

Franklin County Emergency Management & Homeland Security

5300 Strawberry Farms Boulevard

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www.fcemhs.org



Franklin County Partner,

As Ohio begins to reopen, personal protective equipment (PPE) will be needed to help prevent or slow the spread of COVID-19. Franklin County Emergency Management and Homeland Security (FCEM&HS) is currently following guidance from the Centers for Disease Control (CDC) to fulfill requests for PPE. With that guidance in mind, our priority is providing PPE to front line workers in direct contact with patients that have tested positive for COVID-19. Additionally, we are assisting the workers in private-sector health care facilities that house positive COVID-19 patients as well as the vulnerable populations within Franklin County that are most at risk.

It is important for businesses to follow CDC, State of Ohio, and local health guidance on social distancing and other health measures to protect yourself, your workers, and those your business serves. At this time, FCEM&HS is unable to provide PPE to other business sectors such as dentist offices, optometrists, veterinary clinics, daycares, etc. Businesses that are planning to reopen, will need to develop a plan and the capability to purchase PPE from normal supply chains.

For information on vendors where your business may be able to purchase PPE, visit our website at www.fcemhs.org or the Ohio Manufacturers Association at www.repurposingproject.sharetribe.com. FCEM&HS does not endorse any specific vendor listed and we cannot ensure that supplies will be readily available for purchase. If you have any questions or need additional information, please contact our office at fcemhs@franklincountyohio.gov or 614-794-0213.

Sincerely,

A handwritten signature in blue ink, appearing to read "Chris Williams", with a long horizontal stroke extending to the right.

Chris Williams
Operations / Resource Manager



ODH Clarification and Conservation questions for PPE in response to COVID-19

1. How have you identified and attempted to leverage and conserve the limited vital PPE resources that exist in your County? Please list specific partners you have engaged.

Answer:

2. How have you considered optimizing similarly effective products to what you have in your existing inventory within your County? (eg. Face shield instead of goggles, this is a patient care question) Please list all products.

Answer:

3. What is your daily and weekly burn rate against current inventory to forecast needs within your County? Based on this burn rate when do you forecast being without PPE?

Answer:

4. What communications have you had with your regional health care coordinator?

Answer:

5. Describe any measures healthcare providers, or other industries that use PPE, have taken to reduce elective procedures and other measures in your community in order to conserve PPE and leverage the limited reserves that are available in your community?

Answer:

ICS 213 Resource Request Instructions

Please make an effort to go through your normal means of acquiring resources to fulfill your COVID-19 needs. You must prove that no/insufficient local resources are available to meet your needs. This would be the most effective way of getting resources quickly if they are in the supply chain.

As the coordinating agency for emergencies, An ICS 213 RR and an ODH form attached to your e-mail must be filled out. You must document that your resources are overwhelmed. Submit your request to FCEM&HS for processing. This will be your official request to our agency. We plan to compile this information as one resource request to submit to the Ohio Emergency Management Agency. There is **NO GUARANTEE** that any of our requests would be fulfilled.

You must plan to deplete your current PPE or sanitizing supplies first. There are multiple requests for scarce supplies. Limited supplies will go to the boots on the ground first before anyone else. The boots on the ground are hospitals and public safety officials who are potentially dealing directly with the infected.

Do not forget to put your name and phone number on the request form. Not doing so could significantly delay contact.

The 213 RR has some prefilled blocks for your convenience. The following blocks are for you to complete:

Requestor Section:

#2 – **Date/Time:** Place the current date and time when this form was completed.

#3 – **Requesting Agency:** Please place your agency name in this block and abbreviate where necessary.

#4 – **Order:** Leave this box blank

- **Qty.:** Enter the amount of supplies you believe your agency/department needs. It is highly recommended that you account for your responders, the shifts, and the duration of the emergency.
- **Kind and Type:** Leave these blank
- **Detailed item description:** Be sure not to make your request too detailed. The more detailed, the more likely that it could be turned down. For example, we have written PPE. If we get any supplies, it will be some sort of PPE. If we request N 95 masks, they may reject it if they do not have N 95 masks even if they (the state) have a different type of mask available.
- **Requested, Estimated, and Cost:** Leave these blocks blank.

#5 – **Requested Delivery/Reporting Location:** Please enter your company's address. If your company's location is outside of Franklin County, we unfortunately cannot process your request and will ask you to reach out to your respective county EMA. If you have many locations in and outside of Franklin County, please put the addresses that are INSIDE of the county.

6 – **Suitable Substitutes and/or Suggested Sources:** Leave blank unless you are requesting an item that was not pre populated for you.

#7 – **Requested by Name/Position:** This would be the one person for your department to be the point of contact (the POC) for the resource request. **PLEASE PROVIDE A DIRECT PHONE NUMBER TO THE POC** or your response could be significantly delayed.

#8 – **Priority:** It is suggested to leave the urgent block for positive cases of COVID-19 or for events threatening life-safety. If you feel it necessary, you may check that box, but the routine or the low priority box may be appropriate.

#9 – **Section Chief Approval:** This box should be reserved for the official authorizing the resource request.

Logistics section: Leave blank

Finance Section: Leave blank

Chris Williams, Operations / Resource Manager is your point of contact for this event. Send your resource requests to chriswilliams@franklincountyohio.gov.

FCEOC RESOURCE REQUEST MESSAGE (ICS 213 RR PPE [see back])

| | | | | | | | |
|---|---|------|---------------------------------------|---|------------------------------|---------------------------------------|------|
| 1. Incident Name: | | | 2. Date/Time (MM/DD/YY/ 00:00) | | 3. Requesting Agency: | | |
| Requestor | 4. Order (Use additional forms when requesting different resource sources of supply.): | | | | | | |
| | Qty. | Kind | Type | Detailed Item Description: (Vital characteristics, brand, specs, experience, size, etc.) | Arrival Date and Time | | Cost |
| | | | | | Requested | Estimated | |
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| 5. Requested Delivery/Reporting Location Address: | | | | | | | |
| 6. Suitable Substitutes and/or Suggested Sources: | | | | | | | |
| 7. Requested by Name (First, Last)/Position: | | | | 8. Priority: <input type="checkbox"/> Urgent <input type="checkbox"/> Routine <input type="checkbox"/> Low Urgent | | 9. Section Chief Approval: | |
| FCEOC Logistics | 10. Logistics Order Number: | | | | | 11. Supplier Phone/Fax/Email: | |
| | 12. Name of Supplier/POC: | | | | | | |
| | 13. Notes: | | | | | | |
| | 14. Approval Signature of Auth Logistics Rep: Chris Williams | | | | | 15. Date/Time: 4/14/2020 15:07 | |
| 16. Order placed by (check box): <input type="checkbox"/> SPUL <input type="checkbox"/> PROC | | | | | | | |
| FCEOC Finance | 17. Reply/Comments from Finance: | | | | | | |
| | 18. Finance Section Signature: | | | | | 19. Date/Time: | |
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