



Public Information and Communications Challenges: Mobilizing the public to and through dispensing sites or PODS (*Points of Dispensing*)

This document originated from the **PIC Toolkit Workgroup Meeting** hosted by SNS in April 2004 kicking off the SNS Public Information and Communications (PIC) Toolkit. Twelve public information/communications and mass dispensing experts were selected from across the country and invited to come to Atlanta. During the 2 1/2 day meeting, we discussed strategies, shared resources and began building the SNS PIC Toolkit.

At the National Public Health Information Coalition (NPHIC) meeting in Boston (October 2004), we began forming the SWAT (**S**pecial **W**orkgroup to **A**mplify the **T**oolkit) Team to take this work one step further and identify tools that have been developed by state and local planners to address the messages described in this document.

One thing is clear: regardless of the perspective for tackling this issue (either “mobilizing the public to go to PODs” or “moving the public through the PODs”) the messages are the same. The communication channels or vehicle may change for different settings (i.e. providing messages via media video, audio Public Service Announcement or signage at the POD), but the content of the messages must be consistent and coordinated. It is critical to develop your messages at the broadest level possible (state and regional) to ensure consistency, but to anticipate and encourage modification at the local level to address needs and challenges for the local community and special populations.

What is different if the SNS is deployed? (And what is the same?)

Communities already have experience in coming together and informing the public in an emergency situation. Public information and communications specialists deal with informing, educating and communicating with the public about health related and emergency situations on a regular basis.

When the SNS is deployed, there is the added challenge of mobilizing the public to obtain prophylactic antibiotics and to adhere to a treatment regimen for a period of time after the event (up to 60 days for anthrax). This challenge is similar to the public information and communications challenges for mass vaccination, quarantine, shelter-in-place, and mass evacuations. In each of these instances, we are not only informing and educating the public, but also asking them to “do something” in response to our messages.

Recent information about the potential for an outdoor release of an infectious agent such as anthrax requires that we have the capacity to provide antibiotics to very large populations in very short timeframes. The ability to effectively inform, educate and mobilize the public will be critical to the success of any mass prophylaxis effort. The bullet points that follow are not meant to serve as comprehensive checklists of public information and communications activities to support mass dispensing activities. They are simply a starting point to assist planners in identifying the special considerations when SNS assets are deployed. The SWAT Team will continue to build and develop tools in the SNS PIC Toolkit for the items listed on the following pages, and we welcome your contributions and support.



The communications specialists at the PIC Toolkit Meeting identified a variety of communications channels and tools to deliver the messages. Some will be appropriate for many of the message stages, and some will be better for special situations. Consider each of the communications channels/tools as you plan for the best way to deliver your messages.

The Communications Channels/Tools:

- News release
- Web sites (Agency/Partners/Media)
- Talking points
- FAQs
- Special needs communication
- PSA – public service announcements
- HAN – Health Alert Network
- Print ads
- Press conferences
- BlastFax
- 24/7 telephone hotlines
- Reverse 911 notification system
- Flyers
- Push Cards

Message Focus:

Let the public know that the SNS has been requested and will be arriving.

What is needed: Basic information about the SNS

Information to include in messages

- The SNS is a Federal asset to augment local supplies
- The SNS is on its way
- Medicine from the SNS are free
- There will be ample supplies for all affected populations
- Locations for local dispensing sites – announced before PODs open (set approximate time of announcement);
- The 24/7 telephone hotline number
- If you are sick – go to hospital
- If you are well – public health message about appropriate course of action
- Information as available – option to schedule news conference, if appropriate

Message Focus:

Reinforce public health information messages

What is needed: Provide consistent messages about the evolving situation.

Information to include in messages:

- Be sure to include empathy messages at the beginning of messages
- Explain that there is an outbreak taking place
- If you are ill – go to hospital
- If you are well – public health message about appropriate course of action
- Activate 24/7 telephone hotline and notify the public how to call and what information is available.



Message Focus:

Prepare the public to receive medication.

What is needed: Prepare messages in anticipation of press conferences and activate plans to print/publish clinic forms in newspapers, on the Web, by flyers or other means.

