

Applying the Ethical Framework

- Requires contextualization
 - E.g. existing surgical hierarchies
- Requires definition
 - E.g. 'medically necessary', 'likelihood of benefit'
- Requires triggers
 - When to move from one level to next
 - Focus is on 'sufficient supply'
 - 5-day supply already focus of MOHLTC, planning bodies
- **Goal is sustainability (ie. zero days with no drug)**

The following tables are examples only

Assumptions:

- we are already engaging in stage 1-a measures to the greatest extent possible
- 100% allotment = what we would use in a typical week
- 1-b would require an organization to request additional supply from LHIN or other organizations
- 1-c/d would actually be incremental as needed
- Any suggested stage includes all stages above it
- “Sufficient Supply” = enough to get you to next allotment where expecting 100%

New Info

Assumptions:

- Sandoz only required to provide one week notice of estimated allotment
- ...therefore need to 'guess' allotment for the 2nd week out
 - Q. should we assume same allotment as next week?
 - Q. should we base assumption on past few weeks allotments?
- Sandoz has gone from rounding up allotments (not estimates) to rounding down to the nearest quarter
- Stage 1-b is a key step, and while it is not always explicitly seen in the tables, if the jump is from 1-a to 1c/d or 2a-d, we must immediately engage 1-b.

We can project what we need in reserve to cover future (next weeks) shortage

E.g. at 75% expected allotment, we need 2 days excess to get through 'next week'

E.g. at 50% expected allotment, we need 4 days excess to get through 'next week'

*based on weekly shipments	100% allotment expected	75% allotment expected	50% allotment expected	25% allotment expected	0% allotment expected
> 5day supply	Stage 1-a only	Consider 1-c/d	Consider 1-c/d	Consider 1-c/d	Consider 1-c/d
<u>5</u> day supply; shipment expected in <u>1</u> day	Stage 1-a only	Stage 1-b	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>2</u> days	Stage 1-a only	Stage 1-b	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>3</u> days	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>4</u> days	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>5</u> days	Stage 1-b	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>6</u> days	Stage 1-c/d	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)

Sufficient Supply	Request Sharing	Cancel Services	Explicit Rationing
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....If expected short allotments extend several weeks (they do), there will never be enough carry over

We'll be perpetually looking for an additional 2/4 days supply. The message here would be to engage in Stage 1-c/d measures until you have opened up enough supply to get you through 'next week'

*based on weekly shipments	100% allotment expected	75% allotment expected	50% allotment expected	25% allotment expected	0% allotment expected
> 5day supply	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 1-c/d	Stage 1-c/d
<u>5</u> day supply; shipment expected in <u>1</u> day	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>2</u> days	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>3</u> days	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>4</u> days	Stage 1-a only	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>5</u> days	Stage 1-b	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)
<u>5</u> day supply; shipment expected in <u>6</u> days	Stage 1-c/d	Stage 1-c/d	Stage 1-c/d	Stage 2 (A > B > C > D)	Stage 2 (A > B > C > D)

... every time we engage in Stage 1-c/d, the question has to be: "will these actions open up enough supply to get us through this week with an additional 2/4 days excess to cover next weeks shortfall?"

... every time we engage in Stage 1-c/d, the question has to be: “will these actions open up enough supply to get us through this week with an additional 2/4 days excess to cover next weeks shortfall?” If the answer is “NO”, then we have to implement Stage 2

... BUT we *shouldn't* engage in Stage 2 until ‘next week’ when we have less than 6 days supply and are not expecting a shipment for 7 days.

STAGE 2	Week 2 Supply (in days)	Week 2 Projected days w/o drug	Irrespective of expected allotment, and presuming no other procurement forthcoming from LHIN/partner hospitals	Extent of measures
	6	1	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	5	2	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	4	3	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	3	4	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	2	5	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	1	6	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?
	0	7	Stage 2 (prioritize A > B > C > D)	Will it carry you to next allotment?

Calculation Errors

- Potential over-estimates
 - ‘allotment’ is based on average usage. This is a moving target where hospitals are in conservation mode. In other words, 100% allotment may mean we’ll have excess and 75% allotment might get you through the whole week
- Potential under-estimates
 - Sandoz deliveries may fall short of estimated allotment (rumors of this already happening in community centres)