

Medical Surplus Code of Conduct



In March 2012, through the generosity of a grant by the Gerard Health Foundation, the Catholic Health Association of the United States (CHA) engaged the Partnership for Quality Medical Donation (PQMD) to share leading practices and catalyze collaboration between their members, medical surplus recovery organizations (MSROs) and key stakeholders of the medical surplus industry.

As a result of this engagement, PQMD hosted a conference of MSRO leaders and two additional in-person meetings of MSRO leaders to continue to develop relationships and an MSRO Code of Conduct. This Code of Conduct, contained on the pages that follow, is the first significant milestone in a plan that leads to MSRO standards and eventually an opportunity for MSROs to be accredited.

We would like to thank PQMD for their support and recognize Lori Warrens, Sara Christopherson and Jessica Warrens for their leadership on this project.

Several MSROs shared their experiences and ideas as a foundation for this project. We would like to recognize the following for their significant contributions:

- Brother's Brother Foundation
- Dispensary of Hope
- Hospital Sisters Mission Outreach
- MedWish
- Medical Bridges
- Medshare International
- Providence Health and Services

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Code of Conduct

MSRO Network





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MSRO Network Code of Conduct

Who we are:

The MSRO Network is a nation-wide consortium of medical supply recovery organizations (MSRO) dedicated to increasing quality and impact in recovery, access and utilization of medical supplies and equipment donated to hospitals, clinics, programs and organizations providing health services domestically, and internationally.

What we do:

MSROs work with hospitals, manufacturers and non-profit healthcare providers to recover, redistribute and effectively utilize high-quality medical supplies and equipment to improve the health of those in need. This work demonstrates respect for humanity and for our natural and material resources.

Working in collaboration with all stakeholders and with independent accreditation entities, the MSRO Network establishes, publishes and advances standards of practice to guide operations and decisions of its membership, the MSRO industry, donor organizations, funders and healthcare providers.

Resulting in:

The MSRO Networks member organizations commit to a path toward accreditation with progress documented by self-assessment, independent evaluation and the MSRO Network's peer review.

Supporting continuous quality improvement, the MSRO Network provides a platform for resource sharing and dissemination of model programs; ensuring member organizations have access to state-of-the-art innovations and the resources necessary for implementation.

The MSRO Network's combined scope of service, information and engagement of the global community attracts challenges and equips manufacturers, hospitals, healthcare systems, and funders dedicated to creating a robust healthcare system for the poor and vulnerable around the world.

Background

The Medical Surplus Recovery Organization (MSRO) Code of Conduct (Code) reflects the collective commitment of the medical surplus recovery community to adhering to quality practices and ensuring organization integrity. The Code acknowledges that the MSRO Board, staff and volunteers are ultimately responsible for setting and ensuring quality practices and organizational integrity. The Code also recognizes that policies, practices and procedures will vary and no two MSROs are exactly alike. However, voluntary standards that are developed, recognized and adopted by the MSRO community serve to define quality practices and communicate a level of professionalism that inspires public trust. The governance and program management elements outlined in the MSRO Code of Conduct are intended to guide the development of quality MSRO practices and provide benchmarks that can be used to measure adherence to the Code.

The Code applies to MSROs that are responsible for receiving donated medical products, sorting and preparing the products for distribution.

The code assumes that the intent of the donor is for the products to be used appropriately by the recipient and not enter the marketplace.



MSRO Code of Conduct

I. Governance

Member organizations should have similar ethos and values, a commitment to serve qualified recipients without discrimination, a commitment to sustainable programming whenever possible, integrity, excellence, and organizational transparency.

Member organizations are encouraged to have a strong commitment to honoring diversity in the workplace and should adopt an anti-discrimination policy that applies to directors, employees, and volunteers.

Member organizations shall be governed fairly, impartially, and responsibly by an independent board of directors.

Member organizations shall conduct their finances in a way that ensures the appropriate use of funds and accountability to donors. This includes:

- Member organizations shall have an annual audited financial statement, conducted by an independent certified public accountant.
- Member organizations should be in compliance with generally accepted accounting principles (GAAP).
- Member organizations audited financial statement should be available upon request.

Member organizations should always respect the four core principles that form the basis of good medical equipment, consumables, and pharmaceutical donation practice:

- Donations of medical equipment, consumables, and pharmaceuticals should benefit the recipient to the maximum extent possible. All donations should be based on an expressed need. Unsolicited donations are discouraged¹.
- Donations should be given with due respect for the wishes and authority of the recipient, and in conformity with the government policies and administrative arrangements of the recipient country.
- There should be effective coordination and collaboration between the donor and the recipient, with all donations made according to a plan formulated by both parties.
- There should be no double standard in quality. If the quality of an item is unacceptable in the donor country, it is also unacceptable as a donation.

