Provide training in emergency response for all personnel who would be involved in responding to an infectious disease emergency. Training opportunities are available from MEMA at <a href="http://www.state.ma.us/mema/training/train.htm">www.state.ma.us/mema/training/train.htm</a> .
	Ensure that a local infectious disease plan is developed either as an annex or supplement to the community's existing All Hazards Emergency Operations Plan or as a stand-alone plan.
	Identify gaps in the local infrastructure and resources that, if not corrected in advance, may interfere with an effective response.
	Identify the number and location(s) of emergency medication dispensing/administration clinics necessary to meet treatment needs of entire population of the community.
	Develop a "marketing strategy" to inform key government officials, legislators, and various stakeholders of the need to address and resolve these gaps in advance of an infectious disease emergency.
	Coordinate planning activities with bordering jurisdictions and unique populations.
	Review and modify the plan as needed on a periodic basis, at least <b>annually</b> .
<b>CHECKLIST</b>	<b>NOVEL VIRUS OR EMERGING INFECTION ALERT ACTIVITIES</b>
	Meet with appropriate partners and stakeholders to review major elements of the plan.
	Modify the plan as needed on an urgent basis to address potential risk

<b>CHECKLIST</b>	<b>DURING AN EMERGENCY ACTIVITIES</b>
	Activate communications plan.
	Begin vaccine/pharmaceutical distribution if appropriate.
	Notify key government officials and legislators of the need for additional monetary resources (if not already available).
	Begin heightened surveillance at area hospitals and clinics. <b>Use Hospital and Clinic listed in Annex G1</b>
	Coordinate activities with neighboring jurisdictions
	Interface with appropriate counterparts at the State level.
<b>CHECKLIST</b>	<b>POST EMERGENCY ACTIVITIES</b>
	Review the response to the emergency.
	Identify what aspects the IDEP was inadequate in responding to the emergency.
	Amend the IDEP to reflect response lessons.

# CHECKLIST for Use of Personal Protective Equipment

## Massachusetts Department of Public Health

November 2005

<b>Assume you may be at risk</b>	<ul style="list-style-type: none"> <li>▪ Prior to your visit, collect as much information as possible</li> <li>▪ Use standard precautions with appropriate PPE regardless of a person's known infection status or diagnosis</li> </ul>
<b>Select appropriate PPE</b>	<ul style="list-style-type: none"> <li>▪ Consider:             <ul style="list-style-type: none"> <li><input type="checkbox"/> Type of exposure anticipated</li> <li><input type="checkbox"/> Client's diagnosis or suspected diagnosis</li> <li><input type="checkbox"/> Type of precaution needed</li> <li><input type="checkbox"/> Durability and appropriateness for the task</li> <li><input type="checkbox"/> Appropriate fit and size of PPE</li> </ul> </li> </ul>
<b>Always carry PPE with you on visits</b>	<ul style="list-style-type: none"> <li>▪ Basic items include:             <ul style="list-style-type: none"> <li><input type="checkbox"/> Hand sanitizer</li> <li><input type="checkbox"/> Gloves: Protect hands</li> <li><input type="checkbox"/> Gown: Protect skin and/or clothing</li> <li><input type="checkbox"/> Mask/respirator: Protect respiratory tract</li> <li><input type="checkbox"/> Goggles: Protect eyes</li> </ul> </li> </ul>
<b>Talk to your clients about PPE</b>	<ul style="list-style-type: none"> <li>▪ Before your visit, explain the reason for wearing PPE and the purpose of each piece</li> <li>▪ During your visit, help ensure your clients' confidentiality and dignity</li> </ul>
<b>Don appropriate PPE</b>	<ul style="list-style-type: none"> <li>▪ Consider where PPE will be donned</li> <li>▪ Follow the correct order for donning PPE:             <ol style="list-style-type: none"> <li>1. Gown (or apron/cover-all suit)</li> <li>2. Shoe and/or hair covers (when worn)</li> <li>3. Mask/Respirator</li> <li>4. Goggles (or face shield in lieu of mask and goggles)</li> <li>5. Gloves</li> </ol> </li> </ul>
<b>Remove PPE</b>	<ul style="list-style-type: none"> <li>▪ When finished with your visit, follow the correct order for removing PPE:             <ol style="list-style-type: none"> <li>1. Gloves</li> <li>2. Goggles (or face shield in lieu of mask and goggles)</li> <li>3. Gown (or apron/cover-all suit)</li> <li>4. Shoe and/or hair covers (when worn)</li> <li>5. Mask/Respirator</li> </ol> </li> </ul>
<b>Discard/disinfect PPE</b>	<ul style="list-style-type: none"> <li>▪ Discard disposable PPE, and disinfect reusable PPE</li> <li>▪ Dispose of PPE in a plastic bag and secure tightly to contain contaminated items</li> <li>▪ Disinfect client care items</li> </ul>





