

**Public Health-Seattle & King County
Pandemic Influenza Response Plan**

Attachment 2

**Protocol for Antiviral Cache Distribution, Dispensing and Monitoring
During an Influenza Pandemic**

Introduction

Supplies of antiviral medications currently stockpiled by PHSKC and received via the Strategic National Stockpile (SNS) will be utilized to treat ill patients symptomatic for influenza. Antiviral medications will be distributed in a manner consistent with guidance provided by the Centers for Disease Control (CDC).

This protocol incorporates guidance provided by CDC to estimate the number of hospitalized patients, and percentages of ill healthcare workers, first responders, and the general public that will become ill during a pandemic wave. Specific data have been collected and incorporated into Tab 1 to this Attachment regarding the overall number of potential healthcare workers, first responders and the general public in King County that could require antiviral treatment. Specific allocations for priority groups are also defined in Tab 1.

Goals

1. Ensure antiviral medications are available to hospitalized patients, healthcare workers, and patients with valid prescriptions for flu-like illness.
2. Establish efficient management, distribution and tracking of regional antiviral resources throughout a pandemic wave.
3. Ensure King County healthcare organizations understand the allocation strategy for locally stockpiled medical resources in King County and the protocols associated with healthcare organizations receiving locally stockpiled medical supplies.

Assumptions

1. A limited amount of commercially available antiviral medications exists in King County, heightening the need for plans to distribute locally stockpiled antiviral medications.
2. Distribution of locally stockpiled antiviral medications to healthcare organizations may occur prior to significant levels of disease occurring in King County.
3. Healthcare facilities that dispense locally stockpiled antiviral medications will do so without charging the patient for the medication.

4. Facilities will likely receive a portion of their allocation amount, and then be resupplied when resources drop below minimum levels.
5. Allocation amounts determined for each facility may be increased by the ESF 8 Area Command during a pandemic event if warranted based on case volume.
6. During a pandemic event that involves mobilization of the entire local stockpile of antiviral medications, facilities should assume that they will receive their full allocation amount as defined in Tab 1.

Policies

1. The ESF 8 Area Command and all healthcare organizations in King County will implement policy direction established by the Local Health Officer (LHO) regarding distribution and dispensing of antiviral medications during an influenza pandemic.
2. Medical resources received in King County from the SNS become the property and responsibility of Public Health – Seattle & King County (PHSKC). These resources will be incorporated into the local stockpile of medical supplies and equipment managed by the ESF 8 Area Command.
3. Allocation determinations for hospitals in King County are based on CDC guidance for anticipated attack rates among staff, and patient volumes based on CDC models.
4. Allocation determinations for EMS workers are based on CDC guidance for anticipated attack rates among staff.
5. Allocation determinations for ambulatory care centers, Alternate Care Facilities (ACF) and pharmacies are based on CDC guidance for anticipated attack rates among staff, and estimated patient volumes determined by PHSKC.
6. The LHO may alter this strategy as an influenza pandemic evolves by adjusting allocation amounts, incorporating outbreak prophylaxis for specific environments (jail, nursing homes), or making any other changes necessary to meet the needs of the event.
7. PHSKC will ensure that antiviral distribution strategies account for priority group persons who are traditionally vulnerable such as persons with limited English proficiency, immigrant populations, and those who are isolated and impoverished.
8. Depending on the severity of the pandemic strain, PHSKC may insist that healthcare providers participating in this protocol utilize local cache supplies of antiviral medications only to fill valid prescriptions, or in concurrence with a collaborative drug therapy agreement. During a moderate or severe pandemic, state and local health officials will assess the feasibility of requiring symptomatic patients to obtain a prescription prior to receiving antiviral medications.

Concept of Operations

Upon the World Health Organization declaring a Phase 4 influenza pandemic, the ESF 8 Area Command will begin distributing antiviral stockpiles to one or more healthcare facilities as described below (“First Push”). Specific distribution amounts to each facility and sector are described in Tab 1 to this Attachment. Tab 1 serves as a template and will be modified when a pandemic emerges to match the unique characteristics of the current threat.

ESF 8 Area Command will determine the need for mobilizing “First Push” resources to hospitals, outpatient clinics, commercial pharmacies and EMS agencies based on:

- Requests from healthcare facilities with dispensing capabilities
- Availability of antiviral supplies in healthcare facilities and commercial pharmacies
- High patient volumes experienced or projected by in- and out-patient facilities and EMS providers
- ESF 8 Area Command contacting healthcare organizations and assessing their willingness and ability to receive locally stockpiled antiviral medications.

Hospital Antiviral Distribution

1. Upon mobilizing “First Push” resources, the ESF 8 Area Command (Logistics) will allocate to all hospitals in King County 20% of their designated antiviral supplies for staff and patients as identified in Tab 1. Hospitals may ask to receive less than 20% of their allotment based on storage limitations, yet Area Command will not ship less than 10% of total allocation amount.
2. ESF 8 Area Command (Planning - Resource Status) will establish minimum thresholds for hospital antiviral supplies of 10% of total allocation. When supplies at any given facility drop below the 10% threshold, Logistics will resupply in 20% increments.
3. If a hospital receives and dispenses its entire allotment of locally stockpiled antiviral resources, the Area Command will assess the availability of additional supplies within the local stockpile and distribute to hospitals in need as possible.

