

Lack of planning and coordination by the Trump administration created chaos at the state and local levels as agencies sought to fulfill desperately-needed requests for personal protective equipment, ventilators, masks, and other supplies. The Trump administration added to the confusion by continuously changing its tune — often placing itself at odds with governors — and shifting responsibilities to the states in an attempt to absolve itself of any responsibility for the damage it caused. The result was a failed response to COVID-19 that continues to endanger ordinary people in desperate need of relief and support.

In response to the Trump administration's mishandling of the coronavirus pandemic, Accountable.US launched a [nationwide public records investigation](#) to obtain communications and seek information from officials in all 50 states as well as Washington, D.C., American Samoa, and Guam on how the Trump administration's incompetence hindered states' ability to adequately respond to COVID-19 while also encouraging many states to reopen prematurely against overwhelming expert advice.

On April 12, 2020, Accountable.US filed public records requests in Idaho for records related to the state's response to the pandemic, including coordination with the federal government. The records Accountable.US received in return are troubling. Here are our top findings:

- Top Idaho officials were given just 24 hours to review Governor Little's reopening plan. After the head of the state's emergency management department said Idaho wasn't yet in the position to meet criteria set out for testing, PPE distribution, and scaling up medical surge capacity, Gov. Little then released the plan the next day anyway, keeping much of the language with which the emergency management head took umbrage.
- Idaho lost out on 2.5 million N95 masks after South Africa (allegedly) refused to let a shipment bound for the state out of the country after Trump [said](#) that the U.S. would stop sending PPE to its allies abroad. The state was working with a non-governmental contact to obtain the masks, who first told the state the shipment got held up by the FDA, and then said South Africa would not let the supplies out of the country. This shows that Trump's belligerent conduct is negatively impacting our global relationships, and will likely continue to do so to the detriment of public health and safety in the U.S..
- Idaho proposed continuing with plans to cut provider Medicaid reimbursements, which historically disproportionately affects hospitals that serve lower-income and rural populations. Emails show that the vice president of an Idaho hospital asked if the state could postpone the cuts until after the crisis.

The results of the federal government's lack of planning are bleak: states don't have the supplies that they need, the rate of testing is far below where it should be, and first responders still don't have the proper equipment to combat the virus. Unable to depend on the government for help, governors were forced to take matters into their own hands by creating regional coalitions to find solutions and coordinate efforts. Still, the Trump administration continues to peddle the idea of loosening stay-at-home orders and fast-tracking plans to reopen the country.

# Emails Reveal Idaho's Incompetence During COVID-19 Pandemic And "Re-Opening"

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## Cuts to Medicaid Reimbursement

*On March 18, 2020, in an email to the Idaho Hospital Association President and the State's Department of Health and Welfare, St. Luke's Health System Vice President Christine Neuhoff suggested that the state halt Idaho's plans to cut Medicaid reimbursements to hospitals, as the cuts would further endanger hospitals' abilities to provide services during a public health crisis.*

*In response to Neuhoff's suggestions, Idaho's Deputy Administrator of Medicaid wrote that he did not see how the state could proceed with the cuts "without violating Idaho Code." There is no public indication of whether Idaho proceeded with its plan to reduce Medicaid reimbursements, but the emails provide insight into behind the scenes machinations around the plan.*

### March 18, 2020: St. Luke's Health System Vice President, Christine Neuhoff Wrote An Email To Idaho Hospital Association President, Brian Whitlock Who Forwarded It To The Idaho Department of Health & Welfare...

From: Christine Neuhoff <neuhoffc@slhs.org>  
 Sent: Wednesday, March 18, 2020 1:51 PM  
 To: Brian Whitlock <BWhitlock@teamiha.org>  
 Cc: Chris Roth <crothc@slhs.org>  
 Subject: state rules

*Warning: This email originated externally. DO NOT CLICK links or open attachments unless you recognize the sender, have validated the sender's email address and know the content is safe.*

Brian,  
 As Chris mentioned a moment ago on the call with the Governor, we have some suggestions for ways the Governor and or the Director could help hospitals as we respond to this pandemic emergency. Specifically, I have identified some areas for which the temporary suspension of state rules/laws would help us as we face this pandemic. These are the items I have identified so far:

