

**AGENDA**  
City of Los Angeles  
EMERGENCY OPERATIONS BOARD

**REGULAR MEETING**

Monday, May 17, 2010  
1:30 P.M.

Media Center Conference Room  
Emergency Operations Center  
500 E. Temple Street, Los Angeles, CA 90012

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Members of the public are invited to address the Emergency Operations Board on any item on the agenda prior to action by the Board on that specific item. Members of the public may also address the Board on any matter within the subject matter jurisdiction of the Board. The Board will entertain such comments during the Public Comment Period. Public comment will be limited to two (2) minutes per individual for each item addressed, unless there are more than ten (10) comment cards for each item, in which case the public comment will be limited to one (1) minute per individual. The aforementioned limitation may be waived by the Chair of the Board.

*(NOTE: Pursuant to Government Code Section 54954.3(b) the legislative body of a local agency may adopt reasonable regulations, including, but not limited to, regulations limiting the total amount of time allocated for public testimony on particular issues and for each individual speaker.)*

Members of the public who wish to address the Board are urged to complete a Speaker Card and submit it to the Executive Assistant prior to commencement of the public meeting. The cards are available at the sign in table at the meeting or the Emergency Management Department public counter, Room 1533, City Hall. However, should a member of the public feel the need to address a matter while the meeting is in progress, a card may be obtained from the Executive Assistant to the Board, who will submit the completed card to the Chair of the Board prior to final consideration of the matter.

It is requested that individuals who require the services of a translator contact the Board Secretary no later than the day preceding the meeting. Whenever possible, a translator will be provided.

Sign language interpreters, assistive listening devices, or other auxiliary aids and/or services may be provided upon request. To ensure availability, you are advised to make your request at least 72 hours prior to the meeting you wish to attend.

NOTE: The meeting is tape-recorded and the tape is kept for 30 days.

I. Declaration of Quorum; Introductions; Approval of Minutes

II. Action Item

- A. 2009-2010 H1N1 Vaccination Program Event Summary and Corrective Action Plan  
– Steve Dargan

Recommendation

That the Emergency Operations Board, as recommended by the Emergency Management Committee, approve and forward to the Mayor for transmittal to the City Council, the 2009-2010 H1N1 Vaccination Program Event Summary and Corrective Action Plan.

III. Information Items

- A. Joint City and County of Los Angeles Meeting – Anna Burton  
B. Other Announcement – Board Members

IV. Presentations (as requested)

V. Public Comment Period

VI. Adjournment

*Upon request, sign language interpretation, real-time translation services, agenda materials in alternative formats, and other accommodations are available to the public for City-sponsored meetings and events. All requests for reasonable accommodations must be made at least three working days (72-hours) in advance of the scheduled meeting date. For additional information, contact the Emergency Management Department at (213) 485-2121.*

**CITY OF LOS ANGELES**  
INTER-DEPARTMENTAL CORRESPONDENCE



Date: May 10, 2010

To: Charlie Beck, Chair  
Emergency Operations Board  
  
Emergency Operations Board Members

From: Anna Burton, Executive Assistant  
Emergency Operations Board

Subject: **2009-2010 H1N1 VACCINATION PROGRAM EVENT SUMMARY AND CORRECTIVE ACTION PLAN**

Recommendation

That the Emergency Operations Board, as recommended by the Emergency Management Committee, approve and forward to the Mayor for transmittal to the City Council, the 2009-2010 H1N1 Vaccination Program Event Summary and Corrective Action Plan.

Executive Summary

The 2009-2010 H1N1 Vaccination Program was a combined effort of the City of Los Angeles and the Los Angeles County Department of Public Health to provide H1N1 vaccinations to the public using Points of Dispensing (PODs). Over the course of 12 weeks 72,261 vaccinations were provided through City of Los Angeles facilities.

The Event Summary and Corrective Actions Plan provide detailed background on the program and corrective actions that will be incorporated into future planning. The Summary was approved by the Emergency Management Committee at its May 5, 2010 meeting with the recommendation to forward to the Emergency Operation Board.

Attachment:

- 2009-2010 H1N1 Vaccination Program Event Summary and Corrective Action Plan



# **EVENT SUMMARY**

**&**

# **CORRECTIVE ACTION PLAN**

**H1N1 POINTS OF DISPENSING**

**VACCINATION PROGRAM**

**October 23 – December 20, 2009**

FINAL DRAFT, 4-22-10

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## **I. EXECUTIVE SUMMARY**

### **A. Statement of Purpose**

Emergency management and homeland security practices involve a cycle of planning, preparedness, response, recovery, and mitigation. In the City of Los Angeles, the Emergency Management Department (EMD) is responsible for coordinating these activities on behalf of all City departments and bureaus. This Event Summary (ES) is intended to assess the 2009 H1N1 Vaccination Program and identify practices to sustain and practices that require corrective action. The Improvement Plan included herein prescribes corrective actions that will enhance the City's processes and capabilities to effectively and efficiently prepare for and respond to a similar event.

This ES should be viewed as an evaluation of and suggestions for improving the effectiveness of future public health emergencies. Recommended corrective actions identify steps to be taken and assign specific City agencies to coordinate and implement each item. Timetables are also established for implementation along with an assessment of required resources. Agencies must weigh the cost of implementation against the benefits in determining resource allocation. In some cases, agencies may determine the benefits of implementation are insufficient to outweigh the costs. In other cases, agencies may identify alternative solutions that are more effective. Each agency should review the recommendations and determine the most appropriate action and time needed for implementation.

### **B. Event Name**

H1N1 Points of Dispensing (POD) Vaccination Program

### **C. Event Dates**

Planning Effort Start: August 01, 2009

POD Vaccination Program Start: October 23, 2009

POD Vaccination Program End: December 20, 2009

### **D. Event Type**

Mass Prophylaxis Vaccination Program

### **E. Lead Agency**

Emergency Management Department

### **F. Event Summary/Improvement Plan Completed By**

Steve Dargan, Public Health Planner

Devra Schwartz, Emergency Preparedness Coordinator I

## **G. Participating Agencies**

1. Overall Coordination and Leadership
  - Emergency Management Department (EMD)
  
2. Departments Providing Staffing, Facilities or Technical Support
  - Office of the City Attorney Carmen Trutanich
  - Community Development Department (CDD)
  - General Services Department Office of Public Safety (GSD-OPS)
  - Emergency Management Department (EMD)
  - Harbor Department
  - Personnel Department – Medical Services Division
  - Recreation and Parks Department (RAP)
  - Police Department (LAPD)
  
3. Departments Providing Planning Assistance or Volunteer Recruitment
  - The Office of Mayor Antonio Villaraigosa
  - City Administrative Office
  - Council District 1: Office of Ed Reyes
  - Council District 2: Office of Paul Krekorian
  - Council District 3: Office of Dennis Zine
  - Council District 4: Office of Tom LaBonge
  - Council District 5: Office of Paul Koretz
  - Council District 6: Office of Tony Cardenas
  - Council District 7: Office of Richard Alarcon
  - Council District 8: Office of Bernard Parks
  - Council District 9: Office of Jan Perry
  - Council District 10: Office of Herb Wesson
  - Council District 11: Office of Bill Rosendahl
  - Council District 12: Office of Greig Smith
  - Council District 13: Office of Eric Garcetti
  - Council District 14: Office of Jose Huizar
  - Council District 15: Office of Janice Hahn
  - Department of Building and Safety
  - Department on Disability
  - Department of Neighborhood Empowerment (DONE)
  - Department of Transportation
  - Finance Department
  - General Services Department (GSD)
  - Human Services Department
  - Information Technology Agency
  - Office of the Chief Legislative Analyst



#### 4. Community Groups Providing Volunteers

- Canoga Park Neighborhood Council
- Collective SPACE
- Community Organization Network
- Community Outreach Promoting Emergency (COPE) Preparedness
- Empowerment Congress Southeast
- Encino Chamber of Commerce
- Encino Neighborhood Council
- Evening of Community Safety Network
- Gay for Good
- LAFD Community Emergency Response Team (CERT)
- Lutheran Social Services of the Southwest
- People Who Care (PWC)
- Providence Holy Cross Medical Center – Mission Hills
- Providence St. Joseph Medical Center – Burbank
- Tzu Chi
- University of California Los Angeles, Volunteer Center
- University of California Los Angeles, Campus Red Cross
- University of Southern California, School of Public Health
- West Hills Neighborhood Council
- Wilmington Neighborhood Council
- Woodland Hills Neighborhood Council
- Young Latino Democrats of the San Fernando Valley

#### H. **LACDPH/Center for Disease Control Evaluation**

A 2009 H1N1 Influenza Point of Dispensing (POD) Exercise was sponsored by Los Angeles County Department of Public Health (LACDPH) in order to evaluate a select few facilities identified by LACDPH. The Panorama Recreation Center H1N1 Vaccination POD on November 14, 2009, was the only site selected to be a part of the Exercise. *Although it was identified as an “Exercise”, it was in fact, a real-life event with no simulations.*

An “Evaluator Handbook” was produced with input, advice, and assistance from influenza POD planning group members, comprised of LACDPH, EMD, and exercise consultants. Evaluation of the event followed the guidance set forth from the U.S. Centers for Disease Control and Prevention (CDC) and the U.S. Federal Emergency Management Agency (FEMA) Homeland Security Exercise and Evaluation Program (HSEEP).

The “Exercise” served as an opportunity to test the POD model while providing a vital real-world service to the general population. The “Exercise” was designed to establish a learning

environment for players (POD staff) to exercise systems, plans, policies, and procedures as they pertain to POD operations.

LACDPH selected objectives that focused on evaluating emergency response procedures, identifying areas for improvement, and achieving a collaborative approach. This program was designed to provide LACDPH and their support partners with an opportunity to:

- Build on partnerships with local governments through utilization of the Incident Command System (ICS) and Unified Command for influenza POD operations.
- Provide real-world mass prophylaxis experience using the POD model.
- Provide opportunities to receive H1N1 influenza vaccine to the general population.
- Evaluate the execution of a POD model.
- (Quantitatively) Evaluate POD setup and throughput using grant required CDC metrics.
- (Qualitatively) Evaluate mass prophylaxis and Incident Command capabilities using HSEEP Exercise Evaluation Guides (EEG).
- Evaluate improvements and modifications made to the POD model and POD planning resources for validation and enhancement.

Points of contact for the “Exercise” were:

- Steve Dargan, LACDPH/City of Los Angeles EMD
- Catherine Knox RN, MSN, PHN, LACDPH Community Health Services
- Michelle Constant, Constant and Associates, Inc

An After Action Report (AAR) and Improvement Plan (IP) were completed and reported to the Center for Disease Control. This AAR/IP was designated as “Public Safety Sensitive” and is not included in the Event Summary.

## **I. Responsibilities**

The H1N1 PODs were a combined effort of the LACDPH and the City of Los Angeles.

The City of Los Angeles was responsible for providing:

- Site-specific POD Event Actions Plans (EAPs).
- A POD Manager to serve as the Incident Commander or in Unified Command with LACDPH;
- A POD Coordinator who was responsible for coordinating volunteer staffing at a specific POD location, and advertising the POD to their communities;
- Facilities;
- Logistical support, including but not limited to renting tables and chairs;
- Internal and external security;
- Traffic control;
- Non-clinical and support staff and volunteers.

The LACDPH was responsible for providing:

- A clinical Manager who worked in a Unified Command with the City POD Manager;
- An Organizational Chart;
- Clinical staff to screen and evaluate clients and administer vaccinations;
- Feeding and watering of all POD staff;
- Signage, both interior and exterior;
- Forms and information material related to the H1N1 vaccination program;
- Non-clinical supplies to sustain client participation (e.g. pens, clipboards, etc.);
- Incident command vests and internal communications equipment.
- Media announcements on location and time of PODs.

## **J. Objectives**

### **1. Management Objectives**

- To establish a Unified Command with LACDPH.
- To contact facility representatives and review non-POD activities.
- To receive guidance on unique features about the facility.
- To review facility details, maps, floor plan, photos, general safety information.
- To review the locations of fire alarms and extinguishers and emergency exits.
- To provide a secure environment for clients and staff
- To provide security through LAPD, GSD-OPS and private security.
- To adjust non-clinical staff if positions are unfilled due to staff absences.

### **2. Control Objectives**

- To closely monitor each site and adjust staffing as necessary.
- To facilitate the movement of traffic around each pod.
- To deploy sufficient staff to meet the pod demands.
- To deploy security at each site.

## **II. THREAT**

### **A. Influenza A Virus, Subtype H1N1**

Influenza A Virus Subtype H1N1 is the most common cause of influenza (flu) in humans. Some strains of H1N1 are endemic in humans, including the strain(s) responsible for the 1918 flu pandemic which killed 50 - 100 million people worldwide. Less virulent H1N1 strains exist today, worldwide, causing influenza-like illness (ILI) and a large fraction of all seasonal influenza. H1N1 strains caused roughly half of all flu infections in 2006. Other strains of H1N1 are endemic in swine and in birds.

Minor outbreaks of swine influenza have occurred in humans in 1976 and 1988 and in swine in 1998 and 2007. In the 2009 H1N1 outbreak, the virus isolated from patients in the United States was found to be made up of genetic elements from four different flu viruses – North American Mexican Influenza, North American Avian Influenza, human influenza, and swine influenza. On April 30, 2009 the World Health Organization (WHO) began referring to the outbreak as “Influenza A” instead of “swine flu” and later began referring to it as “Influenza A (H1N1)”.

## **B. Event Timeline**

### February-March, 2009

Individual cases of a novel virus are identified in Southern California. This was later identified as the H1N1 virus.

### April 26, 2009

U.S. Department of Homeland Security declares a **National Public Health Emergency**.

### June 11, 2009

World Health Organization declares a **Phase 6 Pandemic** for the H1N1 virus.

### April 28, 2009

Los Angeles County Department of Public Health Officer Jonathan Fielding, M.D. declared a **Local Public Health Emergency**.

### May, 2009

H1N1 virus was sequenced by the Canada’s National Microbiology Laboratory. Once verified by the CDC, production of a vaccine began with a delivery date of the first batch scheduled for October, 2009.

### June 11, 2009

World Health Organization declared a **Phase 6 Pandemic** for the H1N1 virus.

### July 30, 2009

CDC released the Initial Target Groups for Pandemic H1N1 Influenza vaccine, which included Pregnant Women, Household Contacts of Infants < 6 months, Healthcare Workers & EMS Workers, 6 Month – 24 Year Olds, Non-Elderly Adults (19-64) with Chronic Disease (heart, lung, liver & kidney disease, diabetes, immune-suppressed).

### August 1, 2009

Los Angeles County Department of Public Health begins planning for a County-wide H1N1 immunization program.

### October 23, 2009

H1N1 Vaccination Program begins in Los Angeles County and the City of Los Angeles.

#### October 24, 2009

President Obama declared the 2009 H1N1 “swine flu” pandemic a national emergency, a designation that made it easier for medical facilities to handle a surge of patients infected with the potentially deadly virus. This is the second highest emergency level with a State of National Emergency, the highest. The President’s actions were intended to remove bureaucratic roadblocks and make it easier for the sick to seek treatment and medical providers to provide it immediately. It also will allow medical facilities to waive certain standard requirements for Medicare, Medicaid and other federal health insurance programs on a case-by-case basis.

#### November 24, 2009

Los Angeles County Department of Public Health notified the City that it was reducing the number of H1N1 vaccination PODs being held throughout the County to match current and projected demand at these PODs. As the vaccine supply increases, more vaccinations were going to be administered by physicians, community health PODs, some school districts, regular LACDPH PODs and other health care providers. Public Health believed this will provide the best approach to making H1N1 vaccine available for the remaining part of the flu season. Subsequently, the 46 remaining vaccination PODs planned between the dates of November 22, 2009 and December 20, 2009 were cancelled.

### **III. POINT OF DISPENSING (POD) PRE-PLANNING (2007-2009)**

The natural disaster-prone State of California has experienced a number of emergencies that have shaped its first responder community and led them to emerge as leaders in emergency preparedness and management nationwide. Public health agencies have historically followed the leads of emergency medical services, fire, and law enforcement in local emergencies. However, with increasing concern that Los Angeles is vulnerable to possible chemical, biological, or radiological attacks, as well as the dangers posed by pandemic flu and other emergent disease threats, public health is now recognized as an essential element of emergency planning and response.

On March 30, 2007, the City of Los Angeles adopted a Public Health Emergency Response Plan, of which PODs are an integral element. In the event of a public health emergency, PODs may be activated so that the affected or at-risk members in the community can obtain preventive therapy, such as oral prophylactic medications or injectable immunizations, in a timely manner. Each POD will have the capacity to provide for 12,000 – 48,000 or more people per 24 hour day, per site. The nature and location of the emergency and the size of the affected population will determine the number and location of PODs that will be activated. Los Angeles County Department of Public Health (LACDPH) officials along with Emergency Medical Services (EMS), hospitals, Infection Control Practitioners, law enforcement (LE), and physicians will work in a unified command structure to determine eligibility requirements to receive prophylactic medications or immunizations at a POD.

The express goal of the City of Los Angeles POD program, which was established with funding from the 2006 Urban Areas Security Initiative (UASI) Grant and sustained through subsequent CDC and Regional Catastrophic Preparedness Grants, is to create the capacity to effectively and efficiently distribute mass prophylaxis in response to a public health emergency. Specifically, the funding has allowed for the creation of 59 site-specific POD Plans (including facility usage strategies, traffic management plans, security, and a detailed assessment of the facility and its surrounding communities), training, and exercises. While the underlying assumption for this PODs project was that the mass prophylaxis dispensed at PODs would be oral antibiotics (not injectable immunizations), the POD plans proved to accommodate the latter with minor adjustments.

#### **IV. H1N1 POINT OF DISPENSING PLANNING**

##### **A. LACDPH Strategy**

This information is excerpted from a LACDPH Planning Document titled, "Pull Strategy Guidance" (Dated 8-1-2009):

*The LACDPH strategy for vaccinating the estimated 5.5 million people in the CDC target groups for the pandemic H1N1 flu called for a robust mix of "Push" and "Pull" strategies. "Push" strategy refers to partnering with other healthcare providers in Los Angeles County (LAC) such as healthcare organizations, hospitals, PODs, and medical providers and distributing vaccine to them so that they can vaccinate their eligible clientele. This strategy does not require City of Los Angeles involvement.*

"Pull" strategy refers to directly delivering vaccine by Points of Dispensing (PODs) to vaccinate the eligible population that does not have access to a regular healthcare provider. Of the estimated 5.5 million people in LAC who are included in the initial target group, approximately 904,867 did not have access to a regular healthcare provider, and thus would have to come to a POD to receive vaccine.

LACDPH vaccination efforts were managed through a combination of servicing the public at health centers and through PODs and other types of vaccination outreach. Vaccine was offered at all Health Centers. This effort will be augmented with PODs conducted in a joint effort with local cities. In addition, LACDPH combined and blended other types of large-scale vaccination outreach with PODs.

Outreaches were similar to the larger seasonal flu outreaches and conducted with a school district, church, or other viable community partner rather than a City. These outreaches will have less staffing than a POD, and will target specific populations (i.e. children in school). However, for H1N1 vaccination outreaches still need to be scheduled at large venues that can

attract a significant population in order to be viable. Blending large outreaches with PODs created a flexible and adaptable vaccination strategy.

LACDPH needed to develop partnerships with local cities to provide not only POD sites, but also to provide the majority of non-clinical staff to operate the POD. Cities would be recruited and partnerships formed by using the existing POD planning and outreach model, which consists of Community Liaisons at the Service Planning Areas (SPA) under the guidance and oversight of the Area Health Officers. Weekend PODs may place financial strain on cities to pay overtime to compensate their staff, but cities should be reminded that most members of the public can only take the time to receive a vaccination on weekends. If possible PODs that are scheduled on a weekday should be scheduled at school sites to target the school-age population as much as possible.