“Community” Antiviral Distribution Centers

1. ESF 8 Area Command will designate a minimum of six community outpatient clinic sites with internal dispensing capability, preferably at least two in each Emergency Management Zone. The locations of these sites will be communicated by Public Health to healthcare providers across King County. These sites will fill valid prescriptions for antiviral medications free of charge to individuals who are uninsured and do not have the ability to pay for the medications.

2. Upon mobilizing “First Push” resources, the ESF 8 Area Command (Logistics) will provide 100 courses of adult antiviral medications to each community antiviral distribution site. When supplies at any given facility drop below 10 courses, Logistics will resupply in 100 course increments.

Tribal Clinics

1. Upon mobilizing “First Push” resources, the ESF 8 Area Command (Logistics) will provide 100 courses of adult antiviral medications to each Tribal Clinic.
2. When supplies at any Tribal Clinic facility drop below 10 courses, Logistics will resupply in 100 course increments, or until the maximum allocation is reached.

Outpatient Clinics Antiviral Distribution

1. ESF 8 Area Command will distribute antiviral medications to outpatient clinics (in addition to Safety Net sites determined by the Area Command) if commercially available supplies are exhausted and Safety Net sites are experiencing extreme patient volumes. ESF 8 Area Command (Logistics) will provide all outpatient clinics with dispensing capability identified in Tab 1 that are willing and able to receive and dispense locally stockpiled supplies with 100 courses of adult antiviral medications. When supplies at any given outpatient facility drop below 10 courses, Logistics will resupply in 100 course increments.
2. Specialty care clinics will receive antiviral allocations for ill staff members (100% of their staff allocation) upon requesting these resources from Area Command if commercially available supplies are exhausted.

First Responder Antiviral Distribution

1. Dispensing targets for first responder antiviral allocations include eligible local EMS (public and private), fire, law enforcement, corrections, 911 dispatch, mortuary, blood center and designated mental health response staff. This target population may be restricted by the Local Health Officer during pandemics of low severity to EMS workers who provide direct patient contact.
2. Upon mobilizing “First Push” resources, the ESF 8 Area Command (Logistics) will provide 50% of the overall First Responder antiviral allocation to Advanced Life Support providers in King County according to the PHSKC EMS Antiviral Distribution Plan, August 2009.
3. When supplies for any given EMS provider drop below 10 courses, Logistics will resupply that provider with their remaining allocation.

Long Term Care Facilities and Nursing Homes

The ESF 8 Area Command will coordinate with Long Term Care Facilities, Nursing Homes and Adult Care Facilities throughout a pandemic wave to assess their need for antiviral medications. Individual facilities may receive authorization by the Area Command to pick up antiviral medications at the nearest ACF or PHSKC Distribution Center for ill staff and residents.

Commercial Pharmacy Antiviral Distribution

1. Following activation of the First Push Plan, the Area Commander will determine whether commercial pharmacies should receive and dispense local stockpiles of antiviral medications based upon:
 - a. availability of antiviral medications in the commercial pharmacy system and anticipated resupply dates
 - b. demand for antiviral medications from safety net sites
 - c. requests from pharmacy chains for additional supplies
2. The number of pharmacies that receive local supplies of antiviral medications and the amount they receive will depend upon anticipated patient volumes and will be decided during the response.
3. Participating pharmacies will initially receive 100 courses of treatment from the ESF 8 Area Command for pharmacy staff and eligible patients.
4. ESF 8 Area Command will coordinate with pharmacies and medical suppliers to continually assess the status and availability of antiviral supplies through the supply chain in King County. The allocation of local cache supplies of antiviral medications to pharmacies will depend, in part, on the interest and ability of the pharmacy to participate in this protocol, current supplies on hand, and the degree to which commercially available supplies in the short and long term will be constrained.

Alternate Care Facilities

ESF 8 Area Command will provide an allocation of antiviral supplies to each ACF immediately upon activation of the facility. ACFs will dispense antiviral medications to all eligible, symptomatic patients (general public) and all eligible ACF workers. Each ACF will be allocated an initial supply for patients and staff as identified in Tab 1. ESF 8 Area Command (Logistics) will resupply each ACF as needed based on patient volumes.

Inventory Monitoring

ESF 8 Area Command (Planning – Resource Status) will develop and distribute inventory monitoring tools to all facilities receiving antiviral supplies from PHSKC. All facilities will document the usage of antiviral medications and remaining inventories, and provide such reports to ESF 8 Area Command at regular intervals determined at the time of the event. Inventory reporting will be maintained throughout the duration of the pandemic and suspended only when all unused medications are returned to PHSKC. This does not preclude ESF 8 Area Command from adjusting the frequency or conditions that would warrant continued submission of inventory reports.