### ... Neuhoff's Email Explicitly Stated That The State's Plan To Reduce Medicaid Reimbursement "May Endanger The Ability Of Hospitals To Continue To Provide The Types Of Services That Are Under-Reimbursed" And Relied Upon In A "Community-Wide Emergency"

- ISSUE: Hospitals will need to dramatically reduce, if not eliminate, elective procedures in the interest of reducing the likelihood individuals will be exposed to someone with the coronavirus. Even if the hospitals did not cancel appointments and procedures, many patients are canceling pursuant to advice from the CDC. Hospitals will face a dramatic reduction in private pay services that they depend on to remain financially viable. The state's plan to reduce Medicaid reimbursement may endanger the ability of hospitals to continue to provide the types of services that are under-reimbursed (revenue less than expenses) and upon which we all rely in the event of a personal or community-wide emergency. PROPOSED SOLUTION: Suspend the reduction in Medicaid reimbursement until

### ... And Neuhoff Recommended The State Suspend The Reduction In Medicaid Reimbursement "Until After This Crisis Subsides."

- ISSUE: Hospitals will need to dramatically reduce, if not eliminate, elective procedures in the interest of reducing the likelihood individuals will be exposed to someone with the coronavirus. Even if the hospitals did not cancel appointments and procedures, many patients are canceling pursuant to advice from the CDC. Hospitals will face a dramatic reduction in private pay services that they depend on to remain financially viable. The state's plan to reduce Medicaid reimbursement may endanger the ability of hospitals to continue to provide the types of services that are under-reimbursed (revenue less than expenses) and upon which we all rely in the event of a personal or community-wide emergency. **PROPOSED SOLUTION: Suspend the reduction in Medicaid reimbursement until after this crisis subsides.** Matt – I was wondering when this one would come up. I don't know if this gets addressed through some of the emerging federal relief packages, but something we need to talk through with Sara.

*\*the red text is Idaho Department of Health & Welfare Director Dave Jeppesen's Response to Neuhoff's suggestions.*

## Idaho's Deputy Administrator Of Medicaid, Matt Wimmer (Bold Text) Responded To Neuhoff's Suggestion To Suspend Medicaid Reimbursement Reductions, Writing "I Don't See How We Do It Without Violating Idaho Code."

- ISSUE: Hospitals will need to dramatically reduce, if not eliminate, elective procedures in the interest of reducing the likelihood individuals will be exposed to someone with the coronavirus. Even if the hospitals did not cancel appointments and procedures, many patients are canceling pursuant to advice from the CDC. Hospitals will face a dramatic reduction in private pay services that they depend on to remain financially viable. The state's plan to reduce Medicaid reimbursement may endanger the ability of hospitals to continue to provide the types of services that are under-reimbursed (revenue less than expenses) and upon which we all rely in the event of a personal or community-wide emergency. **PROPOSED SOLUTION: Suspend the reduction in Medicaid reimbursement until after this crisis subsides.** Matt – I was wondering when this one would come up. I don't know if this gets addressed through some of the emerging federal relief packages, but something we need to talk through with Sara.

This one is tough – the NF's are also hinting around about the same and their may be some considerations there relating to the recently passed bill for C19. **I don't see how we do it without violating Idaho Code. I think we may be looking at choices between doing what we need to do to keep everyone as safe as possible or being in conflict with IC.**

I hope this list is useful to you. Please let me know if there is anything further you may need. I would be happy to discuss any of these items in more detail.

Christy



**Christine Neuhoff, JD, MBA**  
Vice President and Chief Legal Officer  
St. Luke's Health System  
☎ 208-381-3595  
✉ [neuhoffc@slhs.org](mailto:neuhoffc@slhs.org)

## Sourcing PPE From South Africa

*In April 2020, according to emails, Idaho lost out on at least 2.5 million N95 masks after the state retained a non-governmental contractor to obtain PPE from South Africa. The Contractor, Josh Tolman was unable to deliver the masks, after multiple evolving excuses. Tolman's final reasoning for the neglected shipment was that South Africa refused to let a shipment bound for the state out of the country—Apparently a direct reaction to Trump's [statement](#) that the US would stop sending PPE to its allies abroad. There were no payments to a vendor named Josh/Joshua Tolman in the Idaho transparency portal, which is current as of April 18, 2020.*