To be accepted as a City partner for an H1N1 POD, a City must agree to:

- Work with LACDPH to choose a suitable facility
- Agree to host the POD on a day agreeable to both the City and LACDPH
- Provide the majority of the non-clinical staff
- Provide security, traffic control and parking management
- Provide logistical support

Partner cities will have to understand and accept that they will be responsible for providing the vast majority of non-clinical staff for the POD, as well as providing the facility, traffic management, and security. LACDPH will be responsible for providing all of the Clinical staff, the remainder of the non-clinical staff, and the vaccine. Unlike the Flu PODs of years past, in 2009 LACDPH will use a standardized organization chart in order to provide an easier means of estimating staff needed for the POD scheduled each week, and to provide clearer goals for staff recruitment and training.

Non-clinical staff will be assigned roles according to their skills. However, the bulk of the non-clinical staff will be assigned to Registration and Screening. For each POD, a unified organization chart will be jointly developed and agreed upon by LACDPH and the participating City, and each person included in the organization chart will be assigned a role. This is the method used to organize Flu PODs in the past, is proven and should be adhered to for H1N1 as well.

LACDPH will be using a standard H1N1 POD Organization chart for all H1N1 PODs this year, which is similar to the general POD Organization Chart. However, the purpose behind standardizing the Org chart is to avoid all of the customized org charts which were used during Flu PODs the last two years, and to make estimated numbers of staff that need to be trained and assigned for each POD much easier. In addition, yet another purpose of standardizing the organization chart is to reduce the number of staff needed to run an H1N1 POD.

The core of each POD will be made up of 15 Clinical staff, including 11-12 vaccinators and 3-4 team leaders/group supervisors. This core group will be made up of LACDPH Clinical staff from

all programs, volunteer nurses from the Medical Reserve Corp (MRC) and nursing students. With 28 PODs planned every week, the H1N1 Pull Strategy vaccination effort will require significant Clinical staff from all sources. This standardized organization chart is still under development, but will be available soon.

## **B. City of Los Angeles – LACDPH Planning**

An initial planning meeting on August 1, 2009, including the LACDPH Emergency Preparedness and Response Program (EPRP), Community Health Services (CHS) and City of Los Angeles EMD initiated the POD scheduling process. Subsequent planning meetings during which the schedule was continually refined were held weekly through the duration of POD activations. The primary focus of LACDPH's planning effort was to identify locations (with preexisting POD plans) in areas accessible by the highly concentrated uninsured population in nearby census tracts (using poverty statistics from the US Census). LACDPH created a map of the County with an overlay of poverty information and City POD locations (*Attachment 1*). Each LACDPH Service Planning Area (SPA) Manager was to identify the target POD locations based on their knowledge of the area.

### **1. Scheduling**

Since it was originally believed that two vaccinations (given 30 days apart) would be necessary for a client to build sufficient immunity, the initial POD schedule called for a three-phase approach. During the first phase, each location would host a POD for two or three consecutive days; 30 days later, locations would host another POD for two or three consecutive days; the schedule was slated to repeat a third time 30 days after the second phase. This schedule would allow at least two opportunities for individuals to receive their second vaccination. However, since it was later determined that only those clients nine years of age and younger would need the second booster vaccine, LACDPH cancelled the third POD phase.

### **2. Selecting Locations**

CHS drove the site-selection process by identifying specific neighborhoods and communities to serve; EMD identified City-owned facilities in those communities that met the minimum POD requirements (in terms of size and space), were already vetted as potential PODs, and had a pre-developed City of Los Angeles POD Plan.

Accordingly, CHS initially scheduled two hundred six PODs in the City of Los Angeles (using the three-phase approach with twenty-two facilities) and a total of two hundred forty-seven PODs within LA County (*Attachment 2*). After numerous rounds of review and vetting, CHS issued a new schedule for the City, which included one hundred four PODs (nineteen facilities with a total of six to nine PODs each), to take place on select weekends from October 16th through December 20, 2009. Over the course of the program, however, the



schedule continued to fluctuate as the third phase was cancelled and demand increased in areas that were not originally targeted.

The following is the timeline by which LACDPH made changes to the initial schedule:

- August 25, 2009 – Dropped Mason Recreation Center, Pacoima Recreation Center, Westwood, changed Green Meadows Recreation Center to Bradley-Milken Family Source Center.
- September 14, 2009 – Dropped Dodger Stadium.
- September 15, 2009 – Dropped all Fridays save the PODs in SPA 2.
- September 21, 2009 – Dropped Fridays at Sunland and Woodland Hills.
- September 25, 2009 – Changed Penmar to Oakwood due to facility damage.
- September 29, 2009 – Cancelled all sites for October 16-17-18, 2009.
- September 29, 2009 – Cancelled Granada Hills on October 23, 2009.
- November 4, 2009 – Cancelled Bogdanovich, Cheviot Hills, Cypress and Pan Pacific for November 13-14-15, 2009.
- November 9, 2009 – Cancelled Chevy Chase, Oakwood, Granada Hills, Wilmington and Woodland Hills for November 20-21-22, 2009. (One Wilmington POD was held on November 22<sup>nd</sup>.)
- November 13, 2009 – November PODs scheduled at Balboa Sports Complex were moved to Richie Valens.
- November 24, 2009 – All third phase (initially scheduled for December 11-12, 2009) PODs were cancelled.

In conclusion, a total of one hundred nine PODs were held throughout the County; the City of Los Angeles managed thirty-nine of those PODs by providing the facility (eighteen Recreation and Parks Centers and one Community Development Department Family Source Center), staffing, security, logistical support, and creating site- and date-specific Event Action Plans. An additional five of the County PODs were supported by the City by providing security and auxiliary planning assistance. (See *Attachment 3* for the actual City POD schedule that was implemented.)

The following is the final list of locations used as PODs within the City:

Facility Name	Facility Owner	Type
Balboa Sports Complex	Recreation and Parks	Managed
Baldwin Hills Recreation Center	Recreation and Parks	Managed
Bradley-Milken Youth & Family Center	Community Development Dept	Managed
Cal State LA	California State University	Supported
Chevy Chase Recreation Center	Recreation and Parks	Managed
El Sereno Recreation Center	Recreation and Parks	Managed
Granada Hills Recreation Center	Recreation and Parks	Managed
Harvard Recreation Center	Recreation and Parks	Managed
Hollywood High School	Recreation and Parks	Managed
LA Valley College	California Community Colleges	Supported
Lincoln Park Recreation Center	Recreation and Parks	Managed
MacArthur Park Recreation Center	Recreation and Parks	Managed
Oakwood Recreation Center	Recreation and Parks	Managed
Panorama Recreation Center	Recreation and Parks	Managed
Ritchie Valens Recreation Center	Recreation and Parks	Managed
Skid Row/Union Rescue Mission	City of LA/Non-profit	Supported
Sun Valley Health Center	Private, Non-profit	Supported
Sunland Recreation Center	Recreation and Parks	Managed
Westchester Recreation Center	Recreation and Parks	Managed
Wilmington Recreation Center	Recreation and Parks	Managed
Woodland Hills Recreation Center	Recreation and Parks	Managed

### 3. Logistics

LACDPH was responsible for the logistics, including the vaccinations, related clinical supplies, and the non-clinical supplies that supported the vaccination and evaluation efforts (e.g. forms, clipboards, pens, signage, and ICS vests for POD staff). LACDPH hired three contractors to deliver vaccines and clinical supplies, the balance of which was picked up after the close of each POD, including hazardous waste. SPA Managers and/or the LACDPH POD Manager brought additional non-clinical supplies as noted. LACDPH supplied water and lunch for all County and City POD staff.

The City supported the LACDPH's logistics by providing facilities compliant with minimum POD standards (in size and space), tables and chairs, maintenance, and restroom supplies. Tables and chairs were rented as needed to bolster each site's inventory. A number of City facilities did not have the minimum number of tables and chairs required. Additional table and chairs were provided. They were delivered the day before the event and pick-up the day after.

The following chart documents the table and chairs rented:

Balboa Sports Complex	12 tables / 25 chairs
Oakwood Recreation Center	6 tables
Ritchie Valens Recreation Center	11 tables/25 chairs
Westchester Recreation Center	12 tables / 25 chairs
Wilmington Recreation Center	11 tables / 35 chairs

Logistics were coordinated by EMD with the assistance of Recreation and Parks and Community Development Department prior to each POD.

### C. City Planning

The County Public Health Planner (assigned full time to the City) and the Emergency Preparedness Coordinator responsible for the development of POD Plans were the main coordinators for this event. Accordingly, EMD called and hosted individual meetings with City Departments that played a major role in the PODs and preparation for the PODs, including RAP, CDD, LAPD, GSD-OPS, DONE, LAFD CERT, CLA, and DOD. Additionally, at several points during planning and implementation, EMD coordinated and provided regular updates (on the H1N1 virus and the PODs) to all City departments and staff through planning meetings, briefings and memorandums. *Attachment 4* outlines the major EMD-led City briefings and City outreach.

EMD liaised with LACDPH on the overall event management, worked with LACDPH to coordinate strategies and POD needs, developed the Event Action Plans, handled all logistics for the City, supported the Public Information Officers on outreach and media efforts, staffed the PODs, provided support during POD operational periods, and offered training.

### D. POD Staffing

#### 1. LACDPH Staffing

LACDPH was responsible for staffing the following positions (see *Attachment 6*, the sample EAP, for a description of each job function):

- POD Manager to work in Unified Command with the City POD Manager
- Public Information Officer (PIO)
- Safety Officer
- Planning Section Chief
- Operations Section Chief
- Logistics Section Chief
- Supply Unit Leader and staff
- Personnel Unit Leader and staff
- Clinical Branch Director
- Form Distribution Group Leader

- Registration/Screening Group Leader and staff
- Dispensing Group Leader and staff
- Evaluation Group Leader and staff
- Question & Answer Group Supervisor and staff

All programs within LACDPH were put on notice to activate their Continuity of Operations Plans and were ready to contribute Clinical and non-clinical staff to the POD program. The LACDPH Organizational Development and Training Program (ODT) worked jointly with Public Health Human Resources (HR) and Nursing Administration to identify and train available staff from all LACDPH programs. ODT maintained staff records to assist CHS in assigning staff to specific sites and POD operational periods.

## 2. City of Los Angeles Staffing

Based on previous POD exercises and the POD Organizational Structure described in the Los Angeles County Department of Public Health Points of Dispensing Field Operations Guide (POD FOG), the City of Los Angeles planned and expected to staff all non-clinical positions, including the following (see *Attachment 6*, the sample EAP, for a description of each job function):

- POD Manager to work in Unified Command with the LACDPH POD Manager
- Personnel support staff
- Set-up/Clean-up Unit Leader and staff
- Parking Lot Unit Leader and staff
- Form Distribution staff
- Flow Control staff
- Security Branch Supervisor and staff (including armed LAPD and GSD-OPS officers, unarmed contract security officers, and Traffic Control Officers (TCO) if necessary)

## 3. City POD Manager

The City POD Manager worked in Unified Command with the LACDPH POD Manager, was assigned to manage a single site for one operational period, and provided overall supervision and leadership to the POD staff. The POD Manager's responsibilities were to:

- Meet with the County POD Manager and Operations Section Supervisor.
- Contact the POD Desk at and report status upon arrival.
- Serve as the main point of contact for the ADOPT-A-POD Coordinator.
- Review non-POD activities scheduled for situational awareness.
- Serve as the primary liaison with facility staff.
- Check with facility representative on anything unique about facility.
- Review locations of fire alarms, fire extinguishers and emergency exits.
- Adjust non-clinical staff as shown on ICS 203.
- Act as the Public Information Officer (PIO) if that position is not filled.

- Act as Safety Officer if that position is not filled.
- Conduct general briefing, and ensure the safety briefing is delivered by the Safety Officer.
- Ensure safety and personnel accountability measures are in place.
- Meet with police and security officers to review strategies.
- Once the POD is open to the public, monitor activities.
- Authorize release of information through the POD PIO.
- Meet with Section Chiefs at Noon, or sooner, for situational briefing.
- Ensure POD Operations Chief monitors the inventory, and makes decisions about requesting additional supplies or closing the queue early if clients equate to or exceed supplies.
- Meet with Section Chiefs at 3:00pm and develop a demobilization plan.
- Remain at the POD until all supplies are picked up by LACDPH contractors and the facility is vacated by POD-related personnel.
- Maintain an ICS 214 POD Manager Activity Log.
- Collect ICS 214s from the Security Staff, and obtain copies of the staff sign-in/sign-out sheets prior to the end of the operational period.
- Report all issues that are irresolvable locally to the POD Desk.
- Check out with the POD Desk upon leaving the facility at the end of the operational period.

#### 4. ADOPT-A-POD Program

EMD created the ADOPT-A-POD program to facilitate the recruitment and management of non-clinical volunteers. Non-profit organizations, faith-based groups, hospitals, local businesses, colleges and universities were recruited “to adopt” POD locations, and commit to recruiting the 10-30 volunteers needed to serve a particular POD location on a specific day. (See *Executive Summary, Section G. Participating Groups, subsection 4. Community Groups Providing Volunteers* for the comprehensive list of participants). The flyer used to recruit ADOPT-A-POD Coordinators is shown in *Attachment 5*.

The group’s primary representative became the ADOPT-A-POD Coordinator, and served as the liaison to EMD. The ADOPT-A-POD Coordinators signed an agreement with EMD indicating that they were willing and able to:

- Work under the direction of EMD.
- Work in partnership with the LACDPH and other participating agencies.
- Recruit 15-30 reliable, professional volunteers.
- Assure that volunteers are notified of the location, arrival time and work commitment.
- Ensure that at least 10 volunteers report to the POD at 8:00 am.
- Participate in a one-hour training/planning meeting conducted by EMD.
- Work the complete POD shift, and serve in an assigned staff position.
- Have strong verbal communication skills and be fluent in English.

The ADOPT-A-POD Coordinator and volunteers worked with EMD in the planning phase and under the direction of the POD Manager(s) during POD operational hours. Volunteers worked in a support capacity: they were flow control (directed clients through the facility), worked the queue (distributed registration forms), and helped support the logistics of the operation. All volunteers were offered a free H1N1 vaccine, as they were considered health care workers.

The ADOPT-A-POD Coordinator and volunteers were not responsible, nor authorized to make decisions that impacted the date, location, hours, staffing structure, or any aspect of the POD operation. The ADOPT-A-POD volunteers did not vaccinate clients, even if they were registered nurses or doctors.

Through the ADOPT-A-POD Program, the City of Los Angeles initially recruited 25-30 community volunteers per POD to staff the listed non-clinical (and non-security) positions. After the first POD phase, however, the LACDPH changed its strategy—without informing the City—and brought its own volunteers and extra staff to fill the non-clinical positions. LACDPH staffing coupled with the ADOPT-A-POD Program was a duplication of effort, resulting in an overabundance of non-clinical staff and volunteers during Phase II.

#### 5. POD Desk

The City of Los Angeles POD Desk provided overall coordination and support for all the PODs when they were activated operational. Specifically, the POD Desk:

- Ensured that the City POD Manager arrived at the assigned POD on time.
- Ensured that the ADOPT-A-POD Coordinator arrived at the assigned POD on time, knew where to check-in, and received staff assignments.
- Served as a resource to help resolve any non-clinical, facility or security issues that were not solvable by the POD Managers and/or facility managers.
- Liaised with LAPD and GSD-OPS to confirm that the appropriate officers.

#### **E. Event Action Plans**

Individual, site-specific Event Action Plans (EAPs) were developed for each POD operational period. The EAPs were distributed to the respective POD Managers, ADOPT-A-POD Coordinator, LACDPH SPA Managers and staff, LAPD, GSD-OPS and LACDPH Department Operations Center at least seven (7) prior to each POD. The EAPs were revised after each cycle based on lessons learned. See *Attachment 6* for an example. Each EAP included the following:

1. ICS 202 – Event Objectives

The ICS 202 defined the POD Operational Period, reviewed the objectives, noted the weather forecast, and included the list of EAP attachments.

2. ICS 203 – Organizational List

The ICS 203 outlined the organizational structure by section, branch, group, unit, and team. This Organizational List provided guidance to the City and LACDPH regarding staffing, and it was updated at the POD to reflect the actual circumstances, including the location, demand for the vaccine, and timing.

3. Security Strategies and Resources

The overarching security objective was for the officers to serve as a visual deterrent, as criminal activity was not anticipated. Accordingly, the security deployment for each site was determined jointly by LAPD and GSD-OPS, using historical information about the site and the surrounding area as the guiding factor. At a minimum, two LAPD armed officers and one private, unarmed security officer was assigned to each site. At some sites additional LAPD officers, private security, and/or armed GSD-OPS officers were assigned.

Security arrived by 0830 hours; all security remained until the POD was closed to the public, though two armed officers remained on-duty until the facility was locked (after POD clean-up and supply pick-up).

Contract security and/or armed officers were posted at the entrance to the POD to help control flow into the facility and to redirect queue as necessary. This was especially important since in many instances clients queued at the site as early as five hours before the scheduled opening of PODs, resulting in lines of several hundred clients. Additionally, in Phase II LACDPH Nurses performed enhanced screening to ensure that all clients were in one of the priority categories. As a result, a number of clients were refused the vaccine. The law enforcement presence helped maintain order at the PODs, especially when people were upset that they were not eligible for the vaccine.

In addition to the front of the POD and the queue, LAPD and GSD-OPS armed officers established visibility by patrolling the interior and the exterior of the facility, and posting staff at the facility entrances and exits. LAPD and/or GSD-OPS positioned a vehicle near the entrance of the facility as a show of presence. In the event of criminal activity or civil unrest, all POD staff were instructed to remain inside the building until cleared to leave by Security. LAPD and/or GSD-OPS were responsible for calling for additional assistance if needed.

Each facility was open for business as usual. Only the rooms used for the POD were closed to normal center activities. The POD Manager and Security Branch developed a plan to restrict the Command Post and Break Room to POD staff only. This was done with barricades or the posting of private security. POD staff were instructed not leave their

personal effects unattended. For security purposes, at the end of each operational period, all remaining vaccine and Clinical supplies were picked-up by the two (or three) respective Contractors hired by LACDPH.

Other than some minor incidents unrelated to the PODs there were no security issues reported. This is in contrast to some PODs in other parts of the County that had significant security issues.

The following outlines the security deployment for each site:

POD Site	LAPD	GSD OPS	Contract Security
Balboa Recreation Center	2	0	1
Baldwin Hills Recreation Center	2	0	2
Bradley-Milken Family Source Center	2	2	2
Cal State LA	2	0	0
Chevy Chase Recreation Center	2	2	2
El Sereno Recreation Center	2	2	2
Granada Hills Recreation Center	2	0	1
Harvard Recreation Center	2	0	2
Hollywood High	2	0	0
Lincoln Park Recreation Center	2	2	2
MacArthur Park Recreation Center	2	2	2
Oakwood Recreation Center	2	0	2
Panorama Recreation Center	2	0	2
Ritchie Valens Recreation Center	2	0	2
Skid Row/Union Rescue Mission	6	0	0
Sunland Recreation Center	2	0	2
Sun Valley Health Center	2	0	0
Westchester Recreation Center	2	0	1
Wilmington Recreation Center	2	0	2
Woodland Hills Recreation Center	2	0	1

4. POD Footprint Details

The POD Footprint Details outlined information on the space(s) designated for POD use at the facility. It also included a narrative, which described the POD client flow, from queuing to registration, vaccination, and exit. Any accessibility considerations pertaining to the space designated for POD use were noted.

