



**DEPARTMENT OF THE ARMY  
US ARMY INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, UNITED STATES ARMY GARRISON, FORT SILL  
462 HAMILTON ROAD, SUITE 120  
FORT SILL, OKLAHOMA 73503**

REPLY TO  
ATTENTION OF:

**MEMORANDUM OF UNDERSTANDING  
AMONG  
UNITED STATES ARMY GARRISON (USAG)/IMCOM, FORT SILL  
AND  
COMANCHE COUNTY HEALTH DEPARTMENT  
AND  
REYNOLDS ARMY COMMUNITY HOSPITAL (RACH)**

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1. References:

- a. Anti-Deficiency Act, 31 USC 1341.
- b. Army Regulation 525-13, Antiterrorism, January 2002.
- c. DoDI 2000.18, DoD Installation Chemical, Biological, Radiological, Nuclear and High-Yield Explosive Emergency Response Guidelines, 4 December 2002.
- d. MEDCOM Pam 525-1, Medical Emergency Management Planning, October 2003.
- e. National Incident Management System (NIMS), March 2004.
- f. Interagency Agreement (IA) between Department of Health and Human Services (HHS) and the Department of Defense (DoD), May 2005.
- g. MEDCOM OPORD 06-45, (EP&R CPC and PI PPE), September 2006.
- h. DoDI 2000.16, DoD Antiterrorism (AT) Standards, 2 October 2006.
- i. AR 525-27, Army Emergency Management Program, 13 March 2009.
- j. DoDI 6055.17, DoD Installation Emergency Management Program w/chg 1, 19 November 2010.
- k. DoDD 3025.1, Defense Support of Civil Authorities, 29 December 2010.

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- l. DA PAM 525-27, Army Emergency Management Program, 20 September 2012.
- m. DoDI 4000.19, Support Agreements, 25 April 2013.
- n. 42 United States Code (USC) 1856a.
- o. 15 USC 2210.

2. Purpose. To effectively respond to acts of chemical, biological terrorism, or other large scale public health events in which assets from the Strategic National Stockpile (SNS) are required to be distributed to mitigate suffering and prevent the further loss of life.

3. Problem. Acts of terrorism and large scale public health events can and will occur. With these events it may become necessary to vaccinate or prophylaxis entire populations within severely constrained timelines, often not longer than 48 hours for the prophylaxis and 10 days for vaccinations. Since no single community, agency or entity maintains enough daily material or stockpiles enough products to handle the community, we must rely on assets received from the Centers for Disease Control (CDC) and Prevention's SNS. To ensure that Fort Sill is able to adequately receive and distribute SNS assets, we must effectively integrate our planning, training and exercise efforts with the local County Health Department.

4. Scope. This memorandum of understanding (MOU) applies to the Fort Sill Army Garrison, Reynolds Army Community Hospital (RACH), and the Comanche County Health Department (CCHD) and all personnel acting for any.

5. Responsibilities of the Fort Sill Garrison.

a. Directorate of Plans, Training, Mobilization and Security (DPTMS) will:

(1) Serve as a designated Mass Immunization/Prophylaxis Site (MIPS) closed Point of Dispensing (POD) to service the population base of the installation and other authorized beneficiaries as designated by regulation and policy.

(2) Work with the CCHD in planning, training and exercise initiatives to ensure a cohesive preparedness and response program.

(3) Communicate required essential elements of information during an incident from the Fort Sill Incident Command Post (ICP) or Fort Sill Operations Center (FSOC) to the local Unified or Area Command.

(4) Assist all applicable installation agencies, directorates and tenant units in preparedness and response activities through planning, assessment, and exercising of required program elements to effectively manage SNS assets.

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(5) Serve as a liaison with all applicable local, State and Federal response agencies to develop cohesive integrated mitigation, preparedness and response mechanisms as they relate to all hazards that may require the deployment and use of SNS assets.

(6) Notify CCHD of the impending or immediate need to initiate provisions of this MOU to the CCHD Administrator or designated representative.

b. Directorate of Emergency Services (DES) will:

(1) Dispatch DES to any point within the jurisdiction of Lawton or Comanche County to provide security for the safe transport of SNS assets to Fort Sill upon request to a representative of the DES by a representative of DPTMS or RACH.

(2) Provide continual (24/7) security of SNS assets as long as they are on the installation and until the unused portion is returned to the designated warehouse facility within Comanche County.

(3) Respond to other requests and or situations not directly covered in this memorandum from the Incident Commander, the Crisis Action Team, and Garrison Commander, Chief of Staff or the Senior Mission Commander.