**April 6, 2020: A Non-Governmental Contractor Named Joshua Tolman Was Set To Deliver 2.5 Million N95 Masks To The State Of Idaho And Claimed They Had "Landed In America" But "The FDA Has Put A Stop On Clearing Any Medical Supplies Into The Country"...**

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**From:** Biasco, Lon <Lon.Biasco@fema.dhs.gov>  
**Sent:** Tuesday, April 07, 2020 11:47 AM  
**To:** joshuabtolman@icloud.com  
**Cc:** Richy Brad; Raines, Toney; Smart, John (OGA); FEMA-R10-COVID-19-OSC; O'Hare, Michael; Maykovich, Vincent  
**Subject:** Idaho N95 masks in stuck in South Africa not FDA impoundment

Good morning Joshua,

Thanks for the conversation. To recap, the 2.5M N95 masks are coming out of South Africa. Yesterday South Africa delayed the shipment of outgoing PPE and you had to unload the plane. Today that shipment is being reloaded for movement to U.S. via London to either N.Y. or Cincinnati through DHL. The shipment is expected to arrive Friday or Saturday at one of those locations. At that time, you anticipate that FDA backlog will slow down the critical PPE from reaching Idaho.

I have asked you to identify the airport and provide the tracking number and information so that we can attempt to expedite the FDA inspection. You have agreed to provide that information ASAP.

Please notify all those in the cc line once you have this information so we can work the process. Thank you

**Joshua Tolman <joshuabtolman@icloud.com> 208-709-1328**

**Sent:** Monday, April 6, 2020 11:44 AM  
**To:** Arnold Danny <darnold@imd.idaho.gov>  
**Subject:** Re: State of Idaho / Office of Emergency Management

Sorry for the delay. So they have landed in America. I have been on the phone all morning with my clearing agent. **The FDA has put a stop on clearing any medical supplies into the country. The fda is changing their process and until it is finalized nothing will get into the country. I don't know what this delay means at this point.** I will update you as soon as I have a clearer picture of what is going on.

Thanks Daniel.  
Josh

**... But Days After Tolman's April 6<sup>th</sup> Email, The Purchasing Agent From Idaho Emailed Again Stating "If You Fail To Provide Proof Within 24 Hours From The Time Of This Email, The State Of Idaho Will Be Cancelling The Purchase Order (DS200014) For The Masks And Will Not Be Obligated There-After."**

Mr. Tolman,

There have been repeated attempts to contact you regarding the order of N95 masks in which no reply has been received. Under Idaho Code Section 67-9203 and/or IDAPA 38.05.01.011, I am hereby allowing you 24 hours to respond with proof that you are in possession of or that the masks are on their way.

If you fail to provide proof within 24 hours from the time of this email, the State of Idaho will be cancelling the Purchase order (DS200014) for the masks and will not be obligated there-after.

TSgt. Arnold, Daniel L  
State of Idaho Military Div.  
Purchasing Agent  
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**April 13, 2020: Tolman Finally Replied, Telling The Idaho Purchasing Agent That South Africa Refused To Let The Shipment Bound For The State Out Of The Country Following Trump's Comments That The US Would Stop Sending PPE To Its Allies Abroad.**

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**From:** Joshua Tolman  
**Sent:** Monday, April 13, 2020 5:15 PM  
**To:** Arnold Danny  
**Cc:** IOEM - Wallen, Karen ; Hill Jeff ; Jeppesen, Dave  
**Subject:** Re: State of Idaho Military Division Office of Emergency Management [External Email]

Hi Danny-

I have been in contact with the department of health and welfare on this issue. Dave Jeppesen is fully aware of the situation. I'm sorry the information didn't filter down to you. I assumed it would be. I really apologize. The product in South Africa was not allowed out of the country. In a reaction to President Trump's statement that America would not allow PPE to be shipped from America, the South African government responded in kind. Our masks were a casualty of this policy. I am sorry that this happened and wish it would have ended differently. Again, I apologize for not keeping you in the loop. I did communicate with Brad and Dave last week. I should have with you as well.

