



## Implementing Allocation Strategies

Clinical recommendations for addressing shortages of treatments and supplies (such as those featured on [ASPR TRACIE CRESTS](#))<sup>1</sup> require adaptation based on local systems and conditions to be implemented proportionally and efficiently. Tiered strategies that will be invoked in proportion to the degree of shortage can help ensure fair implementation and adjust to changing conditions.

Hospitals may not be equally impacted by shortages, or some hospitals (e.g., a trauma center or oncology center) may have patients with more urgent need for certain materials. Regional coordination entities such as health care coalitions can monitor current impacts and strategies for consistency and, if movement of supplies to maintain critical interventions is required, can act as a nexus to facilitate resource movement/balancing.

In the event of a shortage, a local health system or hospital must take steps to:

1. Promote regional coordination and information sharing about the degree of the shortage and strategies being implemented.
2. Have dedicated facility/system clinicians and staff (e.g., pharmacists, laboratorians) affected by the shortage review/monitor CRESTS and other available materials and tailor ordering and communications to local systems and practices.
3. Activate incident command or otherwise ensure there is an incident manager who will serve as the point of contact for implementing strategies, monitoring the shortage situation, and implementing changes (e.g., processes consistent with the [ASPR TRACIE template for a Hospital Crisis Standards of Care Resource Allocation Annex](#)).
4. Determine what restrictions/conservation strategies are currently needed, particularly those that can be implemented with the least impact on patient care and outcomes.
5. Determine any changes or restrictions that may need to be integrated into the electronic health record/ordering system.
6. Develop communications for clinical staff to orient them to the shortage, current adaptations, and potential future restrictions on use.
7. Monitor the shortage, including consumption and incoming orders, invoking more restrictions as necessary and relaxing restrictions as product becomes available.

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<sup>1</sup> Clinical Resources for Emergency Shortages of Treatments and Supplies (CRESTS) materials do not constitute clinical guidance of the U.S. Department of Health and Human Services Administration for Strategic Preparedness and Response or any other entity; they are offered as general best opinions of subject matter experts at the time of writing.