6. Responsibilities of the Reynolds Army Community Hospital (RACH).

a. Initiate within the hospital, actions to prepare for operations regarding the receipt, inventory and distribution of SNS assets on the installation upon request to a representative of the RACH by a representative of the DPTMS, higher Army headquarters, or the CCHD.

b. Pick up SNS material from the designated warehouse location as dictated by the CCHD or the applicable Unified Command or Area Command. RACH is responsible for assisting in the physical security of the SNS material. RACH will comply with material handling instructions provided by the CCHD, and applicable Federal and State of Oklahoma laws and regulations. RACH will comply with applicable Federal, DoD and State of Oklahoma laws and regulations as they relate to the issuance/distribution of medications.

c. Return all unused SNS material to the designated warehouse location repackaged according to CDC requirements.

d. Provide a RACH Public Health Emergency Officer (PHEO) to continually liaise with the local health department and medical entities to ensure that RACH plans and processes for responding to an event requiring SNS assets are current and in line with local requirements for the SNS.

e. Serve as the Incident Commander or will form a Unified Command for the management of the incident/event.

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7. Responsibilities of the Comanche County Health Department (CCHD).

a. Continually liaise with representatives from DPTMS, RACH and other designated Fort Sill personnel to ensure a seamless integration of plans, processes and procedures regarding the management of SNS assets.

b. Provide to Fort Sill a pre-designated percentage of the Comanche County apportionment of the initial push pack SNS assets received from the State of Oklahoma central warehouse during incident operations. (See 8 b. for caveat)

c. Provide stocks or materials from follow-on vendor managed inventory (VMI) until the completion of the vaccination/prophylaxis mission.

d. Restock or redistribute unused SNS materials from the Fort Sill site.

e. CCHD will notify the Fort Sill Operations Center (FSOC) and/or the RACH Emergency Manager of any intelligence or impending actions that would require implementation of this MOU.

8. Agreements and Understandings of All Parties.

a. The rendering of assistance under the terms of this agreement shall not be mandatory, but the party receiving the request for assistance should immediately inform the requesting department if, for any reason, assistance cannot be rendered.

b. It is understood that the pre-designated apportionment to be provided to Fort Sill is subject to change based on situational factors revolving around the incident, the direct population affected and the amount of materials received from the central warehouse or directly from the SNS push pack.

c. The parties to the agreement are invited and encouraged, on a reciprocal basis, to frequently visit each other's activities for guided familiarization tours consistent with local security requirements and, as feasible, to jointly conduct planning inspections and drills.

d. The technical heads of the parties to this agreement are authorized and directed to meet and draft any detailed plans and procedures of operation necessary to effectively implement this agreement. Such plans and procedures of operations shall become effective upon ratification by the signatory parties.

e. This document survives the departure or position change of any of the signatories. It remains in effect until cancelled by mutual agreement or until cancelled by 180 days advance written notice to the other party. It shall be reviewed when deemed necessary by either party and may be amended upon mutual consent of all parties. Each party shall provide sufficient advance

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notice in writing to the other prior to changing, reducing, or terminating this agreement and/or any aspect of support provided.

f. No provision of this agreement shall be interpreted to require the payment or obligation of funds in violation of the Anti-Deficiency Act, 31 USC 1341.

9. Points of Contact (POCs).

a. Garrison.

(1) MOU POCs. Ms. Winona Morris, garrison support agreements manager (SAM), and Mr. Joe Ragsdale, Manpower and Agreements Division, Resource Management Office (RMO), 462 NW Hamilton Road, Suite 120, Fort Sill, OK 73503-9004, (580) 442-3560/5803, [Bldg 467] fax ext. 7978 or e-mail: [winona.f.morris.civ@mail.mil](mailto:winona.f.morris.civ@mail.mil) or [joe.p.ragsdale.civ@mail.mil](mailto:joe.p.ragsdale.civ@mail.mil).

(2) Technical POC is the Directorate of Plans, Training, Mobilization and Security (DPTMS), at (580) 442-5720/3003.

b. RACH POC.

(1) Mr. Steve Young, RACH Emergency Management at (580) 458-2029, email: [steve.w.young.civ@mail.mil](mailto:steve.w.young.civ@mail.mil) .

(2) Ms. Sue Croft, RACH Support Agreement Manager, (580) 558-2047, [brenda.s.croft.civ@mail.mil](mailto:brenda.s.croft.civ@mail.mil).

c. CCHD POCs.

(1) Ms. Brandie O'Connor, Comanche County Health Department-Administrator at (580) 248-5890, email: [BrandieO@health.ok.gov](mailto:BrandieO@health.ok.gov) .

(2) Ms. Cara Gluck, Southwest Region Emergency Response Planner, Oklahoma State Department of Health-Terrorism Preparedness and Response Service at (580) 585-6728, email: [carac@health.ok.gov](mailto:carac@health.ok.gov) .

(3) Ms. Rebecca Villa-Winsett, Local Emergency Response Coordinator, 580-726-3316, [rebeccaw@health.ok.gov](mailto:rebeccaw@health.ok.gov).

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10. Effective Date. Date of the last signature below.



BRANDIE O'CONNOR  
Administrative Director  
Comanche County Health Department

4-17-13

(Date)



PAUL S. HOSSENLOPP  
Colonel, FA  
Garrison Commander

5-21-13

(Date)

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Date: 2013.04.18 15:04:10 -0500

JENNIFER L. BEDICK  
Colonel, AN  
RACH Commander

(Date)