5. Flow Control – Line Monitor Posts

This section of the EAP identified key site-specific locations recommended for posting staff to facilitate the efficient flow of clients into and through the facility. A description of function and duties for each flow control post was included, many of which supported the security strategies.



6. POD Layout, Set-Up, and Client Flow Diagram

The POD Layout provided a visual description of the facility, spaces designated for POD use, and client flow. Each site had a floor plan of the facility (drawn to architectural standards) with an overlay of POD-specific space and room designations.

The Layout was also intended to support the set-up of the POD, as it illustrated the locations of the queuing area, forms distribution, registration and screening, vaccination, evaluation, and the client exit.

7. ICS 205 – Communications Plan

The ICS 205 was provided to document the radio and/or telephonic communications plan. At most sites, LACDPH provided the radios for POD Managers and Command Staff, and all radios operated off of a single frequency for ease of use.

8. ICS 206 – Staff Medical Plan; and Client Medical Plan

Staff or clients who had a reaction to the H1N1 vaccine were assessed and treated by the Public Health Clinical Staff. The Operations Section or Clinical Branch Supervisor would make the determination if 9-1-1 was to be called. If there was a Public Health Physician present, they assumed all patient care responsibility for the patient.

If staff or clients suffered a medical emergency outside of the POD facility, care was to be rendered and 9-1-1 be called. The Public Health Clinical Staff could render care, but could not assume patient care responsibility. Once the LAFD ambulance crew arrived, they assumed patient responsibility unless a physician is present. If staff or clients refused medical care and/or transport to the hospital, the refusal was to be documented on the Activity Log (ICS 214). Transport of staff or clients to a hospital was according to Los Angeles County Emergency Medical Services Protocol. Treatment of staff or clients was to Los Angeles County Emergency Medical Services Protocol unless responsibility for the patient is assumed by a physician or the patient refuses care or transport under informed conditions.

9. General Briefing Talking Points

Prior to the POD's opening to the public, the POD Managers conducted a general briefing for all POD Clinical, non-clinical, and security staff. The briefing covered the following topics (See *Attachment 6* for the actual talking points included in the EAP):

- The purpose of the POD.
- Instructions that photography within the facility is not permitted, and staff must report any unauthorized photography to the Command Post.
- Instructions to direct all media to the Command Post since staff are not authorized Public Information Officers.
- Staff must check-out prior to leaving the facility for any reason.
- Instructions regarding unsafe activities, protection of personal items.

- A description of the POD flow and facility usage plan.
- The weather forecast.
- The opportunity for each staff person to receive one H1N1 vaccine provided that he/she meets the health-related qualifications.

#### 10. Safety Briefing Talking Points

Prior to the POD's opening to the public, the Safety Officer conducted a safety briefing for all POD Clinical, non-clinical, and security staff. The briefing covered the following topics (See *Attachment 6* for the actual talking points included in the EAP):

- The location of the Command Post and Staff Break/Briefing Rooms.
- Instructions to monitor clients for signs of heat or cold exposure, as necessary based on the weather.
- The location of emergency exits.
- Instructions on how medical emergencies for staff and clients should be handled according to the ICS 206 and Client Medical Plan.
- Emergency response to a fire alarm, earthquake, civil unrest, and criminal activity.

#### 11. Event Overview; and H1N1 Background

The Event Overview provided POD staff with background information on the H1N1 POD event, including the participating agencies, responsibilities of LACDPH and the City of Los Angeles, and information on site-specific POD scheduling.

The H1N1 Background Information was a reference sheet, since many non-clinical and security staff at the PODs were not well-versed in the overarching H1N1 Influenza, the overarching City of Los Angeles POD program, and the ADOPT-A-POD initiative.

#### 12. POD Manager Checklist; and ADOPT-A-POD Coordinator Checklist

The POD Manager Checklist provided the POD Manager with twenty-three action items to guide them through their POD Manager roles and responsibilities, from check-in with the POD Desk to check-out upon POD closure. While POD Managers were ICS trained, for many managing a POD was a new experience, and the Checklist was a quality control measure (including best practices).

The ADOPT-A-POD Coordinator Checklist was given to the Coordinators prior to the operational period, as it included their action items prior to the event (e.g. recruiting volunteers), during the event, and following the event.

13. ICS 221 - Demobilization Plan

The scheduled closing of each POD was 1700 hours and the facility had to be cleared out and turned back over to RAP staff by 1930 hours. It was important to plan for the closing so that clients would not continue to line up and wait long periods of time, only to be told that there was no more vaccine. At 1500 hours, a planning meeting was to be held to start planning the closing of the facility. At the planning meeting POD managers were to consider the number of clients in line, the amount of vaccine left and the through-put per hour. If the amount of available vaccine was projected to run out before 1700 hours, a line monitor was to be placed at the end of the line to advise clients that only those in line were guaranteed vaccine. If there was sufficient vaccine to last 1700 hours, at 1700 hours those in line were to be brought inside the facility to be provided vaccine and the door closed. A line monitor with information on other future POD locations was to be stationed outside for those who arrived after the POD's closing.

14. ICS 214 – Activity Log

Each EAP included a POD Manager-specific 214, with designated space for documentation of major POD milestones (e.g. completion of set-up, General & Safety Briefings, etc.), general comments, and recommendations. Generic ICS 214's were provided for the Security Branch Director and staff in addition to the ADOPT-A-POD Coordinator.

15. Wide view vicinity map of the POD location

An aerial and/or street wide view vicinity map was provided.

16. Appendix

POD Managers were also given a Site Information Appendix, which included floor plan drawings, photographs, and data on the facility.

## **V. POD IMPLEMENTATION**

The City of Los Angeles was the single most involved City hosting the largest number of PODs within Los Angeles County. A total of 72,261 vaccinations were administered over the course of the event at the forty-four PODs (thirty-nine managed, five supported) within the City of Los Angeles.

At four of the PODs, seasonal vaccine was offered at the sole discretion of LACDPH clinical staff: El Sereno Recreation Center (November 8); Hollywood High School (November 8); Lincoln Park Recreation Center (October 5); Skid Row/Union Rescue Mission (November 12). A total of 1,005 seasonal vaccines were administered.

**A. Actual Timeline and POD Data**

- October 16-17-18, 2009 - The first round of PODs included nineteen PODs, all of which were cancelled by LACDPH due to delays in the delivery of the vaccine from the Center for Disease Control.
- October 23-24-25, 2009 - The City of Los Angeles hosted seventeen PODs. A total of 28,277 vaccinations were administered. On October 23, LACDPH and the City jointly hosted a major public relations event at the Balboa Sports Complex on October 23, to officially initiate the H1N1 Vaccination Program in LA County.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
23-Oct	Balboa Sports Complex	Manage	H1N1	2,257
24-Oct	Balboa Sports Complex	Manage	H1N1	2,120
24-Oct	Chevy Chase Recreation Center	Manage	H1N1	1,054
24-Oct	Granada Hills Recreation Center	Manage	H1N1	1,206
24-Oct	Harvard Recreation Center	Manage	H1N1	1,034
24-Oct	Lincoln Park Recreation Center	Manage	H1N1	1,203
24-Oct	Oakwood Recreation Center	Manage	H1N1	1,376
24-Oct	Wilmington Recreation Center	Manage	H1N1	1,917
24-Oct	Woodland Hills Recreation Center	Manage	H1N1	1,973
25-Oct	Balboa Sports Complex	Manage	H1N1	2,547
25-Oct	Chevy Chase Recreation Center	Manage	H1N1	1,349
25-Oct	Granada Hills Recreation Center	Manage	H1N1	1,560
25-Oct	Harvard Recreation Center	Manage	H1N1	843
25-Oct	Lincoln Park Recreation Center	Manage	H1N1	1,728
			Seasonal	201
25-Oct	Oakwood Recreation Center	Manage	H1N1	1,776
25-Oct	Wilmington Recreation Center	Manage	H1N1	2,305
25-Oct	Woodland Hills Recreation Center	Manage	H1N1	1,828

- November 2, 2009 - The City of Los Angeles supported one POD. A total of 1,681 vaccinations were administered.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
2-Nov	Cal State LA	Support	H1N1	1,681

- November 7-8, 2009 - The City of Los Angeles managed two PODs and supported two PODs. A total of 6,725 vaccinations were administered. (Note: An additional POD was held at Jesse Owens Park, a County owned park surrounded by the City, for which the City of Los Angeles did not provide any resources.)

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
7-Nov	El Sereno Recreation Center	Manage	H1N1	1,466
7-Nov	Sun Valley Health Center	Support	H1N1	1,796
8-Nov	El Sereno Recreation Center	Manage	H1N1	1,450
			Seasonal	303
8-Nov	Hollywood High School	Support	H1N1	1,699
			Seasonal	11

- November 12, 2009 - The City of Los Angeles supported one POD. A total of 2,529 vaccinations were administered.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
12-Nov	Skid Row/Union Rescue Mission	Support	H1N1	2,039
			Seasonal	490

- November 14-15, 2009 - The City of Los Angeles managed ten PODs. A total of 16,827 vaccinations were administered.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
14-Nov	Baldwin Hills Recreation Center	Manage	H1N1	763
14-Nov	Bradley-Milken Youth & Family Center	Manage	H1N1	1,459
14-Nov	Panorama Recreation Center	Manage	H1N1	1,941
14-Nov	Sunland Recreation Center	Manage	H1N1	2,142
14-Nov	Westchester Recreation Center	Manage	H1N1	1,827
15-Nov	Baldwin Hills Recreation Center	Manage	H1N1	1,234
15-Nov	Bradley-Milken Youth & Family Center	Manage	H1N1	1,004
15-Nov	Panorama Recreation Center	Manage	H1N1	2,304
15-Nov	Sunland Recreation Center	Manage	H1N1	2,127
15-Nov	Westchester Recreation Center	Manage	H1N1	2,026

- November 21-22, 2009 - The City of Los Angeles managed nine PODs. A total of 13,458 vaccinations were administered.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
21-Nov	Harvard Recreation Center	Manage	H1N1	420
21-Nov	Lincoln Park Center	Manage	H1N1	1,183
21-Nov	MacArthur Park	Manage	H1N1	1,427
21-Nov	Ritchie Valens Recreation Center	Manage	H1N1	2,413
22-Nov	Harvard Recreation Center	Manage	H1N1	537
22-Nov	Lincoln Park Center	Manage	H1N1	1,527
22-Nov	MacArthur Park	Manage	H1N1	1,505
22-Nov	Ritchie Valens Recreation Center	Manage	H1N1	2,355
22-Nov	Wilmington Recreation Center	Manage	H1N1	2,091

- November 28-29, 2009 – There were no PODs scheduled for the Thanksgiving Holiday.
- December 5-6, 2009 – The City supported two PODs. A total of 3,023 vaccinations were administered.

DATE	POD SITE	Category	Type of Vaccine	Vaccine Quantity
5-Dec	LA Valley College	Support	H1N1	1,517
6-Dec	LA Valley College	Support	H1N1	1,506

- December 11-12-13, 2009 – LACDPH cancelled the 19 scheduled PODs.
- December 18-19-20, 2009 – LACDPH cancelled the 22 scheduled PODs.

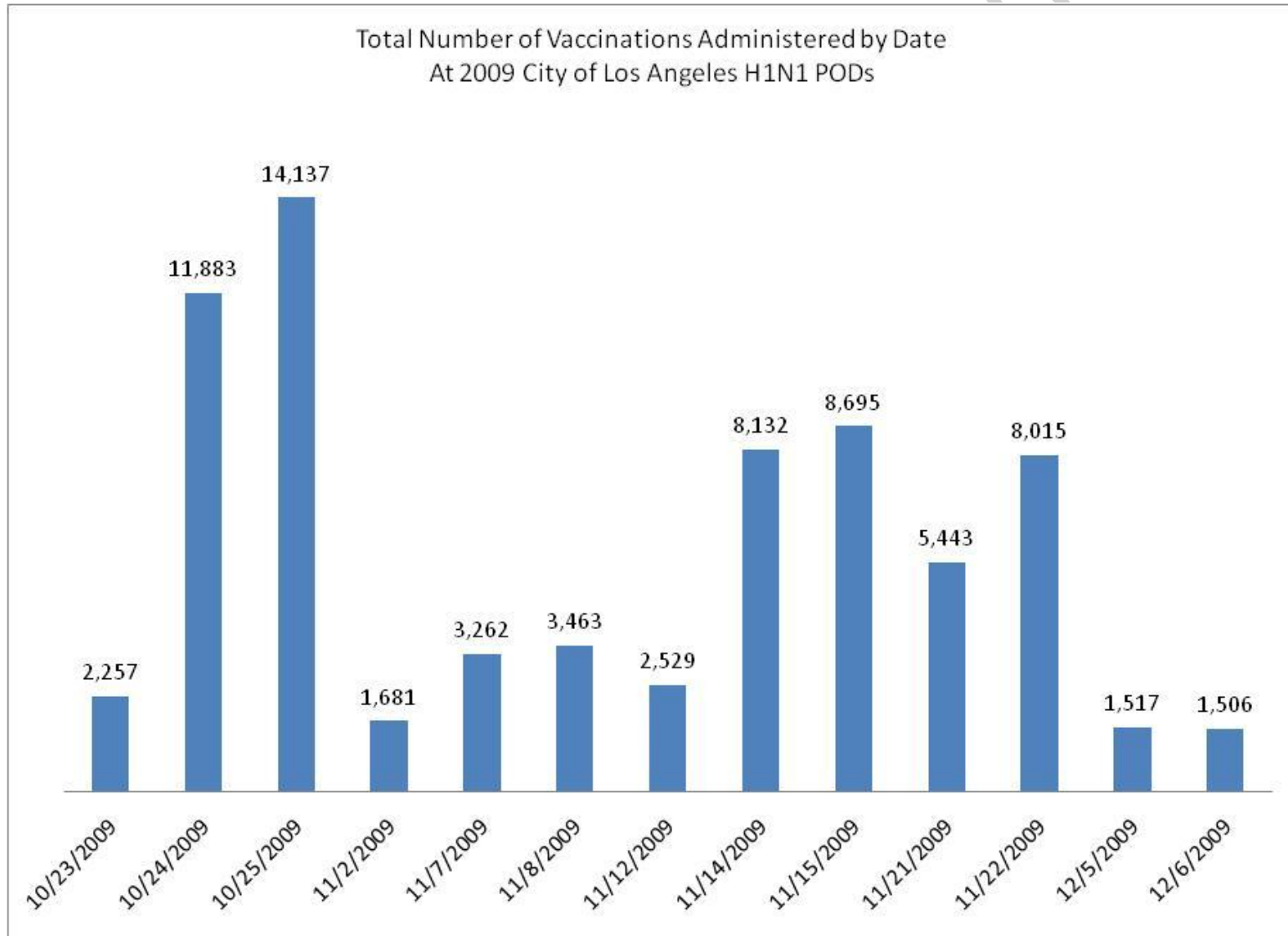
## B. Data Collection

The POD Managers, ADOPT-A-POD Coordinators (at Managed sites), and Security Officers maintained ICS 214 Activity Logs, which were collected by the POD Manager upon demobilization and then submitted to EMD. The POD Managers were asked to document the cumulative vaccination total at 1100 hours, 1300 hours, 1500 hours, and 1700 hours (or at POD close). EMD maintains records of these completed forms.

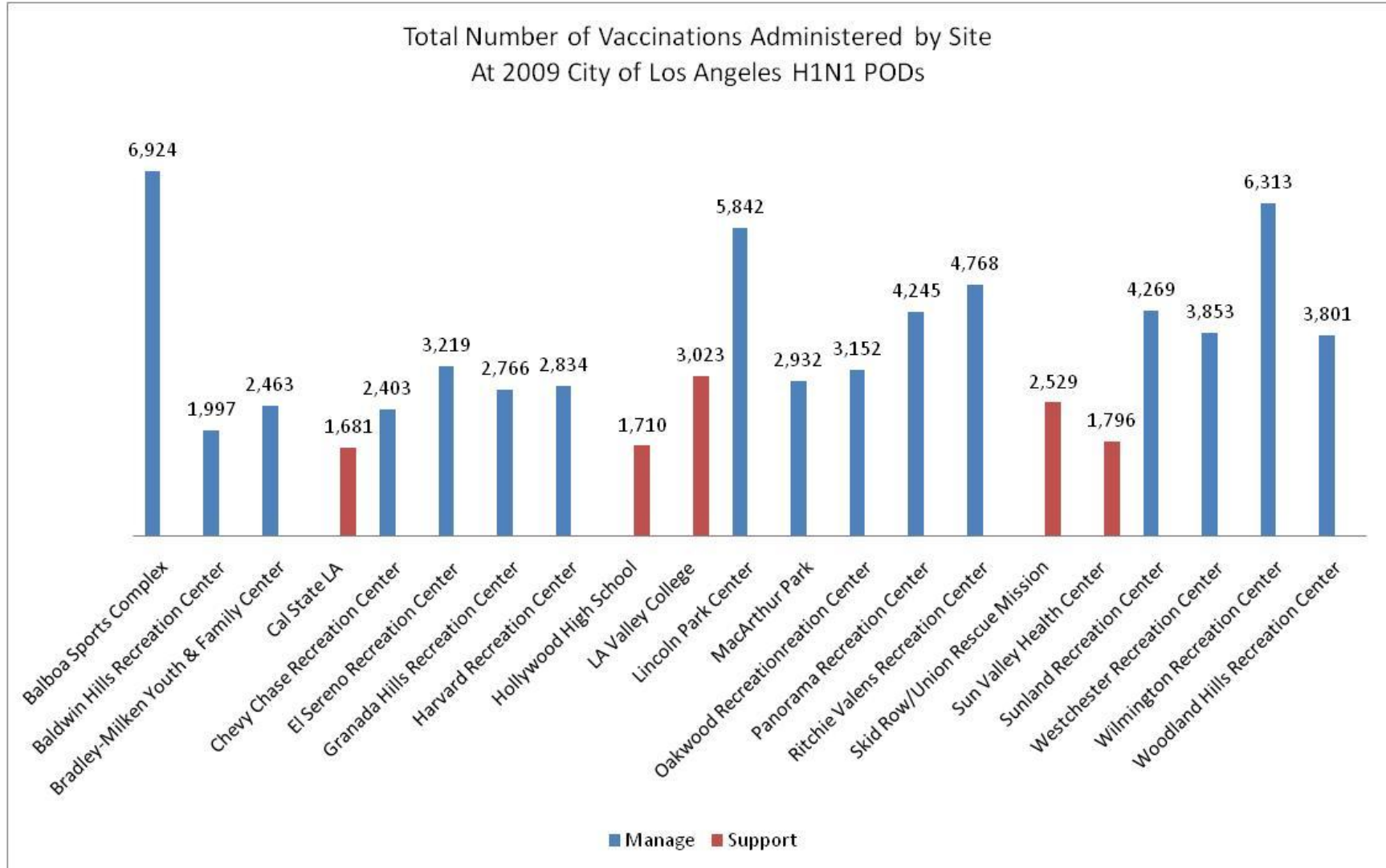
LACDPH regularly issued reports on the total number and type of vaccinations administered at each POD; EMD used this data as a quality control measure to ensure accuracy of City reports.