Information to include in messages:

- How to obtain clinic forms prior to arriving at POD
- Instructions to:
 - Be prepared with a list of medications and allergies for yourself and all family members
 - Record your children's weight(s) and bring to the clinic. What to do if you don't know weight.
- Explanation to public why they need to provide information requested.
- Contraindications – information to tell health care professional if you have a medical condition.
- Restrictions at the PODs, i.e. NO pets, animals, or firearms/weapons, etc.
- Explain the family distribution policy and how families will get medicine for all members.
- Reinforce public health messages about the symptoms of disease.
- Self assessment tool - Information for the public so they can assess symptoms they may have.
- What to do if you are symptomatic or ill – go to hospital or defined intake area.
- Instructions for the homebound/institutionalized
- Policies for undocumented workers, including identification requirements.
- Information discouraging hoarding and illegal sale of medication – i.e. there are ample supplies, etc.

Message Focus:

Prepare the public going to the PODs (Points of Dispensing/Dispensing Clinics). Address POD procedures and expectations.

What is needed:

- Messages to the public before arriving at POD; Consider PSA about expected traffic for each location as well as inside clinics.
- Messages to the public when they arrive at POD.
 - Either avoid complex terms or explain terminology clearly.
 - Provide traffic flow map to help the public anticipate what to expect and what is expected of them.
 - Identify stations inside clinics (traffic flow overview)
 - Explain that the public should be prepared for possible delays.
 - Let the public know there will be staff at the POD to help them (greeters, crisis counselors, etc.).

What is needed:

- Messages to the public about taking medication
 - To take full course of antibiotic treatment prescribed and how long that will be.
 - To be aware that they may need to return for additional quantities of medication.
 - To know information about pre-existing medical conditions because of possible contraindications.
 - To be aware of adverse affects they may experience and what to do if they experience them.
 - To pay close attention to children's dosages (liquid dosage forms)
 - To follow-up with private health care provider or clinic.
 - Explanations for why others may get different medication for same outbreak.
 - Do not give medication to your pets. Contact your veterinarian for guidance.



RED or italic = Information Intersection. Information that must be coordinated between state and local authorities.

Message Focus:

Messages specific to the PODs in the community. Anticipate questions, address expectations.

What is needed:

- Messages crafted to anticipate questions, address expectations, educate and inform.

Messages identifying PODs/clinics/site logistics:

- *Site locations*
- *Clinic times*
- *Directions to clinics*
- *Parking*
- *Signs before the parking lot*
- *Flow rate, off peak times*

Messages at the PODs

- Utilize universal signage
- Repeat that staff will be there to assist
- Explain how to visually identify the assisting staff
- Explain what to expect when you arrive
- Confirm why "It's worth the wait"
- Repeat what to bring, what not to bring
- Emphasize that there will be enough medication for everyone
- Announce Public transportation available and any special arrangements to PODs
- Remind everyone: if you are sick – report to the hospital
- Repeat public health messages
- Prepare messages to educate and help POD staff interact with the public with empathy, caring and concern.

- (As a backup) Prepare talking points about those who have been treated first.
- (As event continues) Prepare reports and interviews about experiences of those who have been through PODs.

Messages about Transportation Options:

- Public Transportation (where available)
- Parking issues
- Repeat family dispensing policy
- Traffic reports
- Watch/follow traffic signs
- Pay attention to law enforcement directions
- Special needs transportation (if applicable)
- Shuttles (if applicable)

Additional communication tools applicable here:

- Traffic Signs
- Traffic reporters
- Low power radio transmitters
- Megaphones



Message Focus:

Messages with updated information about the PODs.

- *Flow updates/status report* ⇒ *Numbers, numbers, numbers!* (Statistics will be needed for community leaders to report back to the public about mass dispensing efforts. Be sure to include mechanism to accomplish this and provide accurate statistics.)
- Update the public about:
 - Emerging issues
 - Logistical challenges and changes.
- Continue to provide messages expressing empathy and providing reassurance. (More is better).
- Repeat and reinforce public health messages.

Message Focus:

Medication Adherence

The adherence message must:

- Be repeated and repeated and repeated;
- Have its rationale (e.g., “You will experience side effects”) and importance (e.g., “you may get ill and die”) explained and explained and explained; and
- Include a safety valve, i.e., a staffed 24/7 multi-line telephone number which people are urged to call before, and rather than, discontinuing their treatment or neglecting to come for follow-up regimens.
- It must be a strategic communications campaign designed to influence the medicine-taking behavior of the entire public—especially if the community has experienced an **anthrax** attack and is looking at a nightmarish 60 days of prophylaxis.