## DEMOBILIZATION CHECK-OUT (ICS 221)

<b>1. Incident Name:</b> _____		<b>2. Incident Number:</b> _____	
<b>3. Planned Release Date/Time:</b> Date: _____ Time: _____	<b>4. Resource or Personnel Released:</b> _____		<b>5. Order Request Number:</b> _____
<b>6. Resource or Personnel:</b> You and your resources are in the process of being released. Resources are not released until the checked boxes below have been signed off by the appropriate overhead and the Demobilization Unit Leader (or Planning Section representative).			
<b>LOGISTICS SECTION</b>			
	<b>Unit/Manager</b>	<b>Remarks</b>	<b>Name</b> <span style="float: right;"><b>Signature</b></span>
<input type="checkbox"/>	Supply Unit		
<input type="checkbox"/>	Communications Unit		
<input type="checkbox"/>	Facilities Unit		
<input type="checkbox"/>	Ground Support Unit		
<input type="checkbox"/>	Security Manager		
<input type="checkbox"/>			
<b>FINANCE/ADMINISTRATION SECTION</b>			
	<b>Unit/Leader</b>	<b>Remarks</b>	<b>Name</b> <span style="float: right;"><b>Signature</b></span>
<input type="checkbox"/>	Time Unit		
<input type="checkbox"/>			
<input type="checkbox"/>			
<b>OTHER SECTION/STAFF</b>			
	<b>Unit/Other</b>	<b>Remarks</b>	<b>Name</b> <span style="float: right;"><b>Signature</b></span>
<input type="checkbox"/>			
<input type="checkbox"/>			
<b>PLANNING SECTION</b>			
	<b>Unit/Leader</b>	<b>Remarks</b>	<b>Name</b> <span style="float: right;"><b>Signature</b></span>
<input type="checkbox"/>			
<input type="checkbox"/>	Documentation Leader		
<input type="checkbox"/>	Demobilization Leader		
<b>7. Remarks:</b>   			
<b>8. Travel Information:</b>			
Estimated Time of Departure: _____		Room Overnight: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Destination: _____		Actual Release Date/Time: _____	
Travel Method: _____		Estimated Time of Arrival: _____	
Manifest: <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Information While Traveling: _____	
Number: _____		Area/Agency/Region Notified: _____	
<b>9. Reassignment Information:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
Incident Name: _____		Incident Number: _____	
Location: _____		Order Request Number: _____	
<b>10. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____			
<b>ICS 221</b>		Date/Time: _____	

## ICS 221 Demobilization Check-Out

**Purpose.** The Demobilization Check-Out (ICS 221) ensures that resources checking out of the incident have completed all appropriate incident business, and provides the Planning Section information on resources released from the incident. Demobilization is a planned process and this form assists with that planning.

**Preparation.** The ICS 221 is initiated by the Planning Section, or a Demobilization Unit Leader if designated. The Demobilization Unit Leader completes the top portion of the form and checks the appropriate boxes in Block 6 that may need attention after the Resources Unit Leader has given written notification that the resource is no longer needed. The individual resource will have the appropriate overhead personnel sign off on any checked box(es) in Block 6 prior to release from the incident.

**Distribution.** After completion, the ICS 221 is returned to the Demobilization Unit Leader or the Planning Section. All completed original forms must be given to the Documentation Unit. Personnel may request to retain a copy of the ICS 221.

**Notes:**

- Members are not released until form is complete when all of the items checked in Block 6 have been signed off.
- If additional pages are needed for any form page, use a blank ICS 221 and repaginate as needed.