C. Charts & Graphs

1. Number of H1N1 & Seasonal Vaccinations Administered by Date

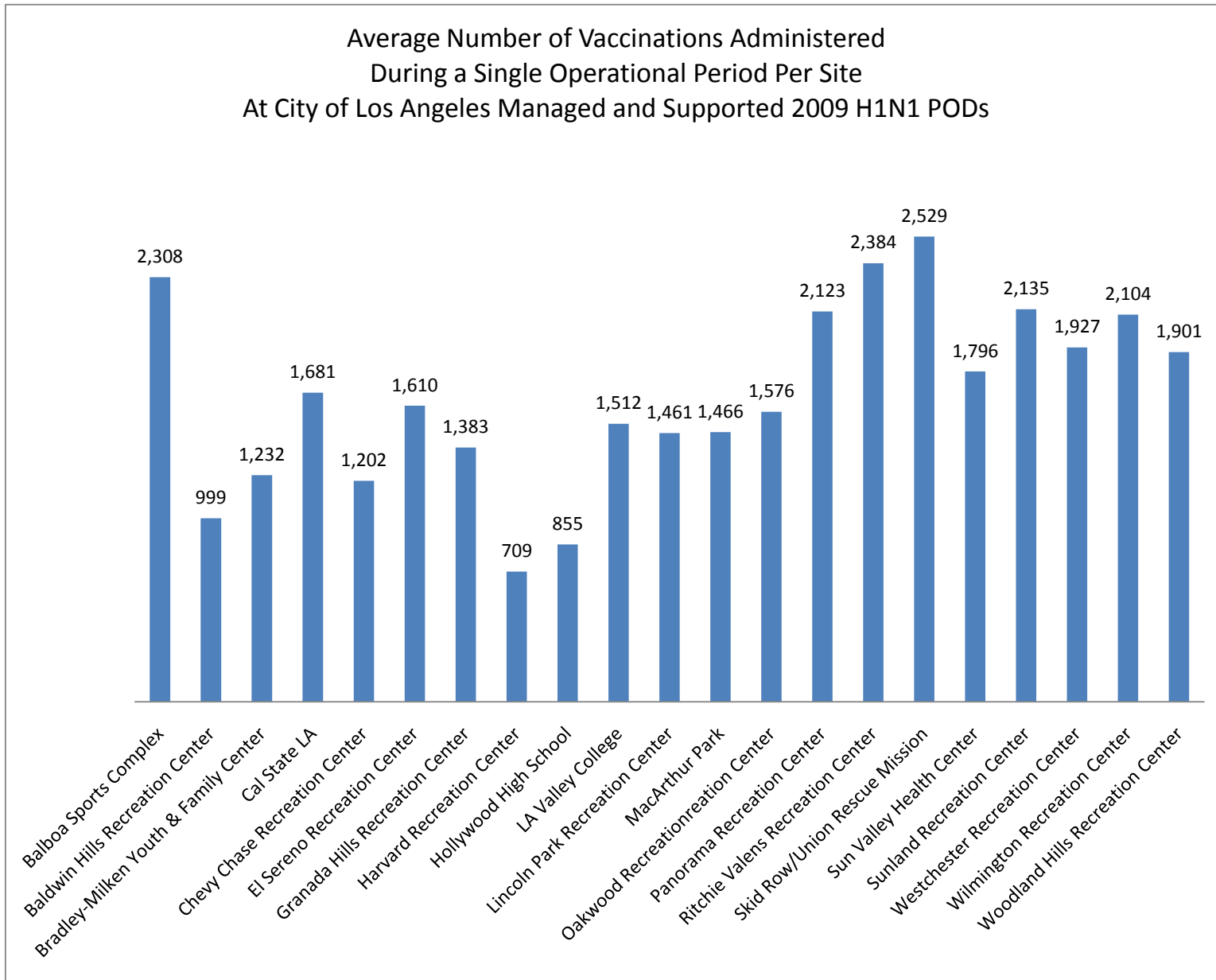


2. Total Number of H1N1 & Seasonal Vaccinations Administered by Location

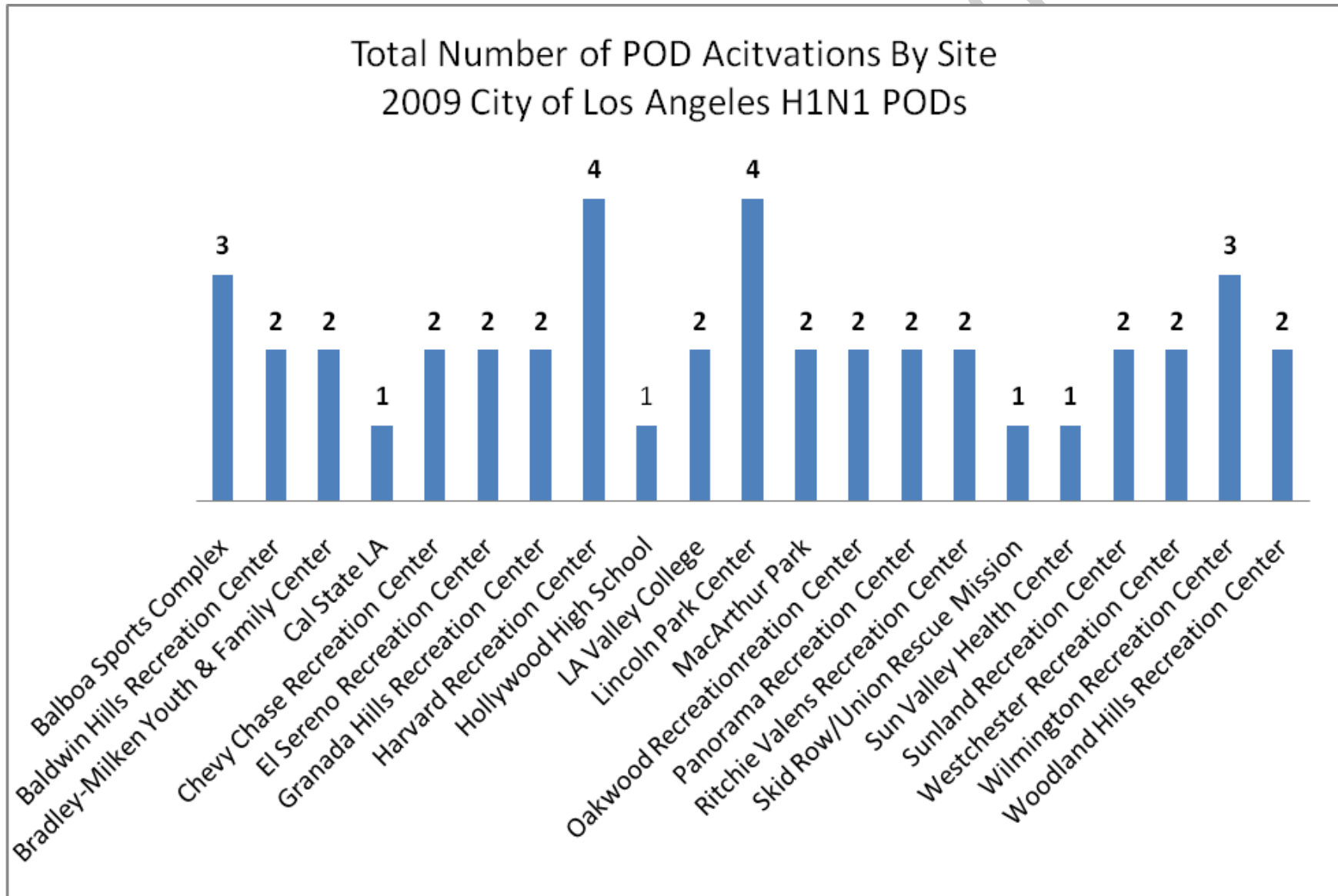




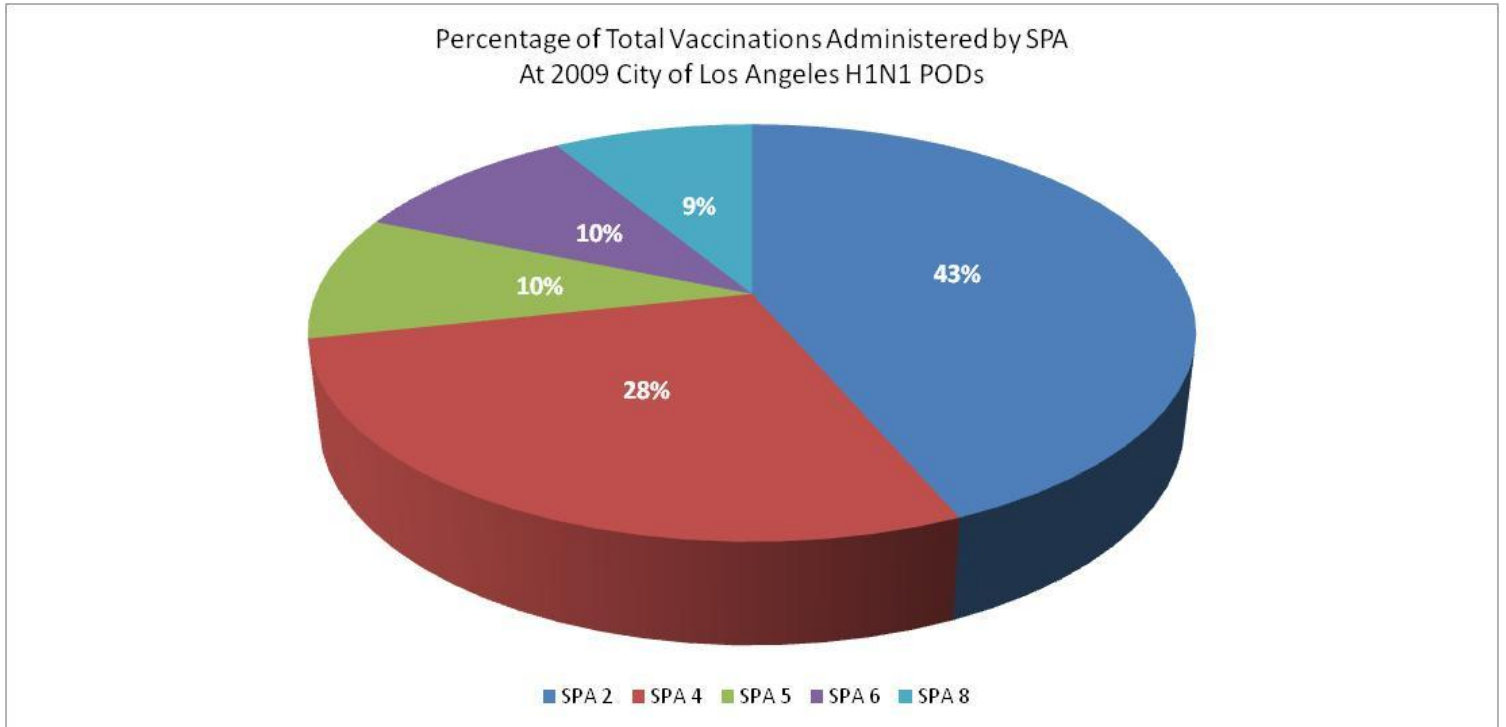
3. Average Number of Vaccinations Administered During a Single Operational Period



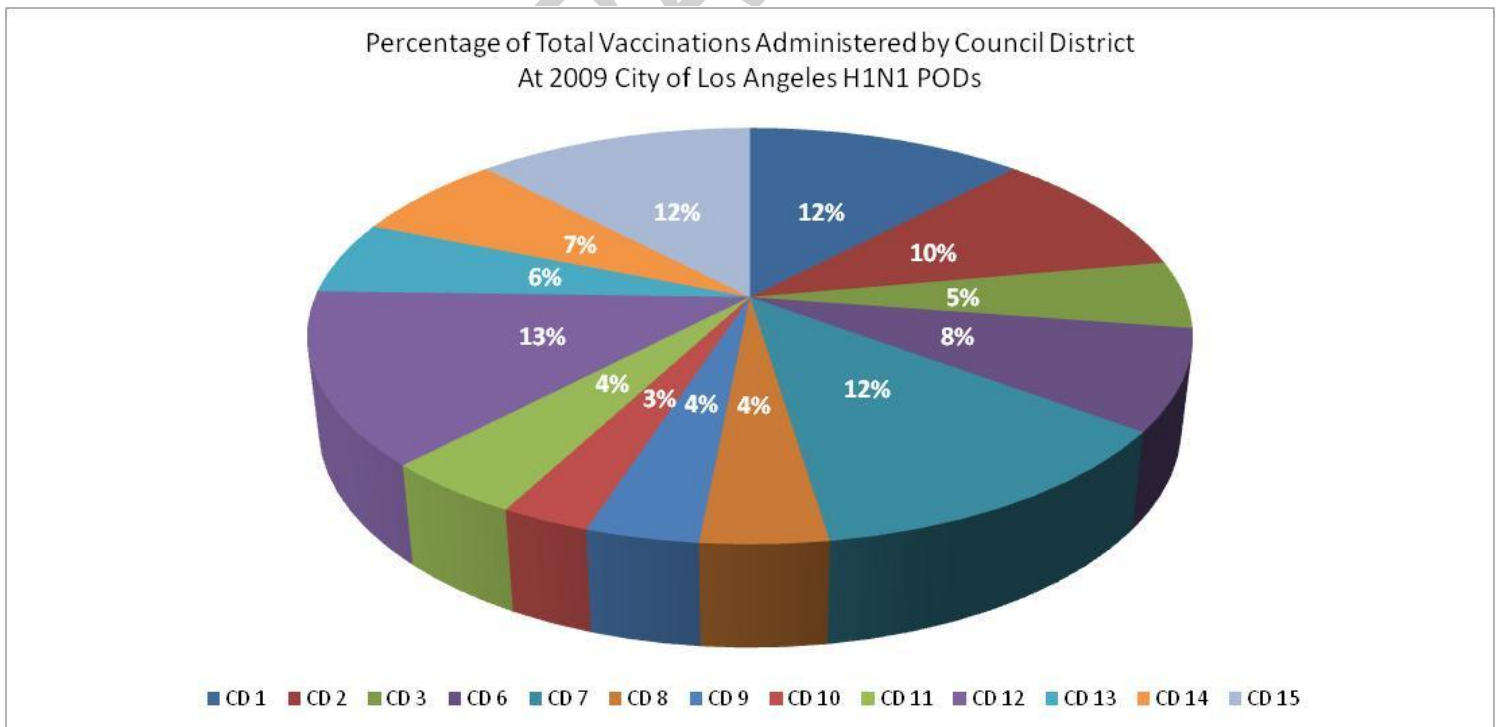
4. Number of POD Activations Per Site



5. Percentage of Total Vaccinations Administered by SPA Region



6. Percentage of Total Vaccinations Administered by Council District



## VI. FEEDBACK

EMD created three online surveys—a City POD Manager Survey, an ADOPT-A-POD Coordinator Survey, and a Volunteer Survey—which were issued directly to the POD Managers and ADOPT-A-POD Coordinators by email following the completion of the H1N1 POD event. EMD relied on the ADOPT-A-POD Coordinators to forward the Volunteer Surveys to their respective participants.

This section includes the actual responses and comments provided on each of the three surveys. For each row, the column with the highest percentage is highlighted grey; the number in parentheses following each percentage indicates the total number of responses.

**Note: Every survey response is reported in the following charts, even if the respondent submitted feedback using the incorrect survey format. Comments, which are included in italics, are documented verbatim.**

### A. City POD Manager Survey

Please rate your pre-POD experience.	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I was clear on my role as the POD Manager.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
The POD Manager Training was helpful.	0.0% (0)	80.0% (4)	0.0% (0)	0.0% (0)	0.0% (0)
The Event Action Plan (EAP) was easy to follow and thorough.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
I felt prepared to manage the POD.	20.0% (1)	80.0% (4)	0.0% (0)	0.0% (0)	0.0% (0)
I knew who to contact if I had questions prior to & on the day of POD.	40.0% (2)	40.0% (2)	25.0% (1)	0.0% (0)	0.0% (0)
<i>At the Chevy Chase POD, the County POD section managers didn't incorporate me into any decisions regarding the facility. I will speculate that this might have been due to this being the first weekend the PODs were operating at City facilities. At the Sunland POD, I had more input related to the facility and worked in a unified command.</i>					
<i>All Contact numbers should have been included. Especially, when it came to Law Enforcement. I had to use 311 3 times.</i>					

Please provide us with feedback on the set-up and management of the POD.	Yes	No	N/A
When I arrived, the POD was already set-up.	60.0% (3)	40.0% (2)	0.0% (0)
The POD was set-up in accordance with the Event Action Plan.	40.0% (2)	60.0% (3)	0.0% (0)
When I signed in, I was introduced to the Public Health POD Manager.	80.0% (4)	20.0% (1)	0.0% (0)
Volunteers arrived on time and checked in with registration.	100.0% (4)	0.0% (0)	0.0% (0)
When the volunteers signed in, they received their POD assignments (or instruction on when their POD assignments would be issued).	80.0% (4)	20.0% (1)	0.0% (0)
I was issued a white vest to wear that labeled me as the POD Manager.	80.0% (4)	20.0% (1)	0.0% (0)
Staff were issued vests that displayed their POD assignments.	80.0% (4)	20.0% (1)	0.0% (0)
Volunteers were issued vests that displayed their POD assignments.	60.0% (3)	40.0% (2)	0.0% (0)
I participated in the General Briefing.	100.0% (4)	0.0% (0)	0.0% (0)

<b>Please provide us with feedback on the set-up and management of the POD. – CONTINUED –</b>	Yes	No	N/A
Anything related to the facility (maintenance, copies, etc) was directed through me.	40.0% (2)	40.0% (2)	20.0% (1)
I was given sufficient breaks (in accordance to my POD site policy - for a full shift, generally two 15 minute breaks; one 30 minute lunch break) throughout the day.	80.0% (4)	20.0% (1)	0.0% (0)
Staff were provided lunch.	100.0% (4)	0.0% (0)	0.0% (0)
Volunteers were offered the H1N1 vaccine.	100.0% (4)	0.0% (0)	0.0% (0)
I had to contact the POD Desk for back-up assistance.	20.0% (1)	80.0% (4)	0.0% (0)

<b>Please rate your experience at the POD.</b>	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I had a clear understanding of my role as the POD Manager.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
The POD Manager Checklist in the EAP helped me perform my responsibilities.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
I worked in a unified command with the Public Health POD Manager.	20.0% (1)	60.0% (3)	20.0% (1)	0.0% (0)	0.0% (0)
The Public Health POD Manager was responsive to my input.	20.0% (1)	60.0% (3)	0.0% (0)	20.0% (1)	0.0% (0)
The General Briefing and Safety Briefing were informative.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
I worked with the Public Health POD Manager to make decisions (e.g. demobilizing staff, changes to the EAP, etc.)	20.0% (1)	20.0% (1)	20.0% (1)	20.0% (1)	20.0% (1)
Overall, I enjoyed my experience as a POD Manager.	20.0% (1)	80.0% (4)	0.0% (0)	0.0% (0)	0.0% (0)
<i>The County staffs at both POD sites were very professional and easy to work with. Although, I felt the County employees at the Chevy Chase Rec Ctr did not work in a unified command, they had a very good control on issues.</i>					
<i>Great Experience, and was able to work through any issue. It would have been nice to have City Volunteers with their own colored vests. Even though they were mixed with County Volunteers, we had folks all over the place and finding them at times was difficult. A separate color would have been very useful</i>					
<i>The County POD Manager had no interest in working in a Unified Command. She refused to use the EAP. Volunteers were marginalized, as they were not assigned roles and POD supervisors did not include them until the issue was addressed.</i>					

