

# Medical Surplus Recovery Organization Code of Conduct

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## INTRODUCTION

Medical Surplus Recovery Organizations work (MSRO) with hospitals, manufacturers and distributors 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.

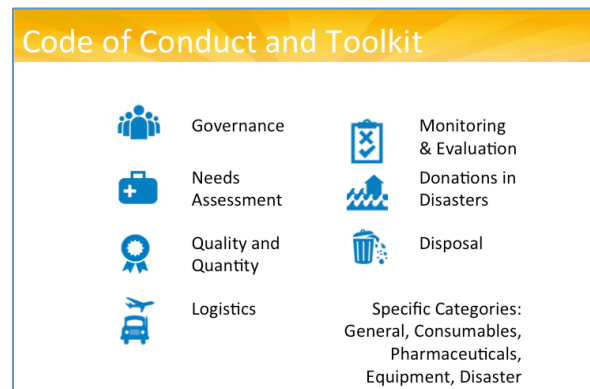
The Medical Surplus Recovery Organization Code of Conduct (Code) reflects the collective commitment of the medical surplus recovery community to adhere to quality practices and ensure organization integrity. The Code acknowledges that the MSRO Board, staff and volunteers are ultimately responsible for ensuring quality practices and organization integrity. The Code also recognizes that no two MSROs are exactly alike and as such, the policies, practices and procedures will vary. 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 Medical Surplus Recovery Organization Code of Conduct is comprised of voluntary standards that have been developed and adopted by the founding MSRO members of the MedSurplus Alliance. The Code of Conduct is separated into the seven sections listed in graphic below.

Because MSROs work with a wide variety of medical products, the Code of Conduct sections have been subdivided by product type: General (applies to all), Consumables, Medical Equipment and Pharmaceuticals.

**MSRO Toolkit** – A free toolkit is available online to provide supporting guidance, best practice examples and links to resources designed to help organizations evaluate and improve medical donation programs.

**Code of Conduct Revisions** – The Code was developed by a collaboration of cross-sector stakeholders and using a process that ensures alignment with WHO Guidelines and existing standards, including InterAction, Accord Network, Sphere and PQMD.



The first version of the Code represents a significant first step in preventing poor quality donations. The developers recognize that it needs to be expanded and revised to ensure that the content is comprehensive and relevant. The Code will be maintained through a process recognized by the American National Standards Institute (ANSI)<sup>1</sup>. The hallmarks of this process include:

- Consensus must be reached by representatives from materially affected and interested parties
- Standards are required to undergo public reviews when any member of the public may submit comments
- Comments from the consensus body and public review commenters must be responded to in good faith
- An appeals process is required

For more information please contact us at [medsurplusalliance@visionlink.org](mailto:medsurplusalliance@visionlink.org).

<sup>1</sup> American National Standards Institute, Introduction to ANSI, [http://www.ansi.org/about\\_ansi/introduction/introduction.aspx?menuid=1](http://www.ansi.org/about_ansi/introduction/introduction.aspx?menuid=1)

# CODE OF CONDUCT

## 1 – QUALITY GOVERNANCE

### 1.1 – Similar Values

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.

### 1.2 – Anti-Discrimination

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.

### 1.3 – Governed by Independent Board of Directors

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

### 1.4 – Financial Accountability and Appropriate Use of Funds

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.

### 1.5 – Core Principles of Good Donation Practice

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 discouraged.
- 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.

4. – 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.

## **2 – NEEDS ASSESSMENT**

### **2.1 – General**

#### 2.1.1 – Gap Analysis

The Organization agrees to a cooperative and systematic process for determining and addressing needs, or "gaps" between current conditions and desired conditions or "wants".

#### 2.1.2 – Donation Appropriateness

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

### 2.2 – Consumables

#### 2.2.1 – Consumables Needs Assessment

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.

### **2.3 – Medical Equipment**

#### 2.3.1 - Recipient Capacity to Support 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.

#### 2.3.2 – Medical Equipment Responsible Use Guide

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.

#### *Needs Assessment*

### **2.4 – Pharmaceuticals**

#### **2.4.1 – Donated Medicine is Needed, Relevant, and Approved for Target Population**

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.

#### **2.4.2 – Pharmaceutical Needs Assessment**

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.

## **3 – QUALITY & 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.

### **3.1 – General**

#### **3.1.1 – Donation Meets Quality Standards**

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.

## *Quality & Quantity*

### 3.1.2 – Maintain Quality in Donation Process

It is important to maintain the quality of the product throughout the donation process.

### 3.1.3 – Appropriate Packaging to Ensure Quality

Product should be packaged and shipped in a manner that safeguards its quality and integrity during transportation.

### 3.1.4 – Appropriate Quantity Based on Need

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

## **3.2 – Consumables**

### 3.2.1 – Proper Human Resources for Consumable Ordering

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.

### 3.2.2 – Good Sorting Practices

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.

## **3.3 – Medical Equipment**

### 3.3.1 – Ensure Equipment is Operational and has Necessary Supplies and Accessories

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.

### 3.3.2 – Equipment Meets Manufacturer’s Safety Standards

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

## *Quantity & Quality*

### 3.3.3 – Proper Human Resources for Equipment Operation and Maintenance

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.

