

Request for Information (RFI) – Strategic National Stockpile Response from the National Association of County and City Health Officials

Thank you for the opportunity to respond to the request for information on the Strategic National Stockpile (SNS). As demonstrated currently in the COVID-19 emergency, medical countermeasures (MCM) and other supplies from the SNS are critical to timely and effective response in a public health emergency. The SNS has been the catalyst for operational readiness for local communities and states to be capable of handling public health emergencies including a pandemic, other outbreak, or terrorist event, and previous training and advised plans have been used in the COVID-19 response.

The National Association of County and City Health Officials provides this white paper in response to the RFI on behalf of the nearly 3,000 local health departments across the country currently engaged in COVID-19 response. The distribution of MCM and other medical supplies needed in an emergency is a process that requires coordination from the local, state, and federal levels of government. Federal agencies and officials including the Assistant Secretary for Preparedness and Response (ASPR) and the Centers for Disease Control and Prevention (CDC) are critical to the effective functioning of the MCM enterprise. Currently, CDC expertise on public health emergency preparedness from the Center for Preparedness and Response plays an integral role to the operations of the SNS. CDC experts provide guidance and technical assistance to help health departments develop, test, operationalize, and improve preparedness and medical countermeasure plans and evaluation to standardize approaches and tools to measure the readiness of health departments to get life-saving medicines and supplies to the public. NACCHO strongly recommends that the collaboration between ASPR and CDC in SNS administration be continued to ensure that there is necessary coordination and efficiency of operations of the SNS.

NACCHO provides specific comments below on the questions included in the RFI.

Section 1 – Question 1 *Do you agree with the stated objectives of the SNS?*

- The distribution of MCMs, as stated above, is most successful in saving lives and protecting health when implemented through local, state, and federal coordination and collaboration.
- NACCHO is concerned that due to funding cuts at the local, state, and federal level, many local communities and states do not currently have the necessary supplies and products stockpiled to support pandemic response particularly as it relates to COVID-19 but also for other public health emergencies. The vision of the SNS as a “short-term, stopgap buffer” is only effective if local and state resources are sufficient to meet the needs of most of the people in their jurisdiction.
- A significant limitation to local and state capability is the lack of reliable funding to local and state governments to sustain stockpiles. Recent NACCHO research shows that in 2019, more than 80% of local health departments experienced either a decrease in their preparedness budget or no preparedness budget changes compared to the previous fiscal year.¹ Although overall local health departments reported budgets that were greater or approximately the same in 2019 as in the previous fiscal year, this does not necessarily mean their preparedness and response services have increased. Reliable and sustainable



funding is essential to ensuring these agencies can maintain their role in the distribution and dispensing of lifesaving MCMs.

- Without inclusion of all necessary stakeholders, including local and state public health emergency preparedness and medical countermeasure planners, the federal government will be unable to meet local demand and contribute to improving supply availability.
- Without federal coordination this approach can increase competition for scarce resources and divert already limited local funding to physical resources like PPE instead of staffing as individual states and localities would be expected to procure and manage their own supplies.
- NACCHO agrees with the stated objectives of the SNS included in this RFI, but also recommends the inclusion of transparency of material prioritization as an objective of the SNS. The U.S. Government's role in procurement and oversight of SNS activities also requires visibility into how resources will be allocated throughout the country and where they will be supplied so that local and state public health agencies can plan accordingly to meet the needs of their population.

Section 1 – Question 3 *How can your organization contribute to achieving the vision for the SNS?*

- NACCHO, on behalf of the nearly 3,000 local health departments across the country, can help facilitate and ensure the local voice is available to ASPR to help inform SNS operations.