**B. ADOPT-A-POD Coordinator Survey**

<b>Please rate your pre-POD experience.</b> Your comments are valuable, so we encourage you to elaborate on any item that you feel was particularly strong or recommended corrective actions for any item that you feel needs improvement.	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
I was clear on my role as the ADOPT-A-POD Coordinator.	37.5% (3)	37.5% (3)	0.0% (0)	12.5% (1)	12.5% (1)
I was given clear information on the roles my volunteers would be assigned during the POD.	37.5% (3)	25.0% (2)	12.5% (1)	12.5% (1)	12.5% (1)
The ADOPT-A-POD Coordinator training was helpful.	25.0% (2)	50.0% (4)	12.5% (1)	0.0% (0)	12.5% (1)
Communication with LA City staff was punctual and provided clear information and answers to questions.	50.0% (4)	37.5% (3)	0.0% (0)	0.0% (0)	12.5% (1)
The support materials (Volunteer Flyer, Event Action Plan, etc) facilitated my ability to recruit volunteers.	12.5% (1)	25.0% (2)	12.5% (1)	37.5% (3)	12.5% (1)
<i>not a coordinator</i>					
<i>Because I did not recruit the requested number of volunteers, their roles were unassigned. I created my own flyer and the support materials provided were not received in adequate time to recruit.</i>					
<i>I was asked to get volunteers. It wasn't until 2 days before the event that I was told what was really expected of me. I take partial responsibility for not asking questions. I would not have agreed to ADOPT-A-POD had I known what was expected. However, I would still have recruited volunteers. Unfortunately, the training was too late. It should have been offered as soon as we were requested to adopt a site. Even if there were things still pending approval, coordinators could have been given the information with the understanding that approval was pending. I did not receive the Event Action Plan until 2 days before the event.</i>					
<i>The action plan was fantastic. Communication with LA City EMD staff was slow to get started. I with that I had been able to get in touch with Devra from the outset. Unfortunately, I had been receiving information from other POD site coordinators that was incorrect and/or outdated. Also, I found you. I was a little surprised at how difficult it was for me to get in touch with the right person. Another complicating factor was that the list of PODs had been changing at the time that I was brought into the process. DPH was slow to announce the new list, and their online list was not complete.</i>					
<i>Everyone I was in contact with was very nice to work with.</i>					

<b>Please rate your experience at the POD.</b>	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
The POD was set-up in accordance with the Event Action Plan.	0.0% (0)	25.0% (2)	37.5% (3)	0.0% (0)	37.5% (3)
When I arrived, I knew where to go.	25.0% (2)	62.5% (5)	12.5% (1)	0.0% (0)	0.0% (0)
When I signed in, I received my POD assignment (or instruction on when my POD assignment would be issued).	37.5% (3)	37.5% (3)	25.0% (2)	0.0% (0)	0.0% (0)
Volunteers arrived on time and checked in with registration.	25.0% (2)	62.5% (5)	0.0% (0)	0.0% (0)	12.5% (1)
When the volunteers signed in, they received their POD assignments (or instruction on when their POD assignments would be issued).	25.0% (2)	37.5% (3)	37.5% (3)	0.0% (0)	0.0% (0)
I was issued a vest to wear that displayed my POD assignment.	25.0% (2)	12.5% (1)	37.5% (3)	12.5% (1)	12.5% (1)

<b>Please rate your experience at the POD. -Continued-</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
Volunteers were issued a vest to wear the displayed their POD assignments.	12.5% (1)	50.0% (4)	25.0% (2)	12.5% (1)	0.0% (0)
The General Briefing and Safety Briefing were informative.	37.5% (3)	50.0% (4)	12.5% (1)	0.0% (0)	0.0% (0)
I had a clear understanding of my role and who my POD supervisor was.	50.0% (4)	12.5% (1)	12.5% (1)	0.0% (0)	25.0% (2)
I understood the POD flow--where clients entered the facility, received their vaccines, and exited the facility.	50.0% (4)	37.5% (3)	0.0% (0)	0.0% (0)	12.5% (1)
I was given sufficient breaks (in accordance to my POD site policy - for a full shift, generally two 15 minute breaks; one 30 minute lunch break) throughout the day.	25.0% (2)	37.5% (3)	12.5% (1)	0.0% (0)	25.0% (2)
Volunteers were provided lunch.	50.0% (4)	25.0% (2)	12.5% (1)	0.0% (0)	12.5% (1)
Volunteers were offered the H1N1 vaccine.	50.0% (4)	37.5% (3)	0.0% (0)	0.0% (0)	12.5% (1)
<i>I disagreed with the lunch policy of denied lunch to volunteers who served more than 5 hours.</i>					
<i>Some folks were issued vests, but there weren't enough. I was told that is normal. Our volunteer group had t-shirts that identified us, and that was adequate for us.</i>					
<i>The exit described in the Event Action Plan was fenced off. New flow needed to be created and was done so by the County POD Manager. There was a lot of confusion and conflicting directions by county staff. Some staff appeared not to follow ICS protocol. Unfortunately, because of the confusion some of the volunteers tried to help by giving directions or making suggestions which added to the confusion. I repeatedly told my volunteers and the others who were assigned to me to follow directions, not give directions. There were not enough appropriate vests for the volunteers or the POD Coordinator. Some volunteers were told they were ineligible to receive vaccinations because they were not in the targeted groups.</i>					
<i>As I had a previous commitment, I was unable to stay past the general &amp; safety briefing. My volunteers did not indicate that anything that I told them such as being provided lunch and the vaccination did not happen.</i>					
<i>The POD staff organized it differently than described on the action plan. Their new layout functioned fine. I had a clear sense of who I reported to. I issued assignments to my volunteers and rotated them through different positions. One small glitch occurred early on, but I corrected it immediately and on-the-spot. One of the DHS staff members tried reassigning one of my volunteers to a new duty without coordinating it with me...and without realizing that I had already assigned another volunteer to that role. This staff member was not following the chain of command that had been established. Another observation was that the POD staff let citizens into the POD before the vaccine had even been distributed to the dispensing stations. This was quickly remedied, but it caused a delay. Finally, I dispatched two teams of volunteers to distribute fliers prepared by the POD staff. We had a very light flow of citizens, and these teams generated "business" for the POD by distributing fliers at the West Angeles church and other locations in the area.</i>					
<i>There was some expected confusion as to the role of the volunteers when the day started. There really was not a clear job duty description for them but we had them fill in where needed. There were not enough vests but more were ordered and they were eventually provided to all volunteers. It would be nice to provide name tags to volunteers to help them feel more involved and recognized.</i>					

<b>Please provide us with your overall feedback on the ADOPT-A-POD program.</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
My ADOPT-A-POD experience was positive.	37.5% (3)	62.5% (5)	0.0% (0)	0.0% (0)	0.0% (0)
If the opportunity presented itself, I would serve as an ADOPT-A-POD Coordinator again.	25.0% (2)	62.5% (5)	0.0% (0)	0.0% (0)	12.5% (1)
I would recommend the ADOPT-A-POD program to others.	25.0% (2)	75.0% (6)	0.0% (0)	0.0% (0)	0.0% (0)
<i>It seemed disorganized at first, but because most people were well intentioned, we were able to work together and got the job done.</i>					
<i>Overall, my volunteers indicated they had a positive experience and would do it again. They thanked me for the opportunity to serve.</i>					
<i>Now that I understand what is involved, I would serve as a coordinator again as long as my schedule allowed it.</i>					
<i>It was a great experience. I'm glad that I did it, and I would gladly help again. The problems that I noted were minor and are typical of any such activity.</i>					
<i>I would love to help again.</i>					
<i>It was difficult to recruit for two PODS that were canceled and then try to recruit for a 3rd location. However it all worked out. Third time's the charm!</i>					

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### C. POD City Volunteer Survey

<b>Please rate your pre-POD experience.</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
When I arrived, I knew where to go.	20.0% (1)	60.0% (3)	20.0% (1)	0.0% (0)	0.0% (0)
When I signed in, I received my POD assignment (or instruction on when my POD assignment would be issued).	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
I was issued a vest to wear that displayed my POD assignment.	80.0% (4)	20.0% (1)	0.0% (0)	0.0% (0)	0.0% (0)
The General Briefing and Safety Briefing were informative.	60.0% (3)	40.0% (2)	0.0% (0)	0.0% (0)	0.0% (0)
I had a clear understanding of my role and who my POD supervisor was.	40.0% (2)	40.0% (2)	20.0% (1)	0.0% (0)	0.0% (0)
I understood the POD flow--where clients entered the facility, received their vaccines, and exited the facility.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)
I was given sufficient breaks (in accordance to my POD site policy - for a full shift, generally two 15 minute breaks; one 30 minute lunch break) throughout the day.	40.0% (2)	40.0% (2)	20.0% (1)	0.0% (0)	0.0% (0)
I was provided lunch.	80.0% (4)	20.0% (1)	0.0% (0)	0.0% (0)	0.0% (0)
I was offered the H1N1 vaccine.	40.0% (2)	40.0% (2)	20.0% (1)	0.0% (0)	0.0% (0)

*I had a great experience. Did not like the fact that one of my peers was turned down his lunch. He was denied because he was able to volunteer 1/2 a day. My group ended up sharing our lunch w/ him.*

*1. The county person doing the briefing had very strong organization and management skills. Sorry I don't have her name; I only remember her primary language was not English, probably East European. She is a keeper. 2. Chain-of-Command Communication was weak. I was one of several runners working the line of people waiting for vaccination. At the beginning, anyone wishing the live-virus nasal spray was directed to the rear entrance because the paperwork for the killed virus vaccination had not yet arrived. Later, when all vaccination lines were operational, only pregnant ladies and physically infirm were to be directed to the rear entrance. However, this change was not uniformly communicated to the runners and persons wishing live virus nasal spray were being directed to the rear entrance by some runners several hours after the change. Fortunately the line was moving rapidly and the inconsistent practice was moot, this time.*

*Two different experiences: At Granada Hills, the sign-in was easy to find. The duties were not made very clear and, in fact, they changed. Flexibility is the key! The clinic ran out of vaccine shortly before the closing time and I did not get the vaccine that day. At Sunland, the sign-in was more difficult to find. Again, duties were not made very clear. To make matters worse, there was a CERT "coordinator" there named Wayne who spent most of the day walking around and talking to the police and others. Even though, under ICS, all the CERT volunteers had a Group Supervisor, Wayne continued to act as though he was in charge. This is confusing and works against the principles of ICS. (I have already sent my comments regarding this matter to Capt. Gerlich.)*

<b>Please provide us with your overall feedback on the ADOPT-A-POD program.</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>N/A</b>
My POD experience was positive.	20.0% (1)	80.0% (4)	0.0% (0)	0.0% (0)	0.0% (0)
If the opportunity presented itself, I would volunteer again.	40.0% (2)	40.0% (2)	0.0% (0)	20.0% (1)	0.0% (0)
I would recommend friends or colleagues volunteer at a POD.	40.0% (2)	60.0% (3)	0.0% (0)	0.0% (0)	0.0% (0)

*I volunteered for this partly because of my training as a military medic, partly to see how this agency works. I am impressed. I recommended this event to my associates in the W6IN Society. They provide disaster communication support to the City of San Fernando. None joined me. I was trained for impromptu medical situations, they were not.*

*Even though most people are busy setting up the POD in the early morning, there really should be one or two people to manage the volunteers. This starts with signage indicating the sign-in area, explanation of duties and issuance of vests, etc. In both of the PODs I experienced, I had to seek out my supervisor among everyone else and find something to do. Having some experience with the first POD helped me in knowing what needed to be done at the second.*

## VII. CONCLUSION

The City of Los Angeles played a major, crucial support role in the LACDPH 2009 H1N1 Vaccination Program, which supported access to the vaccine and allowed Angelenos to obtain the Vaccine before it was available at most physician offices and pharmacies. A total of 72,261 vaccinations were administered over the course of the event at the forty-four PODs (thirty-nine managed, five supported) within the City of Los Angeles. This major response effort was a success due to the City's prior investment in public health emergency preparedness and POD planning and the strong, pre-existing partnership between the Emergency Management Department and LACDPH. As a result of implementing the City's POD Plans and the LACDPH POD FOG, EMD has identified several improvement measures and established respective courses of action. Similarly, EMD has identified the successful practices and policies to be maintained through the evolution of the POD Plans and POD FOG.

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**VIII. CORRECTIVE ACTION PLAN**

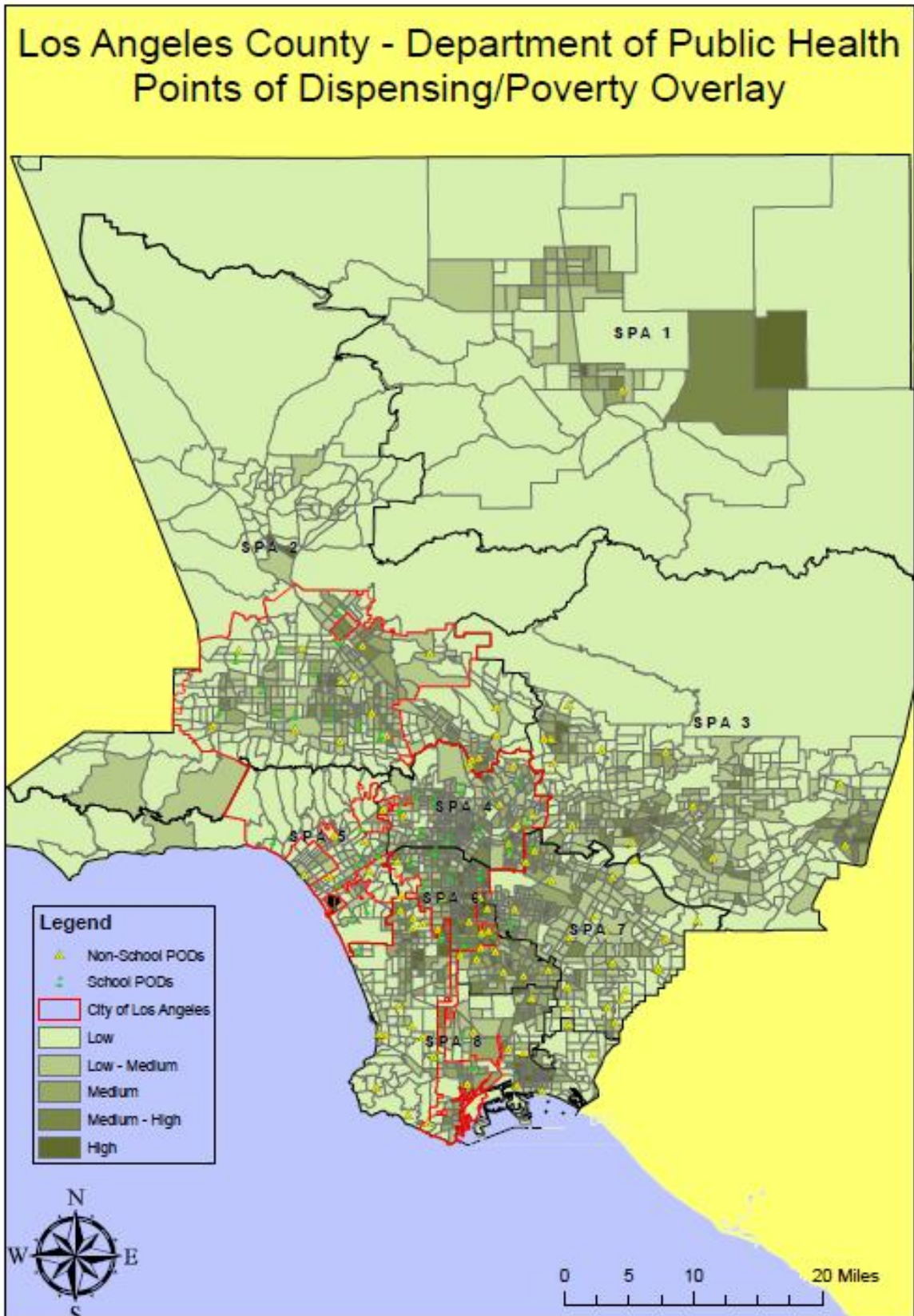
	<b><u>ISSUE</u></b>	<b><u>SOLUTION</u></b>
1	Public outreach and notification/advertising of the POD locations and schedule was minimal and significantly delayed.	Take the lead in outreach and publicity for PODs within the City; Utilize the traditional media and social networking sites to maximize notification of POD locations and time of operations.
2	Improve outreach with the access and functional needs community regarding POD schedule.	Provide Department on Disabilities with a copy of the POD schedule in addition to all written outreach notifications, so DOD can assist with notification of those with access and functional needs, provide sign language interpreters, and work with LACDPH to make materials available in Braille and large print.
3	Several PODs were not located in areas that are highly populated with uninsured Angelenos, which was LACDPH’s target population.	Once LACDPH identifies their target population(s) for future vaccination efforts, EMD will work with Council Offices and the Office of the Mayor to select appropriate pre-planned sites.
4	LACDPH contacted City-owned facilities directly regarding POD Planning (e.g. identifying it as a new site) without working through the City EMD to coordinate all POD activities.	Meet with CHS and EPRP Program Manager(s) to ensure that all LACDPH staff are aware of the protocol, namely to work through EMD on all issues relating to the City of Los Angeles.
5	CHS staff arrived prior to the mutually agreed upon time, and gained access to the facility by janitorial staff, which caused confusion, potential security issues, and operational issues (as they used space that was not designated for POD activity).	Ensure City facility staff instruct janitors of the appropriate opening times to allow for ample security preparations.
6	Several CHS staff did not follow the City EAP (timeline, set-up, POD footprint facility usage, staffing), which caused confusion among facility staff, City POD workers, and volunteers.	Along with the CHS Program Manager/Liaison, meet with SPA Managers and Area Health Officers prior to any POD event to review the EAP and agree to the terms of the Plan.
7	Select City POD Managers worked outside the protocol outlined in the EAP to request resources.	Require training for all City POD Managers and support the day of the POD.
8	During POD Activations, there was a lack of communications between the City and LACDPH, which resulted in operational issues.	Establish a single point of contact to liaise between LACDPH and the City to ensure open, thorough, and timely communications.
9	CHS assigned LACDPH staff and volunteers to fill roles that were planned to be filled by City non-clinical volunteers; as a result, there was an excess of available workers at each site and volunteers were under-utilized. The “excess” staff and volunteers were disappointed that they were not needed and/or were unable to work at the POD.	The City and CHS must agree to a staffing strategy in the planning phase, and ensure that field representatives are aware of the staffing plan (e.g. number of positions, who is responsible to fill each, etc).
10	At most locations, volunteers were not issued vests, which caused confusion and created potential security issues.	Ensure that CHS and the City agree to a single staffing strategy/model so that LACDPH can provide sufficient supplies for POD staff.

**CORRECTIVE ACTION PLAN – CONTINUED**

11	CHS changed the staffing structure (e.g. the number and type of positions that could be filled by non-clinical volunteers and City staff).	Ensure that a lead CHS program manager is appointed to provide daily/weekly updates on POD changes, including the staffing needs and requirements.
12	City POD workers (including volunteers) were not integrated into the ICS organizational structure, resulting in confusion and underutilization of staff.	<p>Prior to the POD, confirm staffing needs with CHS, SPA Managers, and Area Health Officers to avoid over-staffing.</p> <p>Meet with CHS POD Command Staff during POD set-up to ensure inclusion and full integration of City POD workers into the organizational structure.</p>
13	POD locations (Recreation and Park Centers) were open to business-as-usual (albeit scaled back), which caused confusion for staff and potential security issues.	Recommend the cancellation of all activities on dates of POD activations.
14	LACDPH formally evaluated one City of Los Angeles POD (to fulfill the CDC’s annual requirement), which proved to be disruptive to the POD activities.	Limit extraneous activities at PODs that are activated in response to a true public health emergency.