¹ **The MSRO Network holds that unsolicited donations are unacceptable in non-emergency and emergency situations.**

II. Needs Assessment

The Organization agrees to a cooperative and systematic process for determining and addressing needs, or "gaps" between current conditions and desired conditions or "wants". The discrepancy between the current condition and wanted condition must be measured to appropriately identify the need. The need can be a desire to improve current performance or to correct a deficiency. A needs assessment is a part of the planning process, often used for improvement in individuals, education/training, organizations, or communities.

A donation should only be made if it is based on an expressed need, and specifically requested by the in-country partner. Ensuring the appropriateness of a donation is one of the most important steps in any donation process. If a donation is not appropriate, it can create additional burden for the recipient. This is particularly true in disaster situations where inappropriate donations actually impede recovery efforts. Prior to shipping member organizations should have all product reviewed and approved by the recipient.

The guidance below outlines important steps that can be taken to help ensure that a donation is appropriate for the situation and recipient population. Information that should be collected and assessed includes:

- Demographics and socioeconomic status of the population being served.
- Whether or not the recipient organization has an understanding of the local healthcare infrastructure, including the location and capacity of healthcare facilities.
- Relevant information on the in-country partner's staff capacity and qualifications. This is done in order to determine the ability of the partner to effectively handle and distribute the donation.
- Information related to the quantity of product needed.
- The recipient organization's policies and plans for taking into account the medical culture, beliefs and traditional health practices.
- Important contact information for both the MSRO and recipient organization. This information should be exchanged in order to maintain effective communication throughout the donation process and as a resource in case questions arise.
- The logistics capabilities of that country in order to identify any potential problems or difficulties. Items to consider may include transportation network, customs/Ministry of Health (MOH) rules and regulations, import laws, local shipping and storage capacity, climate and security.

Consumables

Information specific to medical consumables that should be collected and assessed includes:

- The recipient organization's human resources capacity, in order to determine if it has access to the appropriate human resources to properly handle the donation.
- The appropriate product type and quantity, size, and material to address the health needs of the target population.
- The manufacturer's specifications for the exact piece of equipment that items are being donated to support, **when necessary for usefulness**.
- If the recipient organization has product disposal plan.

Medical Equipment

Prior to the donation of a piece of medical equipment, the donating organization must assess the recipient's capacity to handle the device. Important factors to consider include but are not limited to available facilities, electrical and pneumatic power, heating ventilation, and air conditioning. In addition, it should be determined whether or not the recipient organization has access to properly trained clinicians and technicians, to install, operate, maintain, calibrate and repair the device.

In considering the provision of health care equipment to developing economies, potential donors should think about the following desirable characteristics in such equipment:

- The technology is appropriate for the operating environment.
- Number of accessories required is minimal and/or will not pose significant challenges for the operation and maintenance of the equipment.
- Necessary operating supplies (particularly disposable) are available at an affordable cost.
- Standardization with other equipment in the locale.
- The piece of equipment has low energy consumption.
- The equipment uses environmentally friendly substances.
- The equipment is easy to maintain.
- The equipment has a reasonable tolerance to hostile electrical and physical environments.

Member organizations should provide the recipient with a responsible use guide that outlines the requirements for appropriate use and maintenance of the equipment, when applicable and possible. When a responsible use guide is not available, Member organizations must inform the recipient prior to shipping the equipment. The guide should address the following requirements:

- **Product brand** information.
- **Installation Location:** including floor loading capacity, ceiling height, and door width.
- **Electrical Power** (voltage, frequency, phase, and dissipation).
- **Water** volume, pressure, and drainage needed.
- **Safety requirements** (such as shielding).
- **Sub-systems**, such as cables, re-agents, filters, electrodes, and recording paper, which will be required to operate the equipment to be donated.
- **Maintenance**
- **Transportation** and offloading information.

Pharmaceuticals

Member organizations should ensure that medicine donations are based on an expressed need, relevant to the disease pattern in the recipient country, and quantities should be agreed upon between donor and recipient. (*Source: World Health Organization*). Donated medicines should be approved for use in the recipient country and of the appropriate strength, dosage, and formulation for treatment of the target population.