## **3.4 – Pharmaceuticals**

### 3.4.1 – Appropriate Product Detail Included in All Packaging and Documentation

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.

### 3.4.2 – Properly Qualified Human Resources for Pharmaceutical Donation Facilitation

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

### 3.4.3 – Proper Handling Procedure for Expired 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.

## **4 – LOGISTICS**

### **4.1 – General**

#### 4.1.1 – 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.

##### 4.1.1.1 – Packaging in a Language Understood by Recipient Organization

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.



## *Logistics*

### 4.1.1.2 – Protective Packaging

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

### 4.1.2 – Storage

#### 4.1.2.1 – Adequate Storage at Recipient Facility

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.

### 4.1.3 – Transportation

#### 4.1.3.1 – Transportation Considerations

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.

### 4.1.4 – Staging and Loading

#### 4.1.4.1 – Volume Determines Transportation Method

Volume – The capacity of the receiving group should be determined 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).

#### 4.1.4.2 – Proper Loading Procedures

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

### 4.1.5 – Customs Clearance

## *Logistics*

### 4.1.5.1 – General Customs Clearance Procedures

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.

### 4.1.6 – Security

#### 4.1.6.1 – Shipment 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.

## **4.2 – Consumables**

### 4.2.1 – Packaging

4.2.1.1 – Consumables Expiry Date on Packaging - Expiry date should be clearly labeled on all packaging.

4.2.1.2 – Maintaining Consumable Integrity - Consumables are packed in boxes that protect the integrity of the product and are suitable for transportation.

4.2.1.3 – Consumables Properly Packaged - Packaging should be sealed securely to prevent opening in transit and tampering.

### 4.2.2 – Storage

#### 4.2.2.1 – Adequate Consumable Storage Capacity at Recipient Site

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

### 4.2.3 – Transportation

#### 4.2.3.1 – Consumable Transportation Logistics

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.

## *Logistics*

### 4.2.4 – Staging and Loading

#### 4.2.4.1 – Staging and Loading of Consumables

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 off-loading, be appropriately wrapped, and include pallet packing lists, when necessary for effective redistribution.

### 4.2.5 – Customs Clearance

#### 4.2.5.1 – Consumables 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.

## **4.3 – Medical Equipment**

### 4.3.1 – Packaging 4.3.1.1 – Proper Medical Equipment Packaging Procedures

When packaging equipment MSROs will ensure that:

- Is created 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.

## *Logistics*

### **4.4 – Pharmaceuticals**

#### 4.4.1 – Packaging

##### 4.4.1.1 – Proper Pharmaceutical 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.

#### 4.4.2 – Transportation

##### 4.4.2.1 – Proper Transportation of Pharmaceuticals

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 for maintenance of cold chain.

## **5 – MONITORING & EVALUATION**

### **5.1 – General**

#### 5.1.1 - Monitoring Throughout Donation Process

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.

#### 5.1.2 - Overall Program Evaluation

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.

## 6 – DONATIONS IN EMERGENCY SITUATIONS

### 6.1 – General

#### 6.1.1 - Appropriate Donation Practices 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?

#### 6.1.2 - Quality Standards in Disaster Donations

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

### 6.2 Consumables

#### 6.2.1 - Verification of Need

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-emergency shipments and be sent by the most expeditious means available.

### 6.3 – Medical Equipment

#### 6.3.1 - Proper Medical Equipment Donation During a Disaster

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.

### 6.4 – Pharmaceuticals

#### 6.4.1 - Pharmaceutical Logistics in Emergency Situations

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

## 7 – DISPOSAL

### 7.1 – General

#### 7.1.1 - Appropriate Donation Disposal

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

## ACRONYMS & DEFINITIONS

### Acronyms

**CDC** - Centers for Disease Control and Prevention (US Dept. of Health and Human Services)

**CSR** - Corporate Social Responsibility

**FDA** - Food and Drug Administration

**GAAP** - Generally Accepted Accounting Principles

**GIK** – Gift In Kind

**HTA** - Health Technology Assessment

**HRH** - Human Resources for Health

**HRIS** - Human Resources Information Systems

**MOH** - Ministry of Health

**SOP** - Standard Operating Procedure

**UN** - United Nations

**USAID** - United States Agency for International Development

**WHO** - World Health Organization

### Definitions

**Cold Chain** - “Cold chain” refers to the process used to maintain optimal conditions during the transport, storage, and handling of medical products that require constant refrigeration.

**Gap Analysis** - review of characteristic factors (such as capacity, competencies, need) of the present situation or a recipient request.

**Human Resources** (as it relates to the **MSRO Code of Conduct**) - any professional, para-professional, and volunteer that who are involved with the medical product donation process; usually referring to recipient capacity and needs.

**Ministry of Health (MOH)** - A government agency or department that is responsible for healthcare system oversight. Most countries have a MOH or similar agency.

**Needs Assessment** - A systematic process to acquire an accurate, thorough picture of a system's strengths and weaknesses, in order to improve it and meet existing and future challenges.

**Standard Operating Procedure (SOP)** - Established procedure to be followed in carrying out a given operation or in a given situation.

**Values Statement** - Value statements define how people will behave with each other in the organization, their donors, and recipients.