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**ATTACHMENT 1: LACDPH Map of POD Locations with Poverty Rate Overlay**



**ATTACHMENT 2: Initial POD Schedule**

<b>CYCLE 1</b>		
<u>October 16-17-18</u>	<u>October 23-24-25</u>	<u>October 30-31-November 1</u>
Baldwin Hills Recreation Center Bogdanovich Recreation Center Cheviot Hills Recreation Center Cypress Recreations Center Bradley-Milken Y & F Center Mason Recreation Center Pacoima Recreation Center Pan Pacific Recreation Center Panorama Recreations Center Sunland Recreation Center Westchester Recreation	Balboa Recreation Center Chevy Chase Recreation Center Granada Hills Recreation Center Harvard Recreation Center Lincoln Park Recreation Center Penmar Recreation Center Westwood Recreations Center Wilmington Recreation Center Woodland Hills Recreation Center	El Sereno Recreation Center
<b>CYCLE 2</b>		
<u>12-Nov</u>	<u>November 13-14-15</u>	<u>November 20-21-22</u>
Skid Row/Union Rescue Mission	Baldwin Hills Recreation Center Bogdanovich Recreation Center Cheviot Hills Recreation Center Cypress Recreations Center Bradley-Milken Y & F Center Mason Recreation Center Pacoima Recreation Center Pan Pacific Recreation Center Panorama Recreations Center Sunland Recreation Center Westchester Recreation	Balboa Recreation Center Chevy Chase Recreation Center El Sereno Recreation Center Granada Hills Recreation Center Harvard Recreation Center Lincoln Park Recreation Center MacArthur Park Recreation Center Penmar Recreation Center Westwood Recreations Center Wilmington Recreation Center Woodland Hills Recreation Center
<b>CYCLE 3</b>		
<u>December 4-5-6</u>	<u>December 11-12-13</u>	<u>December 18-19-20</u>
Dodger Stadium	Baldwin Hills Recreation Center Bogdanovich Recreation Center Cheviot Hills Recreation Center Cypress Recreations Center Bradley-Milken Y & F Center Mason Recreation Center Pacoima Recreation Center Pan Pacific Recreation Center Panorama Recreations Center Sunland Recreation Center Westchester Recreation	Balboa Recreation Center Chevy Chase Recreation Center El Sereno Recreation Center Granada Hills Recreation Center Harvard Recreation Center Lincoln Park Recreation Center MacArthur Park Recreation Center Penmar Recreation Center Westwood Recreations Center Wilmington Recreation Center Woodland Hills Recreation Center

**ATTACHMENT 3: Actual POD Schedule**

Date	POD Site	Type	City	Facility Owner	RAP Region	OPS	LAPD	Council District
23-Oct	Balboa Sports Complex	Manage	Encino	RAP	Valley	Central	West Valley	12
24-Oct	Balboa Sports Complex	Manage	Encino	RAP	Valley	Central	West Valley	12
	Chevy Chase Recreation Center	Manage	Los Angeles	RAP	Metro	Hollywood	Northeast	13
	Granada Hills Recreation Center	Manage	Granada Hills	RAP	Valley	West Valley	Devonshire	12
	Harvard Recreation Center	Manage	Los Angeles	RAP	Pacific	Central	77th	8
	Lincoln Park Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	1
	Oakwood Recreation Center	Manage	Venice	RAP	Pacific	West LA	Pacific	11
	Wilmington Recreation Center	Manage	Wilmington	RAP	Pacific	Harbor	Harbor	15
Woodland Hills Recreation Center	Manage	Woodland Hills	RAP	Valley	West Valley	West Valley	3	
25-Oct	Balboa Sports Complex	Manage	Encino	RAP	Valley	Central	West Valley	12
	Chevy Chase Recreation Center	Manage	Los Angeles	RAP	Metro	Hollywood	Northeast	13
	Granada Hills Recreation Center	Manage	Granada Hills	RAP	Valley	West Valley	Devonshire	12
	Harvard Recreation Center	Manage	Los Angeles	RAP	Pacific	Central	77th	8
	Lincoln Park Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	1
	Oakwood Recreation Center	Manage	Venice	RAP	Pacific	West LA	Pacific	11
	Wilmington Recreation Center	Manage	Wilmington	RAP	Pacific	Harbor	Harbor	15
Woodland Hills Recreation Center	Manage	Woodland Hills	RAP	Valley	West Valley	West Valley	3	
2-Nov	Cal State LA	Support	Los Angeles	CSU	n/a	n/a	Hollenbeck	14
7-Nov	El Sereno Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	14
	Sun Valley Health Center	Support	Sun Valley	Private	n/a	n/a	North Hollywood	6
8-Nov	El Sereno Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	14
	Hollywood High School	Support	Hollywood	LAUSD	n/a	n/a	Hollywood	13
12-Nov	Skid Row/Union Rescue Mission	Support	Los Angeles	City	n/a	n/a	Central	9
14-Nov	Baldwin Hills Recreation Center	Manage	Los Angeles	RAP	West	Hollywood	Southwest	10
	Bradley-Milken Y & F Center	Manage	Los Angeles	CDD	n/a	n/a	Southeast	15
	Panorama Recreation Center	Manage	Panorama City	RAP	Valley	East Valley	Mission	7
	Sunland Recreation Center	Manage	Sunland	RAP	Valley	East Valley	Foothill	2
	Westchester Recreation Center	Manage	Los Angeles	RAP	West	West LA	Pacific	6
15-Nov	Baldwin Hills Recreation Center	Manage	Los Angeles	RAP	West	Hollywood	Southwest	10
	Bradley-Milken Y & F Center	Manage	Los Angeles	CDD	n/a	n/a	Southeast	15
	Panorama Recreation Center	Manage	Panorama City	RAP	Valley	East Valley	Mission	7
	Sunland Recreation Center	Manage	Sunland	RAP	Valley	East Valley	Foothill	2
	Westchester Recreation Center	Manage	Los Angeles	RAP	West	West LA	Pacific	6

**ATTACHMENT 3: Actual POD Schedule – Continued**

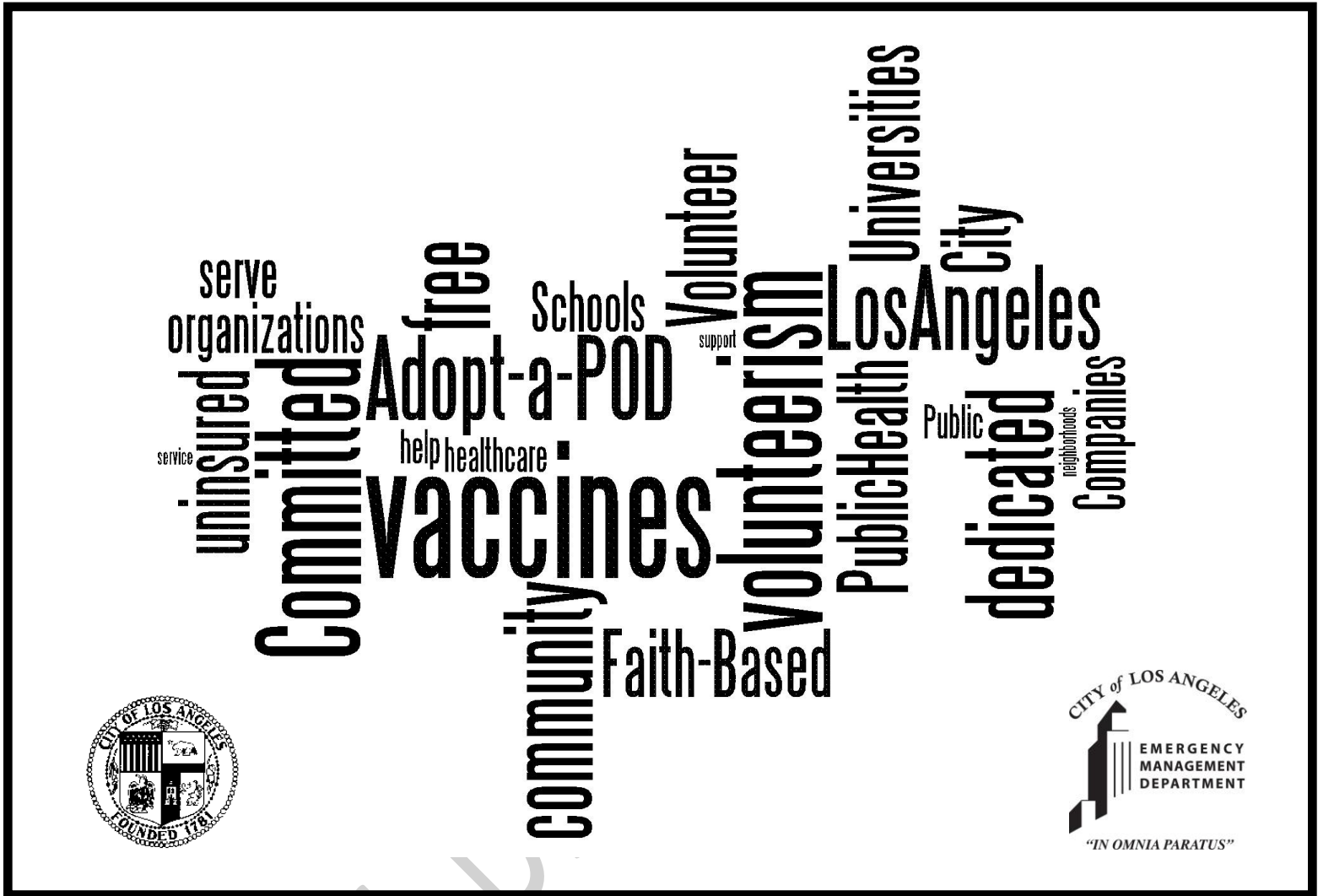
Date	POD Site	Type	City	Facility Owner	RAP Region	OPS	LAPD	Council District
21-Nov	Harvard Recreation Center	Manage	Los Angeles	RAP	Pacific	Central	77th	8
	Lincoln Park Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	1
	MacArthur Park	Manage	Los Angeles	RAP	Metro	Hollywood	Rampart	1
	Ritchie Valens Recreation Center	Manage	Pacoima	RAP	Valley		Foothill	7
22-Nov	Harvard Recreation Center	Manage	Los Angeles	RAP	Pacific	Central	77th	8
	Lincoln Park Recreation Center	Manage	Los Angeles	RAP	Metro	Metropolitan	Hollenbeck	1
	MacArthur Park	Manage	Los Angeles	RAP	Metro	Hollywood	Rampart	1
	Ritchie Valens Recreation Center	Manage	Pacoima	RAP	Valley		Foothill	7
	Wilmington Recreation Center	Manage	Wilmington	RAP	Pacific	Harbor	Harbor	15
5-Dec	LA Valley College	Support	Van Nuys	CCC	n/a	n/a	Van Nuys	2
6-Dec	LA Valley College	Support	Van Nuys	CCC	n/a	n/a	Van Nuys	2

FINAL DRAFT, 4/22/20



**ATTACHMENT 4: Major EMD-Led City Briefings and City Outreach**

DATE	GROUP	TOPIC
August 19-20, 2009	Annual Emergency Management Conference	Overview of H1N1 vaccination program to Department General Managers, Assistant General Managers and Emergency Planners
August 26, 2009	Initial Planning Briefing for City Departments	Vaccination program role out to departments
August 27, 2009	City Public Information Officers Briefing	Vaccination program role out to department public information officers
September 2, 2009	Emergency Management Committee Briefing	Update for Committee
September 9, 2009	Emergency Operations Board	Update for Board
September 10, 2009	Security Planning Meeting with LAPD and GSD-OPS	Meet to develop security plans for PODs
September 10, 2009	Department on Neighbor Empowerment	Meet to develop plan for use of Neighbor Committees as volunteers to staff PODs
September 15, 2009	Fire Chief Briefing	General briefing
September 16, 2009	Mid-Planning Briefing for City Departments	Update briefing
September 17, 2009	Meet with Dept on Transportation on traffic planning	Meeting to develop traffic plans for PODs
September 23, 2009	Briefing for Mayor Villaraigosa	General briefing
September 24, 2009	Briefing for Recreation and Parks Management	General briefing
October 2, 2009	Emergency Management Committee Briefing	Update for Committee
October 7, 2009	Final Planning Briefing for City Departments	Update briefing
October 15, 2009	Notification of cancellation of first week of PODs	Cancellation notice
October 16, 2009	Mayor's Office Staff Briefing	General briefing
October 20-21, 2009	POD Coordinator Training	Training
November 2, 2009	City Council Staff Briefing	General briefing
November 4, 2009	Emergency Management Committee Briefing	Update for Committee
November 5, 2009	POD Coordinator Training	Training
November 6, 2009	Memo to Departments of site cancellations	Cancellation notice
November 16, 2009	Emergency Operations Board Briefing	Update for Board
November 17, 2009	POD Coordinators Training	Training
December 2, 2009	Emergency Management Committee Briefing	Update for Committee.
December 9, 2009	Memo to city department regarding cancellation of remainder of PODs.	Cancellation notice



# ADOPT-A-POD.

We are looking for organizations, schools, individuals and companies who are committed to serving their communities and are seeking meaningful volunteer opportunities.

The 2009 H1N1 Influenza Vaccination Program, sponsored by the Los Angeles County Department of Public Health and the City of Los Angeles Emergency Management Department (EMD), is the largest vaccination campaign in our nation’s history. We are working to provide FREE H1N1 Vaccinations to hundreds of thousands of Angelenos, and can only do it with your support.

2500 volunteers will be needed on Fridays, Saturdays, and Sundays to help run these important community-based Points of Dispensing (PODs). No prior experience or training is necessary.

To ADOPT-A-POD, an individual or organization will recruit 15-20 volunteers to serve at a City-appointed POD location. EMD will provide training and on-going support to the Adopt-A-POD Coordinator.

For more information on dates and locations or to Adopt-A-POD, visit [www.lacity.org/emd](http://www.lacity.org/emd) or contact Devra.Brukman@lacity.org or Steve.Dargan@lacity.org.

Program Sponsored by the City of Los Angeles Emergency Management Department

**CITY OF LOS ANGELES EMERGENCY MANAGEMENT DEPARTMENT  
ADOPT-A- POD (Point of Dispensing) PROGRAM  
2009 H1N1 INFLUENZA VACCINATION CAMPAIGN**

**ADOPT-A-POD Coordinator Description**

An Organization's ADOPT-A-POD Coordinator must be willing and able to:

- Work under the direction of the City of Los Angeles Emergency Management Department (EMD).
- Work in partnership with the Los Angeles County Department of Public Health (LACDPH) and other participating agencies.
- Recruit 15-20 reliable, professional volunteers (over the age of 18).
- Assure that volunteers will be notified of the location, arrival time and work commitment.
- Ensure that a minimum of 25 volunteers report to the POD by 8:15am on the day of the operation.
- Participate in a one-hour training/planning meeting conducted by EMD.
- Work the complete POD shift (8:00am – 5:00pm), and serve as the Assistant to the POD Manager(s).
- The ADOPT-A-POD Coordinator must have strong verbal communication skills and be fluent in English.

**Each POD Coordinator and volunteer will be offered a FREE H1N1 Vaccine.**

**What is a POD?**

A POD is a location that is established to dispense medication to the community at large during a limited, defined time frame. It is not a treatment facility; it is established to provide medication or administer vaccines to those who may have been or could be exposed to an agent but are not symptomatic.

As of fall 2009, the City of Los Angeles Emergency Management Department (EMD) has pre-identified and developed POD plans for 59 sites. We will be activating 103 PODs at 18 locations across the City so that together with the Los Angeles County Department of Public Health, hundreds of thousands of people can receive a FREE vaccine. Each POD is set-up to vaccinate 500 people per hour.

**The H1N1 Influenza Vaccine**

Since vaccines are the best tool to prevent influenza, the Los Angeles County Department of Public Health (LACDPH), in concert with the Center for Disease Control, is working to provide the H1N1 Influenza vaccine to hundreds of thousands of Angelenos.

The CDC recommends that the following people who fall in one of the following categories get priority vaccination:

- pregnant women,
- people who live with or care for children younger than 6 months of age,
- people ages 6 months - 24 years,
- people ages 25 - 64 years with chronic health disorders or compromised immune systems,
- healthcare and emergency services personnel with direct patient care responsibilities.

LACDPH estimates that 5.4 million County residents fall into one of these priority categories and that close to one million are uninsured.

For more information on dates and locations, visit [www.lacity.org/emd](http://www.lacity.org/emd).  
To ADOPT-A-POD, contact [Devra.Brukman@lacity.org/213-484-4807](mailto:Devra.Brukman@lacity.org) or  
[Steve.Dargan@lacity.org/213-484-4811](mailto:Steve.Dargan@lacity.org).

# **EVENT ACTION PLAN**

## **MACARTHUR PARK RECREATION CENTER**

**NOVEMBER 21 & 22, 2009**

**THIS EVENT ACTION PLAN  
IS PUBLIC SAFETY SENSITIVE.**

***BECAUSE OF THE DYNAMIC NATURE OF A PUBLIC HEALTH EVENT, THIS PLAN IS  
SUBJECT TO CHANGE ON SHORT NOTICE.***

Refer any questions to [name and contact information removed]

<b>ICS 202 - EVENT OBJECTIVES</b>	<u>INCIDENT NAME</u>	<u>DATE</u>
	<b>MACARTHUR PARK RECREATION CENTER POINT OF DISPENSING</b>	<b>November 21 &amp; 22, 2009</b>

**OPERATIONAL PERIOD (0700-1930 hours)**

0700 hours Facility Opened by Recreation and Parks Staff  
0700-0815 hours - Clinical and Non-clinical Set-up. Clinical (LACDPH) and Non-Clinical (LA City) Staff Arrive and Check-in  
0830-0900 hours - Safety Briefing and Just-In-Time Training  
0900-1700 hours - Vaccinating\*\*\*  
1700-1930 hours - Clean-up \*\*\*

**\*\*\* These times are subject to change by the POD Managers depending on client volume and other conditions.**

**GENERAL CONTROL OBJECTIVE FOR THE INCIDENT**

To facilitate the safe distribution of H1N1 vaccine by Los Angeles County Department of Public Health.

**MANAGEMENT OBJECTIVES**

1. Establish a Unified Command with the Los Angeles County Department of Public Health.
2. Make contact with facility representatives; review non-POD activities scheduled for the day to gain situational awareness; and receive guidance from facility representative on anything unique about facility. Review facility details, maps, floor plan, photos, general safety information.
3. Review with facility representative the locations of fire alarms, fire extinguishers and emergency exit routes.
4. Provide a secure environment for clients and staff using LAPD, GSD Office of Public Safety and private security.
5. Adjust non-clinical staff as shown on the Organizational Assignment List (ICS 203) form if positions are unfilled due to staff absences.

**CONTROL OBJECTIVES**

1. Closely monitor each site and adjust staffing as necessary.
2. Facilitate the movement of traffic around each POD.
3. Deploy sufficient staff to meet the POD demands.
4. Deploy security at each site.

**WEATHER FORECAST FOR OPERATIONAL PERIOD**

If hazardous weather is predicted appropriate action will be taken to help mitigate its effects.