Section 1 – Question 4 *Please provide your perspectives on the feasibility, benefits and risks of the below partnership strategies.*

- An infrastructure assessment is needed in order to achieve ASPR's vision for the SNS. There is a lack of accurate and timely information on shipping, which has dated as far back as the 2009-2010 H1N1 response. Trucks may arrive without warning or not at all and advance shipping notices (ASNs) can be delayed for several days, leading to several hours of lost staff time waiting for shipments and an inability to report to the federal government that shipments are correct in a timely manner.
- Without advance knowledge of shipments there is no way to accurately tell federal agencies whether shipments were received and if they were correct. Because the SNS program pushes inventory from a huge number of warehouses and vendors in an expedited manner, shipments can arrive quickly, which is critical in an emergency. Unfortunately, there is not enough real time data exchange between all those sites and SNS Operations and then down to the states and local communities, which can cause delays in getting needed MCMs and supplies to the public and can cost lives in an emergency.
- While tracking of supplies is of the utmost importance, it needs to be done in an organized fashion. In some cases, states are asked simultaneously by multiple federal agencies (HHS, SNS, and FEMA) for confirmation of shipments, which wastes time in an emergency.

Section 1 – Question 5 *What other partnership strategies should be considered?*

- The distribution of MCM and other critical medical supplies required in an emergency is a process that requires pre-planned coordination from the local, state, and federal levels of government. ASPR should also consider the development and promotion of cost-effective strategies to rotate supplies before their expiration to support public health agencies in sustaining stockpiles.

- The development of built in mechanisms to protect the health and safety of supply chain workers during COVID-like pandemic scenarios is critical to ensuring the continuity of SNS operations, such as sustaining and ramping up manufacturing capacity during a surge.

Section 2 – Question 1 *With the goal of enabling better product availability to meet pandemic response, we expect the SNS to include items outlined in Table 1. Should any other items be considered for inclusion, and why?*

- Additional supplies that should be considered for pandemic response include shoe covers, hand sanitizer, disinfectants, body bags, and ancillary supplies for vaccine clinics (e.g. disposal containers for sharps, alcohol swabs, band-aids). ASPR should also assess the feasibility of 3D printing to manufacture supplies.

Section 2 – Question 2 *For a potential future surge in demand, what investments could be made to increase availability and reduce lead times for items that you manufacture or distribute? Investments might include (but are not limited to): Capital equipment/infrastructure*

- Issues related to capital equipment/infrastructure can all be considered barriers. Warehousing traditionally is the big issue with stockpiling. There are a lot of complicating factors that are different for every locality and state: warehouse space; staffing resources to maintain the warehouse/stockpile; funds for the procurement of items; and finally shelf life of inventory (rotating and discarding considerations are also needed).

Section 2 – Question 4 *Are there business arrangements, incentives, or steps that the US Government can take that would allow or encourage you to make these investments?*

- The SNS program—and funds such as Public Health Emergency Preparedness, Cities Readiness Initiative, and Hospital Preparedness Program grants—are all crucially important to any type of local and state pandemic planning and stockpiling. However, at current levels, they are insufficient for local health departments to fully support the preparedness activities and materials needed. Without those funds, or new funds specifically for mass dispensing/administration planning, training, exercising, and stockpiling, those functions will cease in states and local jurisdictions and the federal government will be solely responsible for emergency mass dispensing and administration in a pandemic or other event.

Additional feedback

- ASPR and HHS must ensure that local and state public health agencies, and CDC are invited to provide feedback on proposed strategies for the SNS in advance of their implementation. As the voice, leader, and advocate for the nation's nearly 3,000 local health departments, NACCHO is positioned to provide subject matter expertise on the public health role in the SNS, amplify the promotion of resources from the federal government, and provide technical assistance to local health departments to help them carry out their SNS responsibilities.

Thank you again for the opportunity to respond to this RFI. Please contact Eli Briggs, NACCHO Senior Government Affairs Director, at ebriggs@naccho.org with any questions.

¹ NACCHO. NACCHO's 2019 Profile Study: Local Health Department Capacity to Prepare for and Respond to Public Health Threats. Retrieved June 1, 2020 from <http://nacchoprofilestudy.org/wp-content/uploads/2020/05/2019-Profile-Preparedness-Capacity.pdf>.