Information specific to pharmaceuticals that should be collected and assessed includes:

- If the product being sent matches the expressed need and is appropriate for treating the affected population.
- The recipient organizations facilities to determine if they have proper storage for the product. This includes storage facilities, shelving, dispensary facility, and refrigeration.
- If the recipient organization has the proper staff for handling and dispensing of pharmaceuticals prior to any donation being made.
- Prior to donating pharmaceuticals to a country and organization must be familiar with any rules and regulations governing pharmaceuticals in that country. This can include but is not limited to what drugs are approved for use in the country, what appears on the country's WHO list of essential medicines and any national standard treatment guidelines.

IV. Quality and Quantity

Quality and Quantity are important things to consider when planning a donation. The quality of the product must be of the foremost priority. There should be no double standard in quality. If the quality of an item is unacceptable in the donor country, it is also unacceptable as a donation. All donated products should be obtained from a quality ensured source and meet all quality standards in both the donor and recipient countries. Products that do not meet stated quality standards or have been recalled should not be distributed. It is important to maintain the quality of the product throughout the donation process. Product should be packaged and shipped in a manner that safeguards its quality and integrity during transportation.

It is also important that the quantities donated should fit the documented need in order to ensure that the donations are not wasted and does not become an environmental problem.

Consumables

When donating consumables it is important that the medical personnel that will use the product and/or the personnel responsible for inventory should be involved in the ordering process.

Important factors when Sorting:

- Have a system of sorting disposable supplies into boxes of the exact same items (ex. Latex Exam Gloves size large). When applicable and necessary, organizations should note size or size range and brand information so the recipient can make informed decisions during the item selection process.
- Consumables are packed in boxes suitable for transportation.
- Label with expiration dates, using the earliest expiration in the box as the date identified to the recipient, when applicable.
- Follow all applicable laws/regulations in relation to expiration date guidelines for disposable medical devices.

Medical Equipment

Member organizations should ensure that donated health care equipment is fully operational at the system and sub-system levels, and that all essential accessories and supplies are available. In addition, member organizations will ensure that the recipient is aware of all the ancillary equipment, ongoing supplies needed and utilities necessary to the support of the device or equipment being donated.

The donated equipment should meet all of the manufacturer's safety and performance specifications.

Properly trained physicians, nurses, and/or technicians who will operate and maintain the requested equipment. If none are currently available, the recipient should provide an

explanation of how training of such personnel will be achieved, or equipment lists will be adjusted accordingly.

Pharmaceuticals

The product's generic name should appear on all package and shipping documents, along with other relevant information, e.g. quantity, expiration date, lot and control numbers, and storage/temperature requirements

Pharmacists or Medical Director representing the recipient organization should be involved, either directly or by advising others, in the arrangements for donations of medicines.

Member organizations will ensure that they have proper procedure in place to ensure excess or expired medicines are not shipped, thus creating unnecessary burden for the recipient. Some procedures could include:

- Not shipping drugs with expiration date less than 12 months dating without prior written acceptance and assurance that the product will be utilized before expiry and that the Customs regulations in the recipient country will release shipments with short-dated products.
- Having procedures in place to ensure excess or expired donations are destroyed in accordance with the manufacturers/donor's prescribed procedures and applicable government regulations/WHO guidelines.

V. Logistics

General

Packaging

Packaging can be one of the most complicated aspects of GIK logistics. Access to high quality medical products can be compromised when proper packaging procedures aren't followed. A strong relationship in country is integral to ensuring product is managed and transported properly once it's in country.

Prior to making a donation the MSRO should work with the recipients to make sure that packaging, labeling, maintenance and operating instructions (when applicable) is able to be understood by the recipient organization.

Protective packaging should take account of the mode of transportation chosen, e.g. glass syringes and bottles must be packed to avoid breakage.

Storage

Prior to a donation being made recipients should demonstrate that they can provide adequate storage capacity to accommodate necessary supplies and maintenance parts relative to the equipment being donated.

Transportation

Member organizations should consider the following when transporting a donation:

- The means is appropriate to the circumstances of the donation.
- Shipping documents are clear and contain all the essential information.
- Arrangements for necessary storage are made prior to shipping.

Staging and Loading

Volume – The capacity of the receiving group should determine through a collaborative process. The mode of transport is determined by the volume of the order, and added products should be agreed upon in advance (medical and non-medical).

Loading – Proper loading should ensure stability, (size and weight distribution, strapping), ease and safety of offloading, be appropriately wrapped, and include pallet packing lists, when necessary for effective redistribution.