**GENERAL / SAFETY MESSAGE**

*See Safety Briefing.*

**ATTACHMENTS**

3	ORGANIZATIONAL LIST (203)	9	MEDICAL PLAN (ICS 206)	15	POD COORDINATOR CHECKLIST
4	ORGANIZATION CHART POSITION DETAILS	10	CLIENT INJURIES GUIDELINES	16	DEMOBILIZATION PLAN
5	SECURITY STRATEGIES AND RESOURCES	11	GENERAL/SAFETY BRIEFING	17	MANAGER ACTIVITY LOG (ICS 214)
6	POD LAYOUT, DETAILS AND CLIENT FLOW	12	EVENT OVERVIEW	18	SECURITY ACTIVITY LOG (ICS 214)
6	FLOW CONTROL – LINE MONITOR POSTS	13	H1N1 BACKGROUND	19	POD COORDINATOR LOG (ICS 214)
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8	COMMUNICATIONS PLAN (ICS 205)	14	POD MANAGER CHECKLIST		

ORGANIZATION ASSIGNMENT LIST (ICS 203)		LOCATION		DATE
		MACARTHUR PARK RECREATION CENTER		November 21 & 22, 2009
<b>MANAGEMENT</b>		<b>OPERATIONS</b>		
CITY POD MANAGER		CHIEF	County	
COUNTY POD MANAGER	County	<b>CLINICAL</b>		
POD ASSISTANT (POD COORDINATOR)		CLINICAL BRANCH SUPERVISOR	County	
SAFETY OFFICER	City or County	<b>FORM DISTRIBUTION</b>		
<b>AGENCY REPRESENTATIVES</b>		SUPERVISOR	County	
<b>AGENCY</b>		TEAM LEADER	County	
	<b>NAME</b>	STAFF		
		STAFF		
		STAFF		
		RUNNER		
		<b>REGISTRATION/SCREENING</b>		
		TEAM LEADER	County	
		STAFF		
		STAFF		
<b>PLANNING</b>		STAFF		
SUPERVISOR/DOCUMENT	County	STAFF		
<b>LOGISTICS</b>		STAFF		
SUPERVISOR	County	RUNNER		
<b>SUPPLY</b>		<b>DISPENSING</b>		
SUPERVISOR (PHARMACY)	County	SUPERVISOR	County	
STAFF (TECH/COMMUNICATION)	County	TEAM 1 LEADER	County	
<b>PERSONNEL</b>		DISPENSING STAFF	County	
SUPERVISOR	County	DISPENSING STAFF	County	
PERSONNEL STAFF		DISPENSING STAFF	County	
FLOATER STAFF		DISPENSING STAFF	County	
		DISPENSING STAFF	County	
		TEAM 2 LEADER	County	
<b>SET-UP/CLEAN-UP (Optional)</b>		DISPENSING STAFF	County	
SUPERVISOR		DISPENSING STAFF	County	
SET-UP		DISPENSING STAFF	County	
SET-UP		DISPENSING STAFF	County	
CLEAN-UP		DISPENSING STAFF	County	
CLEAN-UP		RUNNER	County	
<b>PARKING LOT (Optional)</b>		<b>EVALUATION</b>		
SUPERVISOR		SUPERVISOR	County	
STAFF		STAFF	County	
		STAFF	County	
		STAFF	County	
		RUNNER		
		<b>FLOW CONTROL</b>		
		SUPERVISOR	County	
		LINE MONITOR		
		LINE MONITOR		
		LINE MONITOR		
		LINE MONITOR		
		<b>QUESTION AND ANSWER</b>		
		SUPERVISOR	County	
		STAFF	County	
		<b>SECURITY (Staffing varies per site)</b>		
		SUPERVISOR (LAPD/OPS)		
		ARMED SECURITY (LAPD/OPS)		
		ARMED SECURITY (LAPD/OPS)		
		ARMED SECURITY (LAPD/OPS)		
		UNARMED CONTRACT SECURITY		
		UNARMED CONTRACT SECURITY		

**ORGANIZATIONAL CHART POSITION DETAILS  
MACARTHUR PARK RECREATION CENTER  
H1N1 VACCINATION POD**

<b><u>POSITION</u></b>	<b>GENERAL DUTIES (Specific duties will be provided at the Just-In-Time Training on the Job Action Sheets)</b>
POD MANAGER	Responsible for the overall management of the POD. Determine incident objectives and strategy. Liaison with internal and external agencies. Report to City POD Desk.
POD DEPUTY (POD COORDINATOR)	Recruit volunteers to work at POD and assure they are notified of the location, arrival time and work commitment, assist POD Managers and other command staff as needed, arrive 90 minutes prior to opening and coordinate set-up, remain 60 minutes after closing and coordinate clean-up.
SAFETY	Ensure safety of staff and clients. Be vigilant for unsafe activities and correct if found.
PUBLIC INFORMATION	Assure proper and correct communications with media and public.
PLANNING	Collect, evaluate, and manage incident and resource information. Keep informed of current POD situation. Forecast future POD status. Maintain POD documentations
LOGISTICS	Responsible for supply acquisition, equipment, communications. Maintain inventory and adequate supplies. Sustain personnel resources
OPERATIONS	Oversee all activities in the clinical Branch which includes form distribution, registration/screening, dispensing, evaluation, flow control and question and answer.
SUPPLY	Orders, receives, stores, and maintains pharmaceutical inventory. Ensures adequate POD supplies and resources.
PERSONNEL	Checks-in and out personnel. Issue job action sheets. Oversees the condition of personnel. Fill in as needed during staff breaks, etc.
SET-UP/CLEAN-UP	Coordinate set-up according to facility plan. Clean-up at the conclusion of the POD.
PARKING LOT	Directs clients to parking lot. Direct clients from parking lot to POD entrance.
CLINICAL BRANCH	Oversee all activities in form distribution, registration/screening, dispensing, evaluation, flow control and question and answer, and vaccine prep.
FORM DISTRIBUTION	Distributes forms at the queuing area (along with clipboards and pens).
REGISTRATION/SCREENING	Screens clients for special needs, reviews completed forms, direct clients to next station.
DISPENSING	Checks registration/screening form. Provides standard medication and medication instruction sheet to clients. Maintains client flow for efficient distribution. Assesses and dispenses medication to clients with identified risk factors.
EVALUATION	Provides medication and instruction sheet to clients with a variety of special needs. Provides dispensing services to families issues referrals for clients needing additional medical care.
FLOW CONTROL	Directs clients throughout the POD to ensure efficient flow. Assigned with location and task per job action sheets.
QUESTION/ANSWERS	Distributes additional information. Answers questions. Direct clients to POD exit
SECURITY	Establishes a law enforcement presence. Calls for back-up as necessary. Directs street traffic to ensure effective traffic management in the immediate area around the site.

**MACARTHUR PARK RECREATION CENTER POD LAYOUT, DETAILS and CLIENT FLOW**

**POD Footprint Details**

POD Stations(s)	Form Distribution, Seated Waiting Area, Registration & Screening, Dispensing, Evaluation, Q&A, Vaccine Prep
Designated space	Gym/Dance Room
Estimated size in square feet	2000
Number of entrances/exits to/from the outdoors	1
Number of entrances/exits to/from the facility	1

**Incident Command Post and Designated Staff-Only Area**

Room designated for the Incident Command Post	Kindergarten Room
Room designated for POD staff breaks	Kitchen
Additional space available for a rest area for POD staff	On 3 <sup>rd</sup> Floor, as available per Rec Center Staff
Space designated for Documentation/Personnel Station	Kindergarten Room

**POD Client Flow**

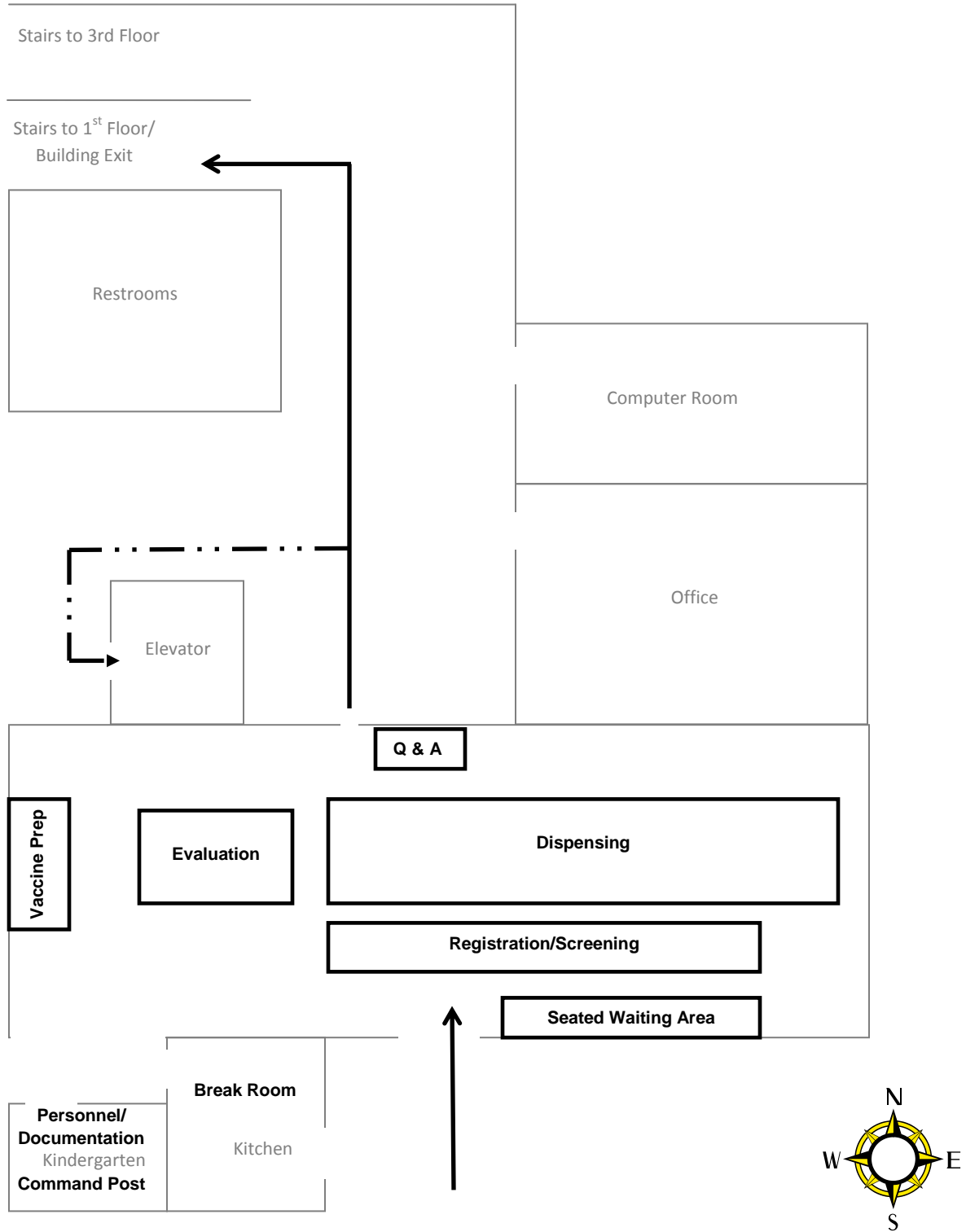
Description of POD Flow, including outdoor queuing area and exit route	<p>The queue will begin 5 to 10 feet from the south gate, and will continue along the park path (ideally north through the park). A line monitor will be posted at the front of the queue, and will communicate with a line monitor stationed just inside the exterior entry doors to direct client movement into the Gym/Dance Floor (Dispensing Floor). A seated Waiting Area is available on the south side of the Gym.</p> <p>A line monitor will guide clients to the Registration &amp; Screening Station, and will queue clients east of the Registration &amp; Screening Station if necessary prior to directing them to the Dispensing and Evaluation stations. Clients will then be directed to either the Dispensing station located on the east side of the Gym, or the Evaluation station located on the west side of the Gym. The Vaccine Prep table will be set-up along the west wall (in one of the nooks to conserve floor space for Dispensing/Evaluation). The Question and Answer (Q&amp;A) station will be located adjacent to the north Gym doors, which will be the designated client exit. A line monitor will direct clients to the Q&amp;A station and/or to the Gym exit. Clients will then be directed to exit the facility via the stairs to the 1<sup>st</sup> floor or the elevator.</p>
Accessibility considerations	<p>The elevator should be limited to people who need access due to a stroller, wheel chair, physical disability, etc. All others should be directed to use the stairs down to the 1<sup>st</sup> floor to maintain a steady flow of clients exiting the facility.</p> <p>A line monitor or security staff should monitor use of the elevator and use of the stairs to the 3<sup>rd</sup> floor, as the Center's office is upstairs and they will be having regularly scheduled Center activities in the 3<sup>rd</sup> floor Music Room and Senior Room.</p>



**RECREATION CENTER POD FLOW CONTROL – LINE MONITOR POSTS**

<b><u>Line Monitor Post Locations</u></b>	<b><u>Description of Functions and Duties</u></b>
<p align="center">South Gate (Front of Queuing Area)</p>	<p>Direct clients to begin queuing 5 to 10 feet from the south gate, and direct clients to continue queuing along the path, winding north through the park. Communicate and coordinate with the line monitor inside the facility, and instruct clients to proceed into the POD facility as space becomes available. Direct clients to the Seated Waiting Area as needed.</p>
<p align="center">POD Entrance (South Exterior Doors - Inside the Gym )</p>	<p>Direct movement between the queue and the Gym, and control the rate of entry inside the facility. Communicate and coordinate with the line monitors at Registration &amp; Screening to facilitate the flow of clients. Direct clients to the Seated Waiting Area as needed.</p>
<p align="center">Registration &amp; Screening Station</p>	<p>Queue clients after the Registration and Screening station if Dispensing &amp; Evaluation Stations as occupied. Direct clients to available Dispensing/Evaluation stations as they become available.</p>
<p align="center">Gym North Interior Doors</p>	<p>Direct clients to the Q&amp;A station and designated client exit.</p>
<p align="center">2<sup>nd</sup> Floor Lobby/Foyer</p>	<p>Direct clients to the elevator as needed or the stairs to the 1<sup>st</sup> floor. The elevator should be limited to people who need access due to a stroller, wheel chair, physical disability, etc. All others should use the stairs down to the 1<sup>st</sup> floor to maintain a steady flow of clients exiting the facility.</p>

**MACARTHUR PARK RECREATION CENTER POD LAYOUT, SET-UP and CLIENT FLOW**



**SECURITY STRATEGIES and RESOURCES**

<p>Security measures and procedures for the delivery and storage of medical supplies.</p>	<ul style="list-style-type: none"> <li>• Public Health owns and manages all vaccine and medical supplies.</li> <li>• Vaccine will be delivered in the morning by a Public Health contractor. It will be signed for and secured by the designated Public Health staff. Remaining vaccine will be picked-up in the evening.</li> <li>• Medical supplies (other than vaccine) will be delivered by a different Public Health Contractor in the morning and any excess will be picked-up in the evening.</li> <li>• Other supplies will be delivered by a 3<sup>rd</sup> Public Health Contractor in the morning and picked-up in the evening.</li> <li>• No supplies will be left in the facility each evening without the City POD Manager consulting with Recreation Center staff.</li> </ul>
<p>Security measures and procedures for managing the facility.</p>	<ul style="list-style-type: none"> <li>• Security personnel are positioned where they serve as a highly visible deterrent to disorderly behavior.</li> <li>• With exception to the main facility entrance and the POD entrance/exit doors in the gym, all doors will remain locked with exit-only access via the panic bar unless otherwise requested by the facility.</li> <li>• The facility is open for business as usual. Only the rooms used for the vaccination POD are closed to normal center activities.</li> <li>• The POD Manager and Security Detail must develop a plan to restrict the Command Post and Break Room to POD staff only – the hallway leading from the Basketball Court southeast towards the Main Office should be restricted to POD clients. This can be done with barricades or the posting of private security officers.</li> <li>• POD staff will be instructed not leave their personal effects unattended.</li> <li>• Clients should be prohibited from using restrooms on the 2<sup>nd</sup> floor (where dispensing is taking place) unless deemed necessary. Clients should be directed to use the restrooms on the 1<sup>st</sup> floor (adjacent to the POD exit).</li> <li>• A security post on the 2<sup>nd</sup> floor landing will help direct clients to the 3<sup>rd</sup> floor (office and regularly scheduled Rec Center activities) when necessary and prohibit clients from entering the POD (2<sup>nd</sup> floor) through the exit.</li> <li>• Use of the elevator should be monitored by security, as the Rec Center has experienced extensive issues with kids “joyriding” in the elevator.</li> <li>• Security personnel are positioned throughout the facility and surrounding area to monitor client safety and detect disorderly behavior as early as possible.</li> <li>• Marked security/police vehicles should be visible to clients entering and exiting the facility.</li> </ul>
<p>Additional strategies</p>	<p>Lines for the vaccine may start well before the opening of the POD. The line should be moved/redirected as necessary to stay within the Park.</p>

**KEY INFORMATION**

- Security will arrive by 8:30am and will remain until 5:30pm. The City POD Manager should consult with the Security Detail at 4:00pm and determine if any security issues may delay the departure of security.
- The site will have the capability of dispensing vaccinations over an 8 hour period.
- There is no charge for the vaccination and only those who could have a medical complication from the vaccine will be denied.
- County Public Health will be doing enhanced screening which will lead to individuals being refused the vaccine because they are not in one of the priority categories. A banding system may be implemented to identify clients as being part of the target groups.
- In the event of criminal activity or civil unrest, all POD staff will remain inside the building until cleared to leave by Security.
- LAPD and/or GSD-OPS will be responsible for calling for additional assistance if needed.
- The security deployment for this site was determined jointly by LAPD and GSD-OPS Planners.

**SECURITY RESOURCES ASSIGNED**

Los Angeles Police Department - Two (2) Armed Officers  
 General Services Department Office of Public Safety – Two (2) Armed Officers  
 Contract Security - Two (2) Unarmed Officers

**INCIDENT RADIO COMMUNICATIONS PLAN (ICS Form 205)**

**LOCATION: MACARTHUR PARK RECREATION CENTER**

**DATE: NOVEMBER 21 & 22, 2009**

<b><u>DEVICE</u></b>	<b><u>Channel</u></b>	<b><u>Assignment</u></b>	<b><u>Remarks</u></b>
CELL PHONE  E-Mail	[name and contact information removed]	POD Desk	This phone is for the POD Managers to report any problems and provide regular updates on the POD's operation and vaccination numbers. The POD Manager must call this number when they arrive at the POD site.  If POD Manager can send e-mail from the POD, routine messages should be sent by e-mail.