Message Focus:

Recruiting/Processing Volunteers at time of event (“just in time” volunteers who want to help)

- Where to go
- What to expect
 - Procedures to volunteer
 - Time to process
 - Credentialing process
 - Time commitment
- What skills are needed
 - Health care professionals
 - Non-health care professionals

Message Focus:

Recruiting/Processing Volunteers pre-event

- How to reach potential volunteers to recruit
 - Health care professionals
 - Non-health care professionals
- Maintaining communication with volunteers
- Volunteer training issues



Message Focus:

Cities Readiness Initiative (CRI) – messages specific to CRI operations

- Post Office option
 - Information about the Post Office delivery plan and how it will work
 - Information about the need for very rapid response (48 hours)
 - Information about changes in healthcare provider assessment/care
 - Materials/messages to accompany medication delivery
 - English, non-English, illiterate populations (pictograms)
 - Instructions about taking medication
 - Instructions on how to obtain more medication
 - Messages about taking medications
 - Everyone at first will take medication because of uncertainty about actual threat
 - Some people will be instructed to stop medication if it is determined that they are not at risk as first believed
- Messages about other rapid initial medication distribution plans
 - Procedures about receiving medications (other than post office delivery or PODs)
 - What to expect
 - What to do
 - What to bring

Considerations for your special needs audiences:

Plan for those who:

- Can't/Won't **RECEIVE** your message
 - Blind and visually impaired
 - Deaf and hearing impaired
 - Physically disabled
 - Tourists
 - Transients
 - Migrant workers
 - Isolated recreationalists
 - Isolated elderly
 - Homeless
- Can't/Won't **UNDERSTAND** your message
 - Illiterate
 - Language barriers
 - Migrant workers
 - Mentally disabled
 - Caretaker minors
- Can't/Won't **ACT ON** your message
 - Undocumented workers
 - Isolated elderly
 - Homeless
 - Religious restrictions
 - Cultural restrictions
 - Tourists
 - Displaced residents
 - Geographically isolated persons



Considerations for your special needs audiences: (cont.)

Channels and tools to consider when trying to reach your special needs audiences.

- Translated broadcast materials
- Reverse 911 (if available)
- AMBER Alert
- VHF/HAM Radios
- Meals on Wheels
- TTY
- AT&T Language lines
- Websites
- Bullhorns/loudspeakers
- HAN – Health Alert Network
- Targeted media – (Billboards, bus boards)
- WIC programs
- Senior Centers
- Public Transportation
- Day care centers
- Hotlines
- Emergency Management Offices
- Border Control

These groups represent audiences can also serve as a communication channel to reach special populations.

- Trusted leaders
- Hotels/tourism industry
- Educational institutions (if open)
- Churches/civic organizations
- Soup Kitchens/Homeless Shelters
- Mental health clinicians/associations
- Employers
- Law Enforcement/First Responders
- Citizen Corps
- Neighborhood Watch
- Local governments
- Council on Aging
- Housing Authorities
- Community Businesses
- Native help organizations
- Tribal Councils
- Parks Department
- Healthcare providers
- Pharmacists



Considerations for PIC at a POD (Point of Dispensing):

The insights from the workgroup that focused on communications activities inside the POD are summarized below. Although the messages inside the PODs will be the same as those that public receive outside of the POD, there are unique considerations for public information and communications at a POD.

It is important to consider these implications when planning for managing parking, traffic flow, triage, forms management and dispensing strategies. All of these processes present logistical challenges where success or failure can hinge on providing basic information to the public about how the POD will operate, what they need to do and what will be expected of them. And of course, continually informing and educating the public about the outbreak event, health considerations and medication adherence will be essential throughout the process.