Customs Clearance

Member organizations should ensure that the recipient has access to human resources with the capacity to receive the shipment and the necessary clearance documents to move it through customs in a timely manner. The recipient must be able to provide transportation from the port to the final destination.

Security

It is highly recommended that member organizations use a high security bolt seal that meets C-TPAT and ISO standards. (ex.) TydenBrooks Intermodal II Seal The seal number should be recorded for internal tracking and on shipping documents.

Consumables

Packaging

- Expiry date should be clearly labeled on all packaging.
- Consumables are packed in boxes that protect the integrity of the product and are suitable for transportation.
- Packaging should be sealed securely to prevent opening in transit and tampering.

Storage

Recipients should demonstrate that they can provide adequate storage capacity to accommodate the donated consumables prior to shipping.

Transportation

Member organizations should ensure that:

- The means of transportation is appropriate to the circumstances of the donation.
- Shipping documents are clear and that they contain all the necessary information.
- All consumables are palletized and shrink-wrapped with an accompanying packing list.

Staging and Loading

When Staging and Loading a shipment of consumables the following factors should be taken into account:

- Volume – capacity of the receiving group should determine, collaborative process, mode of transport is determined by the volume of the order, and added products should be agreed upon in advance (medical and non-medical).
- Loading – Proper loading should ensure stability, (size and weight distribution, strapping), ease and safety of offloading, be appropriately wrapped, and include pallet packing lists, when necessary for effective redistribution.

Customs Clearance

Member organizations should ensure that the recipient has access to human resources with the capacity to receive the shipment and the necessary clearance documents to move it through customs in a timely manner. The recipient must be able to provide transportation from the port to the final destination.

Medical Equipment

Packaging

When packaging equipment MSROs will ensure that:

- Is crated and/or packed to minimize damage during shipment.
- The necessary components referred to in the installation instructions are included, packaged together and shipped with the equipment.
- Installation (for equipment that requires installation), operating and maintenance instructions are included for all equipment. If the instructions are not available, the MSRO will work with the recipient to confirm that they have the capacity to appropriately use the donation.

Pharmaceuticals

Packaging

When packaging pharmaceuticals for donation, member organizations should take into account the following factors:

- The climatic conditions in the recipient country.
- The necessary steps are taken and materials used to avoid breakage.
- That products requiring maintenance of cold-chain must be properly labeled and contain control thermometers.
- That shipping documents include the product's generic, along with other relevant information, e.g., quantity, expiration date, lot and control numbers and storage/temperature requirements.
- That prescribing information is in a language that will be understood by a staff member at the recipient institution.

Transportation

When shipping pharmaceuticals member organizations should use only qualified, licensed, and reliable transport companies. The duration of time that a shipment will spend in transport should be taken into account when considering the appropriate means of transportation for items requiring refrigeration or maintenance of cold chain.

VIII. Monitoring and Evaluation

Member organizations should have a process for evaluating the quality of their donations. Thorough evaluations should be conducted periodically, at intervals determined to be best by the member organization. This is necessary to resolve problems, evaluate installation and training, provide feedback and appreciation to donors, and learn how to improve the process, standards, and procedures.

Member organizations should have a plan in place to review the donation program so as to learn from its successes and missteps. The plan should provide ready access to recipients so as to facilitate feedback.

IX. Donations in Emergency Situations

When determining whether or not to donate during a disaster the following factors should be considered:

- Is the local population participating in any assessments and product requests.
- Whether outside aid is being accepted and has been requested.
- What other organizations are responding.
- Is there an expedited plan in place for vetting new partners.

During a disaster product donations should be held to the same quality standards as in non-disaster situations.

Consumables

Member organizations should verify need and send only those products requested by the recipient. They should be processed and packaged in the same manner as non-emergent shipments and be sent by the most expeditious means available.

Medical Equipment

The general rule of thumb is that medical equipment should not be donated in emergency situations, unless it is established that the emergency will be continued over a long period. The exception to this is any equipment listed in the guide published by the United Nations entitled *Emergency Relief Items: Compendium of Generic Specifications*®, Volume 2.

Pharmaceuticals

Member organizations should send drug donations for emergency use by the most expeditious means available.

X. Disposal

Member organizations shall dispose of hazardous materials in accordance with relevant laws, regulations and good environmental practices.

Appendix 1. Definitions

Donors - are the for profit and nonprofit, public organizations donating to MSRO.

MSRO - Medical Surplus Recovery Organization

Recipient Organization - the organization receiving products from the MSRO.