

Supply Chain Resource Council (SCRC) Report

July 11, 2022 Meeting

Executive Summary

Reports of contrast media availability were varied as was the "get well" date with information pointing to range that spanned the end of August to early next year. DME and Surgical masks rounded out the topics under discussion this week. Some new entrants included in this week's "SCRC Watch List" include monitoring electrodes and Harmonic Scalpels.

Field updates were shared concerning infant formula, Tyvek and Helium. Separate reports were included with the emailing of this SCRC Report.

We close out this week's report with one organizations success story and benefits realized as a result of key weekly vendor meetings.

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

▲ Field Updates

- **Infant Formula** – The Abbott Sturgis plant reopened on 7/1 and is manufacturing the EleCare formula. Six operation Fly Formula flights were scheduled for the week of 7/1.
- **Tyvek** – see attached Resilinc Tyvek report.
- **Helium** – see attached Storage Contract Holders letter to GSA.

▲ Supply Shortages and Disruptions

1. Contrast Media – Supplies Improving?

Feedback was varied, with one member indicating they read an article that pointed to improving supply availability sometime early next year, and the FDA drug shortage website indicating the Omnipaque shortage is expected to continue until the end of August. Overall, council members reported there were no significant changes in availability since the June 13th report, and no disruptions to their CT procedures.

It was mentioned that Bracco remains on allocation but is meeting current demand at their set allocations. One member shared the downstream impact is MR contrast, as reported in the [June 13th SCRC Report](#).

2. DME Shortages?

One Midwest health system stated that "it is not as much of an issue." Their suppliers have consistently ensured they have the inventory they need whether through their own warehouses or point of use programs. Several other members echoed similar sentiments.

3. PPE Tie Back Surgical Mask Utilization?

Several members indicated that a majority of their surgical masks are ear loop masks at this point. One organization is "keeping some tie back masks in stock." Compared to pre-COVID levels, organizations reported anywhere from 80-97% of their masks are now ear loops. One health system shared that they are seeing an increase in the use of PAPR Hoods by OR staff and consistent utilization of N95s by their anesthesia staff.

Another organization shared that they returned to pre-COVID change your mask protocols and "don't wear your mask beyond the red line" for tie back masks.

Other drivers discussed an overall decrease in surgical case volumes, increased utilization of N95s and the sobering reality that over 1M people have died over the course of this pandemic.

▲ State Emergency Management PPE Supplies

- State emergency planning activities were strongly encouraged to include clinical and supply chain professionals in the decision-making process. This would help to ensure emergency stockpile supplies did not dramatically vary with clinical usage and validate product use in the field, e.g., deploying N95s and fit testing requirements. Other considerations include shelf life and expiration date management and Emergency Use Authorizations.

▲ SCRC Watch List

- **Grounding Pads** – One of the key manufacturers indicated a labor strike was the primary cause for the shortage. The strike has been resolved and manufacturing volume is coming back online. The manufacturer is projecting a one-month timeframe to fill the backlog of orders.
- **Monitoring Electrodes** – One organization indicated challenges in sourcing smaller packaging sizes (3-5 electrodes). They are able to source only the larger multi-pack sizes. They have developed a process in conjunction with their Risk Management, Infection Prevention and clinical education teams to standardize storage of multi-pack sizes once the product is opened. Instructions for Use (IFUs) vary with one company indicating their product would be viable for 40 days after the package was opened and before the gel would dry, while another company's IFU stated 30 days after their product was opened. The organization agreed to use 30 days as their standard.
- **Harmonic Scapels** - Covidien is experiencing backorders in the harmonic scalpel space. One organization is substituting Ethicon in places where they have the generators – the challenge being they are generator-specific products.
- **Tyvek and Helium** – Manufacturers are very concerned about the growing constraints with Tyvek and lack of visibility going to the second half of this year. There is also growing concern among this stakeholder group regarding the tight supply of Helium.

▲ Weekly Vendor Meetings: A Success Story

- One organization shared the benefits they have experienced as a result of key weekly vendor meetings. They have standing meetings with Bard, Baxter, BD, and BIOGEL every Tuesday to look at product shortages and allocations. They also meet monthly with 3M who is assisting the organization in moving to the 1870 mask and away from the 1860 and 1860s. The benefits being; larger production capacity and more successful rates of fit testing as it is made domestically. "Meeting with these vendors like this has been a direct result of the pandemic and has benefited us tremendously."
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About the Supply Chain Resource Council (SCRC)

The Supply Chain Resource Council (SCRC) convenes over 70 supply chain and health care leaders from across the health care field with the goal of understanding the extent and impact supply shortages and disruptions are having within the hospital and patient care settings, as well as a capturing and documenting solutions to these challenges. Information collected during these calls is drafted into a report and shared with AHA, AHRMM and Professional Management Group (PMG) leaders, the White House Response Team, various Federal Agencies and the broader health care field. *The content of this report represents information, strategies and solutions from SCRC members but does not necessarily reflect policy positions of the AHA.*

Aggregated member attendance information for the July 11, 2022 SCRC meeting is below.

Organization Type	Number of Beds	Rural/Urban/Suburban	Purchasing Budget/Spend	Region
Association	N/A	rural, suburban, urban		
Hospital	550	urban	\$2-\$3 Million	3
Academic Medical Center	1,000	urban	More than \$500 million	9
Distributor	N/A	rural, suburban, urban	\$10 - \$25 million	3
Hospital	60	rural		9
Hospital	550	rural, urban	\$100-\$500 million	2
Hospital		rural, suburban, urban		9
Hospital	26,000	rural, suburban, urban	More than \$500 million	5
GPO	N/A	rural, suburban, urban	More than \$500 million	
Hospital	24,000 licensed beds	rural, suburban, urban	More than \$500 million	4
Association	N/A	rural, suburban, urban		3
Services	N/A	urban	\$500,000 - \$1 million	8
Hospital	1100	urban	\$5-\$10 million	3
Hospital	886	urban		6
Association	N/A	rural, suburban, urban		3
Hospital				
Hospital	629	rural, suburban, urban		6
Hospital	250	rural, suburban, urban	\$10 - \$25 million	8
GPO	N/A	rural, suburban, urban		3
Hospital				
Academic Medical Center	918	urban	More than \$500 million	4
Services	N/A	rural, suburban, urban		
Distributor	N/A	rural, suburban, urban	\$10 - \$25 million	3
Hospital	2,059	rural, suburban, urban	More than \$500 million	6
Hospital	91	urban		6