



Prevent • Promote • Protect

**Memorandum of Understanding  
Between Ogle County Health Department and Oregon CUSD 220  
Regarding Mass Prophylaxis Dispensing as a  
CLOSED Point of Dispensing**

☒ **Medication and Vaccines**

☐ **Medication Only**

☐ **Vaccines Only**

This Memorandum of Understanding is entered into by and between the Ogle County Health Department (OCHD) and Oregon CUSD 220 (OCUSD 220).

The purpose of the Memorandum of Understanding (MOU) is for OCUSD 220 to support mass dispensing of prophylaxis for a designated population affected by a specific Public Health Emergency (PHE). For the purposes of this MOU a PHE means a large scale incident or condition that results in an actual or imminent threat to public health and safety that requires rapid dispensing of medication or vaccinations within the community. This MOU defines the relationship between OCHD and OCUSD 220 during a specific PHE only and exclusively. This MOU is not intended to be a legally binding contract.

OCUSD 220 acknowledges the intent to serve as a **CLOSED Point of Dispensing (POD)** site to the Strategic National Stockpile (SNS). SNS is a strategic stockpile of medications and supplies controlled by the federal government that would be rapidly deployed to the affected area of Illinois during a PHE.

A CLOSED POD is a location where the SNS medications are dispensed to OCUSD 220's employees'/members families or others for which OCUSD 220 is responsible. A CLOSED POD is not intended to serve SNS medications to the general public. OCUSD 220 has agreed to be a CLOSED POD site in the event of a large-scale PHE and it is determined by OCHD or the Illinois Department of Public Health (IDPH) that there is a need to request a large quantity of SNS medications.

**OCUSD 220 agrees to the following:**

1. Provide a location to serve as a private "CLOSED POD" site.
2. Provide OCHD with primary, secondary, and tertiary emergency contacts
3. Provide OCHD with updated number of employees and family members annually.
4. Develop a plan to prepare site for dispensing operations and secure medications. Plans should include processes for distributing medication, collecting appropriate information, and disseminating educational materials provided by OCHD.
5. Ensure that no fee of any kind is charged to persons receiving medications.
6. Provide OCHD with the name of a representative who will pick up medication and supplies from the Health Department or Distribution site. This person must show proper identification and upon their return to OCUSD 220, verify with OCHD that all medication and supplies are accounted for.
7. Utilize medical countermeasures and treatment algorithms given by OCHD.

8. Participate in OCHD sponsored dispensing trainings and education opportunities if available.
9. Return all unused medications and supplies along with inventory forms and consent forms to OCHD.
10. Identify accomplishments and improvement suggestions of CLOSED POD operations and share with OCHD.

**The Ogle County Health Department agrees to the following:**

1. Provide CLOSED POD with medical consent forms, educational materials, training, and other resources to be used in a PHE requiring mass prophylaxis.
2. Provide CLOSED POD with contacts at OCHD for use pre-event for questions and concerns.
3. Provide communication with State personnel about pre-established quantities of medications and supplies, delivery locations, and site contact information.
4. Provide CLOSED POD with contact information to the Emergency Operations Center (EOC) during an event for questions and consultations.
5. Ensure the appropriate requested amount of medications and supplies (if available) in reasonable and timely manner.
6. Make arrangements with CLOSED POD to receive any unused medication and supplies at the end of the PHE. Collect all medical consent forms from CLOSED PODs.
7. Provide pre-event planning and technical assistance for a CLOSED POD.

**It is mutually agreed that:**

1. The confidentiality of clients and client's information will be maintained at all times.
2. This agreement shall be effective from the date it is signed by OCUSD 220 Representative and the Administrator of Ogle County Health Department. This agreement will remain effective until either party provides written notice of intention to end its adherence to terms of the MOU. This agreement may be immediately terminated upon written consent of all parties.
3. OCUSD 220 will be considered a CLOSED POD in that it will dispense SNS medications to individually designated employees/members and their family members only and not to the general public.
4. OCUSD 220 will strictly follow the directives of OCHD and IDPH in the SNS medication dispensing operations.
5. It is understood that OCUSD 220's participation is completely voluntary and may not be available at the time of the event. If so, OCUSD 220 would not be considered a CLOSED POD and their employees/members would be required to attend a public OPEN POD operated by OCHD.

## Signatures

Signatures indicate assent with the above stated agreements and conditions:

### Ogle County Health Department

Cherie Rucker

Name

Director of Public Health Programs

Title

Cherie Rucker

Signature

10-18-2023

Date

### Oregon CUSD 220

Thomas Mahoney

Name

Superintendent

Title

Th. D. Mahoney

Signature

10/21/2023

Date

### **Demographic and Contact Information**

#### **1. CLOSED POD Address**

210 S 10<sup>th</sup> St  
Oregon, IL 61061  
815-732-5300

#### **2. CLOSED POD Demographic Information**

a. Total Number of Personnel:	215
b. Total Number of Family Members:	1492
c. Total Number of Residents:	0
d. <b>Total:</b>	<b><u>8997</u></b>

#### **3. CLOSED POD Contact Information**

Primary Contact:	<u>Thomas Mahoney</u>
Office Phone:	<u>815-732-5300 Ext 4000</u>
Cell Phone:	<u>815-761-1610</u>
Email:	<u>tmahoney@ocusd.net</u>

<b>Secondary Contact:</b>	<u>Adam Larsen</u>
Office Phone:	<u>815-732-5300 Ext 4004</u>
Cell Phone:	<u>815-218-2182</u>
Email:	<u>alarsen@ocsud.net</u>

<b>Tertiary Contact:</b>	<u>Bill Nesemeier</u>
Office Phone:	<u>815-732-5300 Ext 4020</u>
Cell Phone:	<u>815-440-5251</u>
Email:	<u>bnesemeier@ocusd.net</u>



#### 4. OPEN POD Representative Authorized to Accept Medication & Supplies

**Primary Contact:** Sharon Hoover

Office Phone: 815-732-5300 Ext2222

Cell Phone: 815-631-2603

Email: shoover@ocsud.net

**Secondary Contact:** Sara Rowe

Office Phone: 815-732-5300 Ext1122

Cell Phone: 815.262.7627

Email: srowe@ocsud.net

**Tertiary Contact:** Jennifer Hernandez

Office Phone: 815-732-5300 Ext 3106

Cell Phone: 815-734-6013

Email: jhernandez@ocusd.net

#### **Ogle County Health Department Contacts**

*The following are pre-event contacts; during the notification phase of activation, contact information for the relevant OCHD Liaison will be provided.*

##### **Director of Public Health Programs**

Cherie Rucker  
907 Pines Road  
Oregon, IL 61061  
815-562-6976 ext 2279  
crucker@oglecountyil.gov

##### **Public Health Administrator**

Melissa Spangler  
907 Pines Road  
Oregon, IL 61061  
815-562-6976 ext 2247  
mspangler@oglecountyil.gov