**IF RADIOS ARE PROVIDED BY COUNTY PUBLIC HEALTH PLEASE RECORD THEIR ASSIGNMENT.**

**IF CELL PHONES ARE USED PLEASE INCLUDE PHONE NUMBERS.**

<p align="center"><b>MEDICAL PLAN (ICS 206)</b></p>	<p align="center"><b>POD LOCATION: MACARTHUR PARK RECREATION CENTER</b></p>
<p align="center"><b><u>Ambulance Services</u></b></p> <p align="center"><b>Ambulance service will be provided by the Los Angeles Fire Department through the 9-1-1 system.</b></p>	
<p align="center"><b><u>Incident Ambulances</u></b></p> <p align="center"><b>No ambulances are assigned to the POD. Render care until the ambulance arrives.</b></p>	
<p align="center"><b><u>Hospitals</u></b></p>	
<p align="center"><u>Name</u></p>	<p align="center"><u>Address</u></p>
<p align="center">St. Vincent Medical Center</p>	<p align="center">2131 W 3rd St, Los Angeles, CA (213) 484-7111</p>
<p align="center"><b><u>Medical Emergency Procedures</u></b></p>	
<ul style="list-style-type: none"> <li>• Staff who has a <b><u>reaction to the H1N1 vaccine</u></b> will be assessed and treated by the Public Health Clinical Staff. The Operations Section or Clinical Branch Supervisor will make the determination if 9-1-1 is to be called. If there is a Public Health Physician present, they shall assume all patient care responsibility for the patient. Send a runner to the street to direct the ambulance crew to the client/patient.</li> <li>• If staff suffers a <b><u>medical emergency outside of the POD facility</u></b>, care shall be rendered and 9-1-1 <b><u>shall</u></b> be called. The Public Health Clinical Staff may render care, but may not assume patient care responsibility. Send a runner to the street to direct the ambulance crew to the patient.</li> <li>• Once the LAFD ambulance crew arrives, they will assume patient responsibility unless a physician is present.</li> <li>• <b><u>If staff refuses medical care and/or transport to the hospital</u></b>, the refusal <b><u>shall</u></b> be documented on the Activity Log (ICS 214). The greatest source of liability for health care providers is a patient who refuses care with being explained to possible adverse consequences of that refusal.</li> <li>• Transport of a staff to a hospital will be according to Los Angeles County Emergency Medical Services Protocol.</li> <li>• Treatment of a staff will be to Los Angeles County Emergency Medical Services Protocol unless responsibility for the patient is assumed by a physician or the patient refuses care or transport under informed conditions.</li> </ul>	

## **CLIENT INJURY GUIDELINES**

- Clients who have a **reaction to the H1N1 vaccine** will be assessed and treated by the Public Health Clinical Staff. The Operations Section or Clinical Branch Supervisor will make the determination if 9-1-1 is to be called. If there is a Public Health Physician present, they shall assume all patient care responsibility for the client/patient. Send a runner to the street to direct the ambulance crew to the patient.
- If a client suffers a **medical emergency outside of the POD facility**, care shall be rendered and 9-1-1 **shall** be called. The Public Health Clinical Staff may render care, but may not assume patient care responsibility. Send a runner to the street to direct the ambulance crew to the client/patient.
- **If staff refuses medical care and/or transport to the hospital**, the refusal **shall** be documented on the Activity Log (ICS 214). The greatest source of liability for health care providers is a patient who refuses care with being explained to possible adverse consequences of that refusal.
- Once the LAFD ambulance crew arrives, they will assume patient responsibility unless a physician is present.
- Transport of a client to a hospital will be according to Los Angeles County Emergency Medical Services Protocol.
- Treatment of a client will be to Los Angeles County Emergency Medical Services Protocol unless responsibility for the patient is assumed by a physician or the patient refuses care or transport under informed conditions.

## **GENERAL BRIEFING – TALKING POINTS FOR POD MANAGER**

- If you have not checked in with the registration desk, you must do so immediately after the briefing.
- Thank you to everyone who will be helping today. Your commitment of time is very much appreciated.
- The purpose of the POD is to make available to the public the H1N1 vaccine.
- There is no photography within the facility. Report any unauthorized photography to the Command Post.
- Please do not speak with the media. Notify the Command Post if the media arrives.
- The doors will open at 9:00am and will close at 5:00pm. You will be notified if these times change.
- Lunch will arrive approximately Noon.
- Please do not leave the facility without completing the check-out process with the registration desk and without notifying your Supervisor.
- Please report any unsafe activities to your Supervisor immediately.
- All POD workers are allowed to receive the H1N1 vaccine. Check with your Supervisor when you can leave your post to go through the POD.
- Please be mindful of your personal items.
- If LAPD, LAFD or General Services Office of Public Safety on-duty personnel arrives for a vaccination, please escort them to the front of the line.

## **SAFETY BRIEFING – TALKING POINTS FOR SAFETY OFFICER**

- The Command Post is located in the Kindergarten Room off of the Gym/Dance Floor.
- The break room is located in the Kitchen.
- The weather for today is forecasted as \_\_\_\_\_. All staff will monitor clients for signs of heat or cold exposure. Report any problems to the Command Post immediately.
- Emergency exits are located (Point out to staff.)
- Security will be provided by LAPD, General Services Office of Public Safety and contract security officers.
- If there is a **medical emergency** notify the Command Post immediately. The Command Post will determine if 9-1-1- is to be called. Render care to the best of your ability.
- If a **fire alarm rings** clients and staff will leave the building to a safe location. Security will monitor all entrances and exits from a safe distance to make sure no one enters the building until the all-clear is given.
- In the event of an **earthquake**, drop-cover-hold until the shaking ends. All staff and clients will leave the building to a safe location. Security will monitor all entrances and exits from a safe distance to make sure no one enters the building until the all-clear is given.
- In the event of **civil unrest**, all staff and clients will remain in the building until police have secured the area.
- If **criminal activity** is observed, security will be notified immediately. Keep the person involved in the activity under observation but do not try to intervene.



## EVENT OVERVIEW

**Name** – MacArthur Park Recreation Center H1N1 Vaccination Point of Dispensing (POD)

**Timeline** - PODs will take place on November 21 & 22, 2009.

**Event** – Mass Vaccination Against the Influenza A, Subtype H1N1 Virus.

**Participants** – The Los Angeles County Department of Public Health will be supported by the following City of Los Angeles Departments:

- Emergency Management Department (Lead Agency of the City of Los Angeles)
- Office of the Mayor
- Recreation and Parks
- GSD – Office of Public Safety
- Los Angeles Police Department
- Department of Neighbor Empowerment
- Transportation
- Human Services
- City Legislative Analyst
- Council Districts

### **Responsibilities -**

The Los Angeles County Department of Public Health will provide the following:

- Clinical POD Manager who will work in a unified command with a City representative. (May not be filled.)
- Clinical staffs to draw up the vaccine, administer vaccinations and patient evaluation.
- Feeding and watering of all POD staff.
- Signage, both interior and exterior.
- Job action sheets for all POD staff.
- Forms and information material related to the H1N1 vaccination program.
- Non-clinical supplies to sustain client participation (e.g. pens, clipboards, etc.)
- Incident command vests and internal communications equipment.

The City of Los Angeles will provide the following:

- POD Manager who will work in a unified command with the County.
- POD Coordinator who will coordinate staffing, set-up/clean-up and support POD Managers.
- Facilities, including tables and chairs.
- Internal and external security.
- Traffic control and support staff.

## **H1N1 BACKGROUND INFORMATION**

### **H1N1 Influenza Overview Provided by the Centers for Disease Control (CDC)**

2009 H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in the United States in April 2009. This virus is spreading from person-to-person worldwide, probably in much the same way that regular seasonal influenza viruses spread. On June 11, 2009, the World Health Organization (WHO) signaled that a pandemic of 2009 H1N1 flu was underway.

Illness with the new H1N1 virus has ranged from mild to severe. While most people who have been sick have recovered without needing medical treatment, hospitalizations and deaths from infection with this virus have occurred.

One thing that appears to be different from seasonal influenza is that adults older than 64 years do not yet appear to be at increased risk of 2009 H1N1-related complications thus far. CDC laboratory studies have shown that no children and very few adults younger than 60 years old have existing antibody to 2009 H1N1 flu virus; however, about one-third of adults older than 60 may have antibodies against this virus. It is unknown how much, if any, protection may be afforded against 2009 H1N1 flu by any existing antibody.<sup>1</sup>

### **Points of Dispensing (POD)**

A POD is a location that is activated by LACDPH when a communicable disease threat is detected by the LACDPH Acute Communicable Disease Control Program to dispense mass prophylaxis to the community at large in order to prevent the spread of a disease. It is not a treatment facility; it is established to administer vaccines to those who may have been or could be exposed to an agent but are not symptomatic. The City of Los Angeles support LACDPH by providing facilities, security, traffic control, and logistical support (including human resources). As of fall 2009, the City of Los Angeles EMD has pre-identified and developed POD Plans for 59 sites.

### **H1N1 Vaccination Program**

Since vaccines are the best tool to prevent influenza, LACDPH, in concert with the CDC and the City of Los Angeles EMD, is working to provide the H1N1 Influenza vaccine to hundreds of thousands of City residents. The CDC recommends that the following people who fall in one of the following categories get priority vaccination:

- pregnant women,
- people who live with or care for children younger than 6 months of age,
- people ages 6 months – 24 years,
- people ages 25-64 years with chronic health disorders or compromised immune systems,
- healthcare and emergency services personnel with direct patient care responsibilities.

### **ADOPT-A-POD PROGRAM**

The 2009 H1N1 Influenza Vaccination Program, sponsored by the Los Angeles County Department of Public Health and the City of Los Angeles Emergency Management Department (EMD), is the largest vaccination campaign in our nation’s history. We are working to provide FREE H1N1 Vaccinations to hundreds of thousands of uninsured Angelenos, and can only do it with your support. 2500 volunteers will be needed on Fridays, Saturdays, and Sundays to help run these important community-based Points of Dispensing (PODs). No prior experience or training is necessary.

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<sup>1</sup> “H1N1 Flu & You.” Centers for Disease Control. September 24, 2009. <<http://www.cdc.gov/h1n1flu/qa.htm>> October 1, 2009.

**POD MANAGER CHECKLIST**

**DUTY: Serves as a single Site Manager and provides overall supervision and leadership at the POD.**

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Check-in with the registration.
Put on the appropriate vest.
Assess the situation.
Meet with the County POD Manager or if that position is not filled, the Operations Section Supervisor.
Contact the POD Desk at [contact information removed] and report status and receive any last minute briefings.
Review Event Action Plan (EAP). If you have any questions contact the POD Desk [contact information removed].
Make contact with facility representatives and review non-POD activities scheduled for the day to gain situational awareness and receive guidance from facility representative on anything unique about facility.
Review with facility representative the locations of fire alarms, fire extinguishers and emergency exit routes.
Adjust non-clinical staff as shown on the Organizational Assignment List (ICS 203) form if positions are unfilled due to staff absences.
Act as the Public Information Officer (PIO) if that position is not filled.
Act as Safety Officer if that position is not filled or assign staff to fill.
Bring all POD workers together and provide General and Safety Briefing.
Ensure that adequate safety and personnel accountability measures are in place.
Prior to opening meet with security and traffic control officers at their location to review strategies. Give them copies of the ICS 214 form and ask them to record and unusual activities.
<b>OPEN POD WHEN ALL STAFF ARE IN POSITION.</b>
Once the POD is open to the public, monitor activities.
Authorize release of information through the POD PIO.
Meet with Section Chiefs at Noon and conduct situational meeting or sooner if needed.
Meet with Section Chiefs at 3:00pm and develop a demobilization plan. (See Demobilization Plan for guidelines.)
Record all activities on the ICS 214 form and the POD Manager Report.
At the conclusion of the POD, collect the ICS 214 from Security.
If there is a POD tomorrow, leave tables and chairs set-up. If there is no POD tomorrow, put away tables and chairs.
Contact the POD Desk at [contact information removed] before you leave the facility.

**RETURN ALL FORMS TO THE EMERGENCY MANAGEMENT DEPARTMENT BY E-MAIL**  
[name and contact information removed]

**POD COORDINATOR CHECK LIST**

An ADOPT-A-POD Coordinator will:

- Work under the direction of the Emergency Management Department (EMD).
- Work in partnership with the LA County Department of Public Health and other participating agencies.
- Recruit volunteers, fill positions, and issue reminders to each volunteer.
- Assure that volunteers will be notified of the location, arrival time and work commitment.
- Participate in a training/planning meeting.
- Work the complete POD shift.

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<b><u>BEFORE THE EVENT</u></b>	
	Recruit 15-20 volunteers to work at POD.
	Assure that volunteers are notified of the PODs location, arrival time and work commitment.
	Review Event Action Plan (EAP). If you have any questions call [name and contact information removed]
<b><u>DAY OF THE EVENT</u></b>	
	Arrive by 7:30am coordinate set-up according the map in the EAP. You will fill the Set-up/Clean-up Supervisor Position.
	During the day maintain an ICS 214 Log.
	Upon arrival at facility call the City POD Desk at [contact information removed].
	Locate POD Manager and introduce yourself.
	Locate the Registration Staff filled by the County Department of Public Health and report your staffing.
	Make sure those volunteers assigned as Staff or Runners on the Organizational Chart are paired up with their County Public Health Supervisors.
	Assist POD Managers and other POD Command Staff as needed by monitoring activities of volunteers and the POD.
	If staffing is reduced during the day, make sure all volunteers check out with you and the Registration Desk.
	At the end of the day, make sure all volunteers check out with you and the Registration Desk.
	Remain after closing and coordinate clean-up. If there is a POD tomorrow, leave tables and chairs set-up. (After a Friday or Saturday event) If there is no POD tomorrow, put away tables and chairs. (After a Sunday event)
	Before you leave the facility call the City POD Desk at [name and contact information removed].
<b><u>NEXT COUPLE OF DAYS</u></b>	
	Send any comments or suggestions for improvement to [name and contact information removed]

<b>ICS 221 – DEMOBILIZATION PLAN</b>	<b>LOCATION:</b> <b>MACARTHUR PARK RECREATION CENTER</b>	<b>DATE:</b> <b>November 21 &amp; 22, 2009</b>
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**OBJECTIVE: To not allow clients to continue to line up and wait long periods of time, only to be told that there is not more vaccine.**

- The scheduled closing of the POD is 1700 hours and the facility must be cleared out and turned back over to the Recreation and Parks staff by 1930 hours.
- At 1500 hours a planning meeting should be held to start planning the closing of the facility.
- At the planning meeting consider the number of clients in line, the amount of vaccine left and the through-put per hour.
- If the amount of available vaccine is projected to run out before the 1700 hours closing, a line monitor must be placed at the end of the line to advise clients that only those in line are guaranteed vaccine.
- If there is sufficient vaccine to last to 1700 hours, bring the line inside the facility and close the door if there is room for them. If the facility is not large enough to handle the line, place line monitors at the end of the line and advise the public the facility is closed.
- If the line is going to be closed due to the vaccine running out before 1700 hours, place a line monitor with information on other future POD locations.

<b>ICS 214 – ACTIVITY LOG</b>	<b>LOCATION:</b> <b>MACARTHUR PARK RECREATION CENTER</b>	<b>DATE:</b>
<b>NAME:</b>	<b>POSITION:</b> <b>POD MANAGER</b>	
<b><u>ACTIVITY LOG</u></b>		
TIME ARRIVED:		
SET-UP COMPLETE:		
GENERAL AND SAFETY BRIEFING:		
DOORS OPEN FOR SERVICE:		
TOTAL VACCINATIONS AT 11:00am:		
TOTAL VACCINATIONS AT 1:00pm:		
TOTAL VACCINATIONS AT 3:00pm:		
TOTAL VACCINATIONS AT 5:00pm:		
DOORS CLOSED:		
FACILITY CLOSED:		
<b><u>SIGNIFICANT EVENTS</u></b>		
<b><u>TIME</u></b>		
<b><u>GENERAL COMMENTS AND SUGGESTIONS FOR IMPROVEMENTS</u></b>		
COMPLETED BY:	DATE:	

<b>ICS 214 – ACTIVITY LOG</b>	<b>LOCATION:</b> MACARTHUR PARK RECREATION CENTER	<b>DATE:</b>
<b>NAME:</b>	<b>POSITION:</b> SECURITY	
<b><u>SIGNIFICANT EVENTS</u></b>		
<b><u>TIME</u></b>		
<b><u>GENERAL COMMENTS AND SUGGESTIONS FOR IMPROVEMENTS</u></b>		
<b>COMPLETED BY:</b>	<b>DATE:</b>	

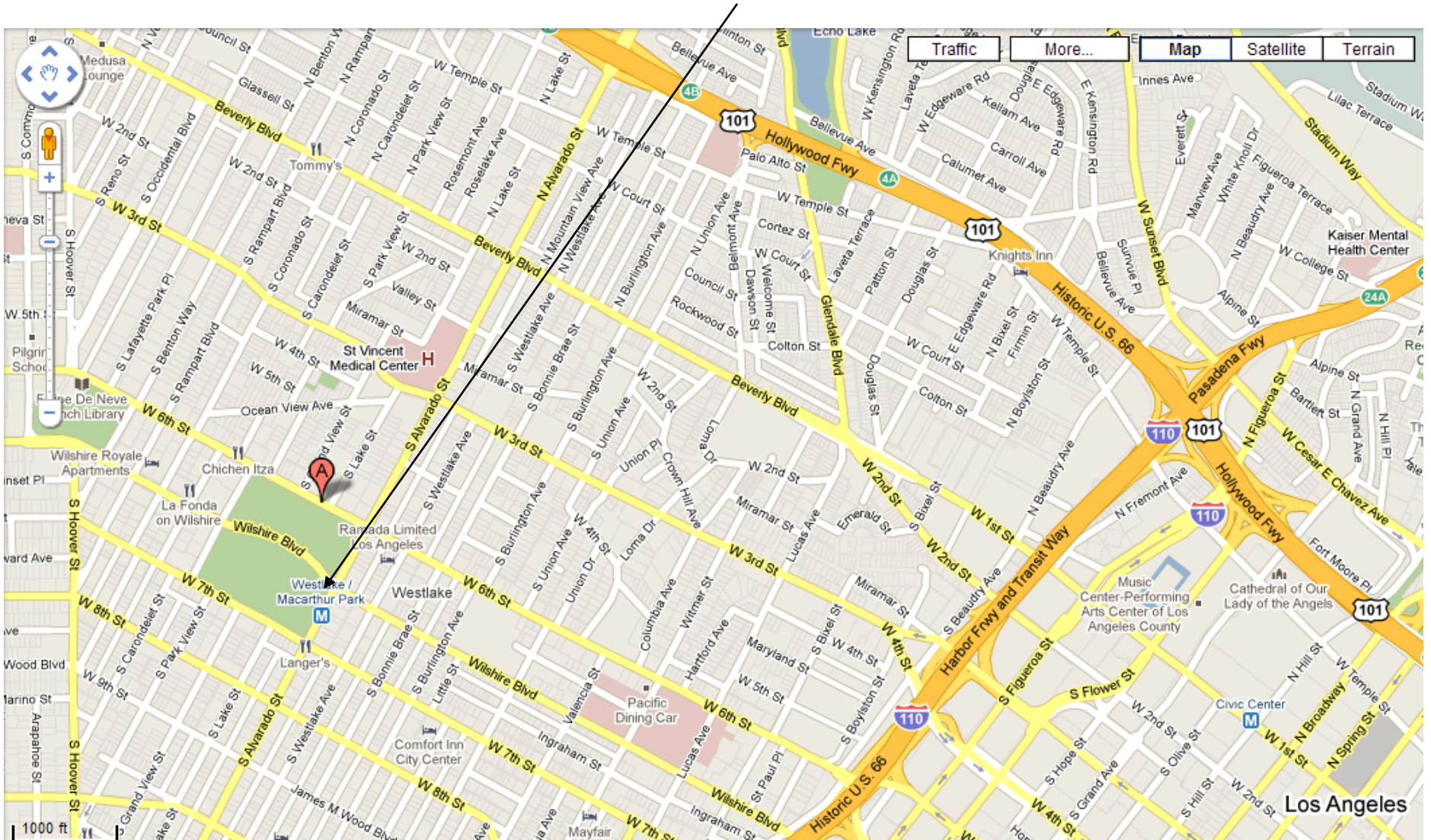
<b>ICS 214 – ACTIVITY LOG</b>	<b>LOCATION:</b> MACARTHUR PARK RECREATION CENTER	<b>DATE:</b>
<b>NAME:</b>	<b>POSITION:</b> ADOPT-A-POD COORDINATOR	
<b><u>SIGNIFICANT EVENTS</u></b>		
<b><u>TIME</u></b>		
<b><u>GENERAL COMMENTS AND SUGGESTIONS FOR IMPROVEMENTS</u></b>		
<b>COMPLETED BY:</b>	<b>DATE:</b>	



## FACILITY LOCATION

MacArthur Park Recreation Center

2230 W 6th St, Los Angeles



PUBLIC SAFETY SENSITIVE DOCUMENT