Function	Communication Objective	Communication Content	Tool	Who can do it?
Security	<ol style="list-style-type: none"> 1. Minimize security problems 2. Reassurance (regarding both safety of site and dangers to health at site) 	<ol style="list-style-type: none"> 1. What (not) to bring to POD 2. Security is provided 	<ol style="list-style-type: none"> 1. Airwaves 2. Signs 3. Personal/spoken word 	<ol style="list-style-type: none"> 1. Mass media 2. Law enforcement 3. Volunteers
Traffic	<ol style="list-style-type: none"> 1. Expedite getting people from parking lot to mass transport 2. Reassurance and increase credibility 3. Increase access to "product" 	<ol style="list-style-type: none"> 1. Address of POD 	<ol style="list-style-type: none"> 1. Airwaves 2. Signs 3. POD staff: verbal commands, pointing and providing directions 	<ol style="list-style-type: none"> 1. Law enforcement 2. Volunteers
Parking	<ol style="list-style-type: none"> 1. Facilitate parking 2. Facilitate assistance for persons with special need 3. Get people to front door of POD 	<ol style="list-style-type: none"> 1. Clear directions about where to park and how to get there 2. Clear directions to front door of POD 	<ol style="list-style-type: none"> 1. Signs 2. Cones, French barricades 3. POD staff: verbal commands, pointing and providing directions 	<ol style="list-style-type: none"> 1. Law enforcement 2. Volunteers
Front Door/ Triage	<ol style="list-style-type: none"> 1. Facilitate screening at entry point 	<ol style="list-style-type: none"> 1. Identify persons exposed to agent 2. Identify those who are symptomatic 3. Identify special needs populations 	<ol style="list-style-type: none"> 1. Signs 2. Cones French barricades 3. POD staff: verbal commands, pointing and providing directions 	<p>Medically trained personnel</p>
	<ol style="list-style-type: none"> 2. Facilitate distribution of information and forms packet (includes FAQ sheet, Pt. Info and consent sheet, F/U Info, etc.) 	<ol style="list-style-type: none"> 1. Location of packets 2. "Start Here" Signage 3. Instructions for filling out the packet 	<ol style="list-style-type: none"> 1. Signs 2. People (Registrars) 	<p>Medically trained personnel</p>



Considerations for PIC at a POD (Point of Dispensing) (cont.):

Function	Communication Objective	Communication Content	Tool	Who can do it?
Briefing	<ol style="list-style-type: none"> 1. Increase comprehension 2. Increase medication adherence 3. Increase patient flow 4. Decrease questions 	<ol style="list-style-type: none"> 1. Update about event: agent, symptoms, disease <ol style="list-style-type: none"> A. Outbreak B. Disease C. Drugs D. Mental Health 	<ol style="list-style-type: none"> 1. Signs 2. POD Staff 3. Video 	"Briefers" <ol style="list-style-type: none"> 1. PIO 2. Communication specialists
Line Workers	<ol style="list-style-type: none"> 1. Ensure form completeness 2. Increase patient flow 3. Increase awareness of contraindications 	<ol style="list-style-type: none"> 1. Instructions 2. Examples of complete forms 3. Large posters of pills and tables of drug names 	<ol style="list-style-type: none"> 1. Signs 2. POD Staff 	Volunteer Staff
Screening	<ol style="list-style-type: none"> 1. Ensure form completeness 2. Decision point: Express vs. Non-express dispensing 	<ol style="list-style-type: none"> 1. Flow directions 2. Large posters of pills and tables of drug names 	<ol style="list-style-type: none"> 1. Signs 2. Arrows 	Volunteer Staff
Dispensing				
Express	<ol style="list-style-type: none"> 1. Give correct medication to the right person 	<ol style="list-style-type: none"> 1. Adherence instructions 	<ol style="list-style-type: none"> 1. Directional Signs with Arrows 2. Printed handouts 	<ol style="list-style-type: none"> 1. Pharm tech 2. RN 3. Pharm D 4. MD
Standard	<ol style="list-style-type: none"> 1. Give the correct medication to the right person 2. Individual patient care 	<ol style="list-style-type: none"> 1. Copy of pill pictures and drug names 2. Medication adherence instructions 	<ol style="list-style-type: none"> 1. Directional Signs with Arrows 2. Printed handouts 	<ol style="list-style-type: none"> 1. Pharm D 2. MD
Exit	<ol style="list-style-type: none"> 1. Ensure collection of forms 2. Ensure questions answered 3. Reinforce follow-up instructions 4. Evaluation (optional) 	<ol style="list-style-type: none"> 1. Reminder about form drop-off 2. Reminder (with pictures) about medication adherence 3. Evaluation form 	<ol style="list-style-type: none"> 1. Signs 2. POD staff/volunteers 	Volunteer Staff