Block Number	Block Title	Instructions
1	<b>Incident Name</b>	Enter the name assigned to the incident.
2	<b>Incident Number</b>	Enter the number assigned to the incident.
3	<b>Planned Release Date/Time</b>	Enter the date (month/day/year) and time (using the 24-hour clock) of the planned release from the incident.
4	<b>Resource or Personnel Released</b>	Enter name of the individual or resource being released.
5	<b>Order Request Number</b>	Enter order request number (or agency demobilization number) of the individual or resource being released.
6	<b>Resource or Personnel</b> You and your resources are in the process of being released. Resources are not released until the checked boxes below have been signed off by the appropriate overhead and the Demobilization Unit Leader (or Planning Section representative). <ul style="list-style-type: none"> <li>• Unit/Leader/Manager/Other</li> <li>• Remarks</li> <li>• Name</li> <li>• Signature</li> </ul>	Resources are not released until the checked boxes below have been signed off by the appropriate overhead. Blank boxes are provided for any additional unit requirements as needed (e.g., Safety Officer, Agency Representative, etc.).
	<b>Logistics Section</b> <input type="checkbox"/> Supply Unit <input type="checkbox"/> Communications Unit <input type="checkbox"/> Facilities Unit <input type="checkbox"/> Ground Support Unit <input type="checkbox"/> Security Manager	The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out.  Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.

Block Number	Block Title	Instructions
<b>6</b> (continued)	<b>Finance/Administration Section</b> <input type="checkbox"/> Time Unit	The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out. Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.
	<b>Other Section/Staff</b> <input type="checkbox"/>	The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out. Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.
	<b>Planning Section</b> <input type="checkbox"/> Documentation Leader <input type="checkbox"/> Demobilization Leader	The Demobilization Unit Leader will enter an "X" in the box to the left of those Units requiring the resource to check out. Identified Unit Leaders or other overhead are to sign the appropriate line to indicate release.
<b>7</b>	<b>Remarks</b>	Enter any additional information pertaining to demobilization or release (e.g., transportation needed, destination, etc.). This section may also be used to indicate if a performance rating has been completed as required by the discipline or jurisdiction.
<b>8</b>	<b>Travel Information</b>	Enter the following travel information:
	Room Overnight	Use this section to enter whether or not the resource or personnel will be staying in a hotel overnight prior to returning home base and/or unit.
	Estimated Time of Departure	Use this section to enter the resource's or personnel's estimated time of departure (using the 24-hour clock).
	Actual Release Date/Time	Use this section to enter the resource's or personnel's actual release date (month/day/year) and time (using the 24-hour clock).
	Destination	Use this section to enter the resource's or personnel's destination.
	Estimated Time of Arrival	Use this section to enter the resource's or personnel's estimated time of arrival (using the 24-hour clock) at the destination.
	Travel Method	Use this section to enter the resource's or personnel's travel method (e.g., POV, air, etc.).
	Contact Information While Traveling	Use this section to enter the resource's or personnel's contact information while traveling (e.g., cell phone, radio frequency, etc.).
	Manifest <input type="checkbox"/> Yes <input type="checkbox"/> No Number	Use this section to enter whether or not the resource or personnel has a manifest. If they do, indicate the manifest number.
	Area/Agency/Region Notified	Use this section to enter the area, agency, and/or region that was notified of the resource's travel. List the name (first initial and last name) of the individual notified and the date (month/day/year) he or she was notified.
<b>9</b>	<b>Reassignment Information</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Enter whether or not the resource or personnel was reassigned to another incident. If the resource or personnel was reassigned, complete the section below.
	Incident Name	Use this section to enter the name of the new incident to which the resource was reassigned.
	Incident Number	Use this section to enter the number of the new incident to which the resource was reassigned.
	Location	Use this section to enter the location (city and State) of the new incident to which the resource was reassigned.
	Order Request Number	Use this section to enter the new order request number assigned to the resource or personnel.

Block Number	Block Title	Instructions
10	<b>Prepared by</b> <ul style="list-style-type: none"><li>• Name</li><li>• Position/Title</li><li>• Signature</li><li>• Date/Time</li></ul>	Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (using the 24-hour clock).

# BUSINESS PANDEMIC INFLUENZA PLANNING CHECKLIST



In the event of pandemic influenza, businesses will play a key role in protecting employees' health and safety as well as limiting the negative impact to the economy and society. Planning for pandemic influenza is critical. To assist you in your efforts, the Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist for large businesses. It identifies important, specific activities large businesses can do now to prepare, many of which will also help you in other emergencies. Further information can be found at [www.pandemicflu.gov](http://www.pandemicflu.gov) and [www.cdc.gov/business](http://www.cdc.gov/business).

