

Prepared by: shawn stoen

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Appendix 3.5.6 wcmhpc resource request plan

Table of Contents

[Purpose 2](#_Toc137811535)

[Objectives 2](#_Toc137811536)

[**Resource Request** 3](#_Toc137811537)

[From the cache 3](#_Toc137811538)

[from fellow coalition members/partners 3](#_Toc137811539)

[Specific resource request requirements 4](#_Toc137811540)

[Medical Supplies/Pharmaceuticals 4](#_Toc137811541)

[Loaned equipment 4](#_Toc137811542)

[Staff 4](#_Toc137811543)

[Allocation 5](#_Toc137811544)

[Distribution 6](#_Toc137811545)

[Maintenance of the Regional Cache 6](#_Toc137811546)

[Medical Supplies/Pharmaceuticals 6](#_Toc137811547)

[Loaned equipment 7](#_Toc137811548)

[Staff 7](#_Toc137811549)

[Approvals and Revisions 9](#_Toc137811550)

#  Purpose

During times of scarce resources, medical surge, and/or evacuation measures, there may be situations where resource sharing/acquisitions may be coordinated through the coalition. This plan identifies the process in place to facilitate such sharing. The West Central Minnesota Healthcare Preparedness Coalition (WCMHPC) maintains a regional cache of healthcare supplies that may be needed to supplement the resources available for Coalition members. The WCMHPC is responsible for maintaining, monitoring, allocation and distribution control of all the inventory items in the cache as well as the acquisition and disposal of equipment.

# Objectives

A centralized cache of supplies supports the response of the WCMHPC in times of medical surge, pandemic, and other unexpected events. Coalition members can rely on Regional Healthcare Preparedness Coordinators (RHPC) for their assistance and consultation regarding supplies as well as product availability and costs. As members of the coalition, health care partners have signed the Memorandum of Understanding which states that when available, members agree to assist in resource sharing and acquisition. The resources include durable medical equipment, health care supplies and personnel.

RHPCs will:

* + 1. Manage and coordinate requests for supplies.
		2. Assist in arranging for distribution of supplies in a safe, timely, and efficient manner.
		3. Maintain the regional cache by reusing, recycling, and disposing of expired surplus cache supplies safely and economically.
		4. Share resource acquisition information to coalition partners where group buying will allow for decreased costs to coalition members.

# **Resource Request**

## From the cache

A WCMHPC Member or Partner may request products from the regional cache when the following terms are met:

1. The facility has utilized their own resources/suppliers and the supplies are unavailable within the time frame needed.
2. The facility has contacted outside vendors/suppliers to request the product and the product is unavailable.
3. The facility has contacted the RHPC with a specific need.
4. The facility has completed a requisition form with the following:
	* + - The product needed and the amount needed.
			- The anticipated date that the facility will be replacing product used
			- The transportation means requested and the time the product is needed by.
			- A signature from the receiving facility and a signed copy returned to the RHPC.
5. The region may not fulfill the entire requested amount due to availability, other requests, and/or the State of Minnesota requirements.

## from fellow coalition members/partners

The coalition member may contact coalition partners directly or can request assistance from the RHPC to borrow or purchase supplies/resources from fellow members. The resource request form will be utilized in this case. Copies of the request will be maintained by the borrower, lender, and the RHPC.

# Specific resource request requirements

As per outlined in the WCMHPC Preparedness Plan Appendix 5.2.1 Memorandum of Understanding the following specific detailed responsibilities and request requirements:

### Medical Supplies/Pharmaceuticals

* All requests for medical supplies and pharmaceuticals will specify:
	+ Amount of material needed.
	+ Size/dosage of material needed.
	+ When the materials are needed.
	+ Arrangements for exchange of such supplies.
	+ Reimbursement or restocking of materials.
* The requesting facility will use the requisition forms/paperwork of the agency supplying the materials.
* The recipient facility will reimburse the donor facility for all the donor facility's costs determined by the donor facility’s regular rate.
* It is recommended that reimbursement will be made within 90 days following receipt of invoice or otherwise negotiated facility to facility. This can include replacing items or reimbursing for cost of items.

