

To: Azita Hamedani, SDMAC Chair

From: Andrea Palm, Secretary-designee

Subject: Allocation of state procured vaccines and therapeutics – charge to the SDMAC

Background. The State Disaster Medical Advisory Committee (SDMAC) was created to advise DHS on strategies for the allocation of scarce medical resources through an open and transparent process. During the COVID-19 response, the state has distributed limited supplies of personal protective equipment and therapeutics across the state.

As we anticipate the possibility of a vaccine and/or effective treatments, DHS will need to make decisions about their distribution. These decisions must be based on ethical principles that serve as a foundation for all distribution decisions.

Charge to SDMAC. To develop distribution strategies for vaccines and therapeutics in the possession of the State:

1. Create an SDMAC Ethics Subcommittee charged with developing and proposing a statement of ethical principles for the distribution of scarce resources. The statement will be submitted to the full SDMAC and Secretary's Office for approval. The subcommittee will be dissolved at the conclusion of its work.
2. Building on the work of the Ethics Subcommittee, create an SDMAC Vaccine Distribution Subcommittee charged with developing a process for the distribution of SARS-CoV-2 vaccines across the state.
3. In parallel with the vaccine subcommittee, create an SDMAC Therapeutics Distribution Subcommittee charged with developing a process for distribution of therapeutics in possession of the state. This committee will create a general allocation process and potentially revise the current remdesivir distribution process.
4. Vaccine and therapeutic distribution strategies developed by the subcommittees will be submitted to the full SDMAC and Secretary's Office for final review, revision and sign-off.

Stakeholder engagement. Subcommittees will include a diverse membership to ensure the perspectives of key stakeholders reflected in proposed recommendations. Feedback from the public will be gathered during a two week comment period before submission of recommendations to the SDMAC.

Attachments:

Charge questions for SDMAC Ethics Subcommittee

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The goal of the subcommittee will be to define a number of generally agreed-upon principles that can guide ethical decision making that is necessary to fairly and effectively distribute scarce resources such as vaccines and therapeutics. The subcommittee will review resources promulgated by states – including the “Considerations for Allocation of Scarce Resources”, existing federal guidelines, as well as relevant literature defining ethical principles applied to allocation policies that have been proposed by other organizations, and make determinations about whether they should be adopted or modified for policy decisions made by DHS. Ethical principles suggested by the subcommittee may apply generally to distribution of different kinds of scarce resources, while recognizing that specific ethical frameworks may need to address nuanced practical concerns based on the resource. The subcommittee should ensure the recommended principles are fully protective of persons with disabilities or other historically marginalized groups.

Charge: Questions within the scope of the subcommittee include:

1. Using the “Considerations for Allocation of Scarce Resources” guidelines as a foundational document, are there foundational ethical principles not captured in this document that merit consideration for inclusion?
 1. Which principles can be applied to both vaccines and therapeutics, and which have unique considerations that must be answered specific to each?. Questions may include:
 1. Whether and when it may be appropriate to give preference in allocation decisions to regions or other geographic areas within Wisconsin that are disproportionately burdened by COVID-19 or other health inequalities?
 2. Whether and when there are circumstances when allocation considerations should give priority to individuals who work in fields that are instrumental to the COVID-19 response, such as health care workers?
2. What are the most important procedural considerations for developing strategies to allocate scarce resource, such that the processes are transparent, inclusive, and worthy of trust?