

Supply Chain Resource Council (SCRC) Report

January 10th, 2022 Meeting

Executive Summary

This week's report focuses on recurring product shortages as well as new shortages affecting the care environment. In summary, on-hand N95 inventory levels are able to meet existing demand at hospitals. OSHA and CDC mask guidelines have increased the demand for surgical N95s and as a result, fit testing needs have increased as well. Blood collection tubes remain a critical product to source across the field. New shortages discussed included COVID tests, monoclonal antibodies and medical grade paper.

Below is the full Council report. Aggregated member attendance information is at the bottom of this report.

Surgical N95 Masks, Gloves and Dialysis Fluids

- One health care organization shared that per the CDC, "patients under investigation or COVID positive patients it is recommended that N95s be used." In reality, every patient is under investigation, driving their increase in N95 use. One health system stated that they had 900 walk-in clinic visits, and another health system saw an x86 increase in N95 usage – both in a single day. Another system indicated that their inventory level of N95s is fine for now, however Elastomeric respirators are an alternative should N95 availability become an issue. Another approach is to return to double masking, however that could drive shortages with the secondary masks used depending on stock availability across the supply chain continuum. Other conservation or alternative strategies could include the use of KN95s in non-hospital areas since these masks do not provide the fluid barrier protection needed in the care settings.
- As health care organizations bring on additional staff, or expand N95 use across their clinical teams to enhance staff protection, fit testing needs have increased. One organization has hired an outside agency to assist with this effort.
- The critical shortage of surgeon's gloves and diminishing on-hand inventories has caused one health system to cease elective procedures at two of their facilities.
- Critical product shortages continue to plague suction canisters and canister liners. One organization is considering using suction liners over multiple patients as a conservation strategy.
- A new product category that is becoming a challenge to source is Dialysis fluids. Information shared shows that supply shortages include: Sterile water products, Dialysate, CRRT solution, PD solution and Granuflo. The shortage appears to be a national issue that may be related to the nationwide staffing crisis and possibly tied to logistics and not manufacturing.

Medical Gases, COVID Tests/Lab Assays/Therapeutics, Blood Collection Tubes, Blood Supplies

- A health system on the east coast received notification from their oxygen supplier that portable cylinder usage had nearly quadrupled over the previous two weeks. They felt that they could not meet the demand and were asking their customers to move to an eight-cylinder tank. This transition is causing challenges in securing and transporting these tanks; tanks are not the same as those that fit the small O2 caddy. Their DME will not commit to O2 or oxygen concentrators due to staff shortages from positive COVID tests.
- A number of health care organizations indicated challenges with sourcing COVID tests needed to clear their staff and bring them back to work. Some organizations had stated they were able to obtain the BD Veritor tests while the BD handheld tests were a little harder to obtain.
- Some health systems shared that there were constrained supplies of monoclonal antibodies/treatments. One system disclosed that they are using a lottery system to determine distribution of these treatments. Oral drugs and base compounds coming out of India continue to be a problem that is being managed on a daily basis.

- Blood collection tube availability remains critical. To date one [EUA for BlueTop Tubes](#) has been issued. CLIA regulations, reimbursement qualifications and alternative manufacturers are complicating factors that need to be taken into consideration regarding additional EUAs.
- A few health systems voiced the critical need for blood products. One system offered to hold blood drives for the American Red Cross (ARC), to provide them with staff, anything to help get blood supply levels up. There is a rule that requires 3 weeks of training before a staff member can work for/with the ARC. The question that is being posed; is this something that could be waived so hospital staff or national guard members could be used?

Other Supplies and Medical Equipment:

- Shortages in medical grade paper are leading to other product shortages. Medical grade paper is used to seal products prior to sterilization. One health system has run into an issue with their primary supplier of cassettes and tubing - the supplier has the product but is unable to get medical grade paper to seal the product packaging.
- As a result of the extreme in-patient increases one question that was posed to the group concerned patient beds. Due to the high cost of bed rentals, were hospitals using medical cots?

About the Supply Chain Resource Council (SCRC)

The Supply Chain Resource Council (SCRC) currently brings together 42 supply chain leaders and professionals from across the health care field with the goal of understanding the extent and impact supply shortages and disruptions are having in the hospital setting, as well as a documenting conservation strategies or permanent solutions to these challenges. Topics of discussion vary based on the latest information received from various field sources. Information collected during the calls is shared with AHA and AHRMM Leadership, Federal agencies, council members and the broader health care field.

Organization Type	Number of Beds	Rural/Urban/Suburban	Purchasing Budget/Spend	Region
Hospital	550		\$2-\$3 million	3
Academic Medical Center	1,000	urban	More than \$500 million	9
Hospital	24,000	rural, suburban, urban	More than \$500 million	4
Hospital	60	rural		9
Hospital	550	rural, urban	\$100-\$500 million	2
Hospital	26,000	rural, suburban, urban	More than \$500 million	5
Hospital	894	urban	More than \$500 million	5
GPO	N/A	rural, suburban, urban	More than \$500 million	
Hospital	2,059	rural, suburban, urban	More than \$500 million	6
Hospital	24,000	rural, suburban, urban	More than \$500 million	4
Services	N/A	urban	\$500,000 - \$1 million	8
Academic Medical Center	850	urban	\$10 - \$25 million	4
Hospital	886	urban	N/A	6
Services	N/A	rural, suburban, urban	Less than \$100,000	6
Hospital	629	rural, suburban, urban		6
Hospital		rural, suburban, urban	\$25 - \$50 million	8
Hospital	2,059	rural, suburban, urban	More than \$500 million	6
Academic Medical Center	918	urban	More than \$500 million	4
Hospital	750	urban		6
Distributor	N/A		\$10 - \$25 million	3
GPO	N/A	rural, suburban, urban	\$50 - \$100 million	9
Association	N/A			3