

# Guidelines for Prioritization of Allocation of Personal Protective Equipment (PPE)

**ISSUED: 16 March 2020**

**REVISED: 1 December 2021**

## **Purpose:**

This document serves as a prioritization guide for fulfillment of resource requests for PPE across the state to meet the needs of the response to COVID-19. Early in the pandemic, PPE was a scarce resource and difficult to procure across the state, nationally, and internationally. This prioritization document does not guarantee fulfillment of every order that meets the priority criteria, nor does it ensure fulfillment of complete orders. Orders may include substitutions and/or may be partially filled due to limited stock or variable clinical needs.

## **Process:**

The State Health Officer, or his designee, can modify these criteria based on emerging response needs and/or PPE availability. At the point where the PPE supply chain begins to normalize, state allocations may be suspended.

## **Prioritization Protocol**

1. Conventional (steady state): Organizations are able to order/maintain levels of PPE for current operations and have enough on hand for a possible surge event. Current facility strategies are in place as part of general infection prevention and control. Organizations can maintain a 30-day supply of PPE.
2. Contingency: Organizations have anticipated PPE shortages and/or have 7-14 days of PPE supplies on hand. Those organizations begin to implement strategies to obtain additional PPE through available channels and prepare for conserving PPE.
3. Crisis (Emergency): When demand is exceeding supply, and facilities use their operations cache and have less than 7-14 days of PPE on hand and/or face a surge (e.g. active outbreak with documented surge) in COVID-19 cases. In crisis, facilities and organizations have implemented PPE conservation strategies as appropriate.
  - a. Organizations may request an emergent shipment of PPE to meet their needs for up to 7 days.

*Note: The state recommends that all health care facilities maintain at least a 7-day supply of necessary PPE. State and county EMAs will aim for short, rapid deployment of supplies [(state response goal from request to shipment: <24 hours) dependent on type of PPE and availability in the warehouse, quantities requested, and shipping location in the state].*

On 20 November 2021, the Proclamation of Emergency for Mississippi ended. Organizations should be at conventional (steady state).

## **Prioritization for PPE During Crisis (Emergency) Surge Events**

### **TIER #1**

1. COVID-19 System of Care designated facilities with the greatest number of confirmed

- cases, relative to other COVID-19 System of Care designated facilities
- a. Level 1-4 hospitals not performing elective procedures
  - b. Activated Convalescing Centers (Rural Hospital, Nursing Home Facility, State Alternate Care Sites)
  - c. EMS agencies under current MOA with the state who are being asked to transport confirmed cases
2. Long-term care facilities with confirmed cases

**TIER #2**

1. Other hospitals with the greatest number of confirmed cases, relative to other hospitals
2. Other EMS agencies who are being asked to transport confirmed cases
3. Healthcare workers providing support to Long Term Facilities with confirmed cases
4. Healthcare facilities with confirmed cases
5. Congregate locations with confirmed cases (Shelter, Correctional Facilities, Dormitory)
6. Quarantine/Isolation facilities operated by Mississippi State Department of Health

**TIER #3**

1. First responders providing medical response to suspected or confirmed COVID cases
2. Other EMS and non-emergency transport services
3. Fire Departments (providing non-transport emergency medical response), Law Enforcement agencies and Emergency Management agencies
4. Quarantine/Isolation Facilities operated by other jurisdiction
5. Long term care and skilled nursing facilities
6. Home health, hospice agencies and other healthcare facilities
7. Outpatient facilities

**TIER #4**

1. Homeless Shelter and other congregate locations such as jails, dormitories
2. Families of confirmed cases who are at home

**Other Considerations**

All emergency requests for PPE will be verified and vetted by MSDH/ESF-8 to ensure priority assignment based on current response needs. Emergency requests for PPE by medical facilities should provide a point of contact for the requesting facility at the time of the request.

PPE and logistics to support state operations will continue as normal to State and County COVID-19 approved vaccination sites, EMS Agencies under MOA, Rural Hospitals and Nursing Home Facilities under state Convalescing Facility agreement and other assignments approved by the Operations Chief.



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