

Ethical Responsibilities of Health Care Vendors

Given the very serious ramifications of limited resources in a disaster and its accompanying decisions and outcomes, there is an ethical responsibility on the part of vendors that serve health care to prepare themselves for how they will maintain operations, continue to support health care organizations and how they will allocate scarce resources in a disaster.

The State Expert Panel on the Ethics of Disaster Preparedness in collaboration with the Wisconsin Division of Public Health, Hospital Emergency Preparedness Program and the Wisconsin Hospital Association has developed a series of brochures, entitled “The Ethics of Health Care Disaster Preparedness.” These documents provide guidance to health care organizations and staff so that all have a better understanding of why certain decisions are made, how these decisions are informed by the ethical principles in this document and how these decisions will be implemented when there are limited resources.

The State Expert Panel has produced this document primarily as a basis for discussion so health care organizations and vendors that support health care can participate in a dialogue that will further refine these guidelines. The desired outcomes of these discussions include:

- a greater awareness of the ethical issues that will arise during a disaster*
- an understanding of the ethically justifiable expectations regarding what to expect from the health care system and from health care vendors during a disaster*

*Before reading this brochure, you are encouraged to read the brochure
“Ethics of Health Care Disaster Preparedness.”*

The State Expert Panel assumes that vendors that serve health care organizations have been committed to these preparedness efforts and can attest to the significant

accomplishments that have been made since the events of 9/11.

The State Expert Panel believes its responsibility is to identify the

ethical issues that will occur in a disaster, to provide initial guidance regarding ethical decision-making, to provide a forum for discussion of these ethical issues and then to take

the results from these discussions and share them with health care organizations and their health care vendors. Vendors that serve health care organizations need to understand that even with health care organizations “being prepared” and following all of these ethical guidelines, there may be loss of life for those who do not get the necessary treatment due to limited resources.

The following ethical responsibilities of health care vendors are based on the Ethics Principles and Procedural Values as explained in the brochure “Ethics of Health Care Disaster Preparedness.” They are formatted as a checklist with a rationale for each checklist item and a recommended desired outcome for each responsibility.

It is the hope of the State Expert Panel that the management teams of vendors that serve health care organizations will meet to discuss their responsibilities and achieve the recommended desired outcomes.

Vendors are critical to the maintenance of the health care system and are ethically responsible for putting measures in place to protect their employees and their business operations. Vendors must have processes in place to ensure that essential health care services are maintained.

1. To have a plan in place to keep personnel safe in a disaster.

Rationale: Management is ethically and legally bound to provide a safe working environment. It is incumbent upon management to anticipate the needs of its workers in a disaster incident. Management needs to identify the services and products that will need to be maintained and the effect that this will have on its workforce.

Desired Outcomes:

- Management has completed an analysis of the needs of its workers in a disaster and has a plan in place to address these needs.
- Management has discussed with operational personnel the issues that may arise when there are limited resources, e.g. “short staff,” disruption in the supply chain.
- Management, to the extent possible, has developed plans to manage the resources that will affect staff safety and health.

2. To have a plan in place to allow personnel to care for their family, pets, property and other personal concerns when called to serve in a disaster.

Rationale: Workers need to know that their loved ones are cared for during a disaster, that they have the capability to communicate with them and that their loved ones are

protected from the effects of the disaster. Management should consider working with personnel to determine what they believe will be their needs when fulfilling their job responsibilities under the stressful conditions of a disaster. Management is to make best efforts to meet the needs of their personnel.

Desired Outcomes:

- Management has identified the personal needs of staff that will enable them to show up for work and maintain production in a disaster.
- Management, to the extent possible, has developed plans, to assist staff to attend to their personal needs to maintain a stable workforce.

3. To have a plan in place for the appropriate allocation of services and products.

Rationale: It is very likely that productivity and output at businesses will be diminished by a workforce that is ill and/or injured and by a diminished supply of resources necessary to produce services and products. Businesses should consider how to prioritize the delivery of their services and products so that the greater good of the community can be served versus selling services and products to those willing to pay the highest price or placing the biggest order.

Desired Outcomes:

- Management is to have plans to increase productivity, to the extent possible, to maintain the delivery of supplies and equipment needed by health care organizations, even given the fact that the company may have a workforce also diminished by illness or injury.
- Management is to have a plan in place for the allocation of scarce resources as demands increase and supplies diminish. This includes the ethical obligation to serve all health care organizations in need, including non-customers.

4. To know and mitigate, to the extent possible, the vulnerabilities of the business and its personnel and the implications of these vulnerabilities in a disaster.

Rationale: Management is to identify those vulnerabilities that may make the business unable to continue providing its services and products and then to determine what can be done in the planning phase to maintain, as much as possible, continuity of operations.

Desired Outcomes:

- Management is to consider the vulnerabilities that may effect production and delivery of goods and services and what planning can be done to mitigate these

vulnerabilities so as to maintain services to its customers.

5. Management must focus on the greater good of the community.

Rationale: To achieve “the greater good for the community” vendors may need to set aside competitive goals and do what is best for the community. Management should consider how they will collaborate with their business partners and their competitors to ensure that services and products, necessary for the maintenance of health care organizations, are available. This may involve businesses being willing to share supplies, equipment and personnel with one another.

Desired Outcomes:

- Management is to consider Memorandum of Understanding with other vendors for the sharing of supplies, equipment and personnel to maintain a system for the delivery of goods and services to health care organizations.
- Management is encouraged to meet with competitors to determine the high level issues that could come into play as vendors attempt to maintain a system for the delivery of goods and services to health care organizations.

6. Vendors must keep their business infrastructure operational.

Rationale: Management must ensure that the business can operate in a disaster on its own at a minimum for 72 hours and potentially for longer periods of time because hospitals are required to operate with their own resources for 96 hours. This means rethinking strategies such as “just-in-time” inventories. This must also include plans to ensure that there are adequate personnel to maintain services and products.

Desired Outcomes:

- Management is to work with each department within its organization to identify how long they can continue to maintain production and delivery with existing materiel inventories.
- Management is to determine whether additional materiel inventories need to be established so that production can continue even if the supply chain is disrupted.
- Management should determine how they can continue to ship products if the transport system is disrupted.

7. Vendors must communicate consistently with their customers in a disaster.

Rationale: Management must ensure that there is a process for their

health care customers to be kept informed of the status of orders and deliveries of services and products.

Desired Outcomes:

- Vendors are to share their emergency management plans with their health care customers so that customers know what to expect and what not to expect.
- Vendors should have communications redundancy should landlines and cellular telephones

and other traditional means of communications such as the internet not be functional.

8. Vendors should voluntarily participate in planning for a disaster.

Rationale: Health care organizations are preparing to treat a surge of patients. Vendors that support critical community infrastructure, such as health care organizations, utilities, and first responders should

consider their role in assisting these critical infrastructure organizations.

Desired Outcomes:

- Vendors are to have an Emergency Operations Plan that documents their continuity of operations capability.
- This Emergency Operations Plan is to be exercised on a regular basis and, as appropriate, involve health care organizations in the exercise.