## 1.1 Plan for the impact of a pandemic on your business:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify a pandemic coordinator and/or team with defined roles and responsibilities for preparedness and response planning. The planning process should include input from labor representatives.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify essential employees and other critical inputs (e.g. raw materials, suppliers, sub-contractor services/ products, and logistics) required to maintain business operations by location and function during a pandemic.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Train and prepare ancillary workforce (e.g. contractors, employees in other job titles/descriptions, retirees).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and plan for scenarios likely to result in an increase or decrease in demand for your products and/or services during a pandemic (e.g. effect of restriction on mass gatherings, need for hygiene supplies).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Determine potential impact of a pandemic on company business financials using multiple possible scenarios that affect different product lines and/or production sites.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Determine potential impact of a pandemic on business-related domestic and international travel (e.g. quarantines, border closures).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Find up-to-date, reliable pandemic information from community public health, emergency management, and other sources and make sustainable links.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish an emergency communications plan and revise periodically. This plan includes identification of key contacts (with back-ups), chain of communications (including suppliers and customers), and processes for tracking and communicating business and employee status.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Implement an exercise/drill to test your plan, and revise periodically.

## 1.2 Plan for the impact of a pandemic on your employees and customers:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Forecast and allow for employee absences during a pandemic due to factors such as personal illness, family member illness, community containment measures and quarantines, school and/or business closures, and public transportation closures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Implement guidelines to modify the frequency and type of face-to-face contact (e.g. hand-shaking, seating in meetings, office layout, shared workstations) among employees and between employees and customers (refer to CDC recommendations).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Encourage and track annual influenza vaccination for employees.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evaluate employee access to and availability of healthcare services during a pandemic, and improve services as needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evaluate employee access to and availability of mental health and social services during a pandemic, including corporate, community, and faith-based resources, and improve services as needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify employees and key customers with special needs, and incorporate the requirements of such persons into your preparedness plan.

### 1.3 Establish policies to be implemented during a pandemic:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for employee compensation and sick-leave absences unique to a pandemic (e.g. non-punitive, liberal leave), including policies on when a previously ill person is no longer infectious and can return to work after illness.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for flexible worksite (e.g. telecommuting) and flexible work hours (e.g. staggered shifts).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for preventing influenza spread at the worksite (e.g. promoting respiratory hygiene/cough etiquette, and prompt exclusion of people with influenza symptoms).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for employees who have been exposed to pandemic influenza, are suspected to be ill, or become ill at the worksite (e.g. infection control response, immediate mandatory sick leave).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for restricting travel to affected geographic areas (consider both domestic and international sites), evacuating employees working in or near an affected area when an outbreak begins, and guidance for employees returning from affected areas (refer to CDC travel recommendations).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Set up authorities, triggers, and procedures for activating and terminating the company's response plan, altering business operations (e.g. shutting down operations in affected areas), and transferring business knowledge to key employees.

### 1.4 Allocate resources to protect your employees and customers during a pandemic:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide sufficient and accessible infection control supplies (e.g. hand-hygiene products, tissues and receptacles for their disposal) in all business locations.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enhance communications and information technology infrastructures as needed to support employee telecommuting and remote customer access.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure availability of medical consultation and advice for emergency response.

### 1.5 Communicate to and educate your employees:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and disseminate programs and materials covering pandemic fundamentals (e.g. signs and symptoms of influenza, modes of transmission), personal and family protection and response strategies (e.g. hand hygiene, coughing/sneezing etiquette, contingency plans).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anticipate employee fear and anxiety, rumors and misinformation and plan communications accordingly.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure that communications are culturally and linguistically appropriate.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information to employees about your pandemic preparedness and response plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide information for the at-home care of ill employees and family members.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop platforms (e.g. hotlines, dedicated websites) for communicating pandemic status and actions to employees, vendors, suppliers, and customers inside and outside the worksite in a consistent and timely way, including redundancies in the emergency contact system.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify community sources for timely and accurate pandemic information (domestic and international) and resources for obtaining counter-measures (e.g. vaccines and antivirals).

### 1.6 Coordinate with external organizations and help your community:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Collaborate with insurers, health plans, and major local healthcare facilities to share your pandemic plans and understand their capabilities and plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Collaborate with federal, state, and local public health agencies and/or emergency responders to participate in their planning processes, share your pandemic plans, and understand their capabilities and plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communicate with local and/or state public health agencies and/or emergency responders about the assets and/or services your business could contribute to the community.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Share best practices with other businesses in your communities, chambers of commerce, and associations to improve community response efforts.