### Loaned equipment

* All requests for loaned equipment will specify:
	+ Amount/quantify of equipment being requested.
	+ An estimate of how quickly the requested equipment is needed.
	+ Estimated length of time the equipment will be needed.
	+ Identify how the equipment will be picked up and returned.
	+ Identify where the equipment will be used.
* If any equipment is damaged the receiving facility will agree to repair or replace the equipment within 30 days or as otherwise agreed to.
* Documentation should detail the items involved in the transaction, condition of the material prior to the loan (if applicable), and the party responsible for the material.
* The donor facility is responsible for ensuring that the equipment provided is safe to use and operational.
* The recipient facility is responsible for using the equipment provided in accordance with manufacture’s guidelines.
* If parts or all of the equipment loaned are consumable or one-time use, the recipient facility will reimburse for actual cost or replace – as agreed upon by both parties.

### Staff

* All requests for staffing will specify:
	+ The type and number of requested personnel
	+ An estimate of how quickly the request is needed.
	+ The location where they are to report.
	+ An estimate of how long the personnel will be needed.
* The recipient facility will have supervisory direction over the donor facility’s staff.
* The recipient facility will assume all legal responsibility for the personnel from the donor facility during the time the personnel are at the recipient facility.
* The recipient facility will reimburse the donor facility for the salaries of the donated personnel at the donated personnel's rate, as established by the donor facility, unless other arrangements are made between the facilities.
* The donor facility is responsible for appropriate credentialing of personnel.
* The recipient facility is responsible for verifying the credentials of personnel being received.
* The senior administrator (or designee) and/or medical director, in conjunction with the directors of the affected services, will decide as to whether medical staff and other personnel from another facility will be required at the impacted facility to assist in patient care activities.

#### Limitations on Loaned and Volunteer Staff instructions

* Personnel offered by donor facility should be limited to staff that are fully accredited or credentialed in the donor institution.
* The recipient facility's senior administrator or designee (the health care facility or public health agency command center) identifies where and to whom the donated personnel are to report to.
* Professional staff of the recipient facility will provide supervision to the donated personnel.
* The supervisor or designee will provide direction regarding point of entry, parking, length of shift, clothing requirements, and other pertinent information to functional perform in the assigned job.
* The supervisor or designee will provide donated staff a briefing and orientation as pertinent to the position.
* The recipient facility will provide all personal protective equipment (PPE) necessary to perform the duties as assigned, unless otherwise negotiated between facilities that PPE will come with. If the receiving facility is requiring PPE that requires fit testing, the recipient facility will fit test the personal.

# Allocation

During times of scarce resources, RHPCs will initiate an emergency voting process with the WCMHPC advisory committee. If this cannot be accomplished, the Healthcare Multi-Agency Coordination (HMAC) members will determine the allocation and distribution process.

# Distribution

1. Regional assets can be deployed within four (4) hours of request.
2. The requesting facility will pick up the items or arrange pick up with a courier of their choice (as indicated on the Request Form).
3. RHPC may be able to assist in transporting the products in extreme cases. The RHPC will coordinate the distribution of all regional cache items.
4. Items in the cache may not be the same model as requested – this may require additional training at the requesting facility. Any additional training and/or fit testing is the responsibility of the requesting facility.
5. During large scale or multi-location events, the regional cache will be disseminated based upon coalition needs and may be impacted by guidance from the Minnesota Department of Health. The items contained within the cache are purchased using federal funds and are subject to recall through State or Federal mandate.

# Maintenance of the Regional Cache

1. Items in the cache are in a clean, dry, and secure environment. Access to the cache is available 24/7 through the RHPC.
2. RHPCs review the regional cache supplies, maintains an inventory log, and updates and maintains the inventory on MNTrac at least annually.
3. Any items that are outdated or expired past the manufacture’s recommendations will be stored for future consideration of distribution and use in a supply-crisis or pandemic. (*For example: Recent guidance (3/11/20) by the Center for Disease Control (CDC) has indicated that, in recognition of the supply-crisis currently being experienced globally, due to the COVID-19 Pandemic, certain expired N95 masks may be used to protect healthcare workers.*)
4. Equipment and supplies will be maintained per manufacturer guidelines or to the best of the host facilities capabilities.
5. Ebola supplies purchased with Ebola funding will be maintained and housed with the regional cache. These items are kept separate from the main regional cache and will be available for distribution regionally or as requested by the State of Minnesota. All Ebola supplies will be kept universal throughout the region.

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See the **Appendix 3.5.6.2: RESOURCE REQUEST, RECEIPT, AND PROMISSORY AGREEMENT**

# Approvals and Revisions

This plan is reviewed annually and updated as necessary. All changes will be voted upon by the Advisory Committee. Any revisions will be noted within this table.

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| **Purpose/Changes** | **Date** |
| Updated to correct grammatical errors and update links. Added language from the MOU to this document regarding specific requests. Updated TOC. | June 2023 |
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