All the best,  
Josh

Sent from my iPhone

**From:** Jeppesen, Dave <Dave.Jeppesen@dhw.idaho.gov>  
**Sent:** Monday, April 13, 2020 7:26 PM  
**To:** Joshua Tolman; Arnold Danny; Richy Brad  
**Cc:** Wallen Karen; Hill Jeff  
**Subject:** RE: State of Idaho Military Division Office of Emergency Management [External Email]

Josh,

Thanks so much for your help to secure these masks. It was unfortunate that our order got caught up in the situation that you described below. Thanks for the text update to Director Richy and I on Friday last week. We know that you did your best and we as disappointed as you were that the situation evolved in such a way that they could not be delivered from South Africa.

Please let us know if you come across any other sourcing opportunities.

dave

Dave Jeppesen  
Director  
Idaho Department of Health & Welfare

## **Governor Brad Little's Reopening Plan Ignored Advice From Emergency Management Official**

*According to emails and a draft plan, Governor Brad Little issued a reopening plan after ignoring advice from the state's top emergency management official while facing intense pressure to reopen the state.*

**The Idaho Division of Public Health Gave Key Officials 24 Hours To Review Gov.  
Brad Little's Proposed Reopening Plan In Order To Accommodate A Planned  
Press Conference**



**From:** Shaw-Tulloch, Elke D.  
**Sent:** Tuesday, April 21, 2020 12:37 PM

**Subject:** Opening Stages Document for Your Rapid Review by NOON 4/22  
**Importance:** High

Hello Governor Working Group members and Health District Department Directors. Please see attached, a final **draft** of the Idaho version of the opening up document. Please do not distribute.

1

Per the Governor's office, we are asking for your expedient review by tomorrow at noon in order to incorporate changes and address issues prior to Thursday's press conference. Please note, that in the first table in the document, we are hoping to have better defined criteria. It will not be significantly different than what you see, but will be more specific.

[Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

**Brad Richy, The Director Of Idaho's Office Of Emergency Management Raised Several Concerns About The Plan, Including The State's Ability To Obtain "Sufficient" Supplies Of PPE And "Quickly" Supply Those In Need Of PPE And To Develop A "Comprehensive" Plan For Testing**

**Brad Richy Raised A Multitude Of Concerns With Governor Little's Office, The Idaho Division Of Public Health, The Idaho Health and Welfare, And Others About Idaho's Inability To Meet The Reopening Criteria Proposed By Governor Little**

**From:** Richy Brad  
**Sent:** Wednesday, April 22, 2020 12:10 PM  
**To:** Elke Shaw-tulloch; David C. Pate, M.D., J.D.; Bridges, Carolyn - CO 4th; Carolyn Bridges; Sherri Ybarra; Brian Whitlock; Carol Moehrl; bpmooney09 (bpmooney09@gmail.com)  
**Cc:** Zach Hauge; Sara.Stover@gov.idaho.gov; Jeppesen, Dave; Louis Hougaard; Hahn, Christine; Petroff, Kelly - CO 10th; Emily.Callihan@gov.idaho.gov; Dieuwke Spencer; Wayne Denny  
**Subject:** RE: Opening Stages Document for Your Rapid Review by NOON 4/22  
**Attachments:** Guidelines for Opening Up for Idaho DRAFT FINALCBB Brad added.docx

Hi Elke, I added my comments to the document that Lora and Carolyn commented on.

I appreciate all your hard work and the efforts you and your team have put into this document. First and foremost, I understand the expedient need to review, as well as pressure to begin the opening process across the state.

I'm a bit challenged to understand the use of the term "sufficient", as it relates to testing, PPE, and surge capacity staffing. Having worked the PPE issues, I don't know how soon I would feel comfortable with determining that Idaho has sufficient PPE levels to meet this criteria, and the continued need to request that FEMA to fill urgent needs. The ability to "quickly" supply PPE to those in need has not yet been achieved. While we believe healthcare providers have not gone without, we continue to hear concerns about the short supply on hand and the need to reuse items multiple times in order to preserve inventory as long as possible. The production of PPE, medications and equipment is out of Idaho's hands, we can only hope to get our fair share when the resources are needed.

Testing also remains a concern. While Idaho may be a position to confirm its increasing ability to test "symptomatic healthcare workers rapidly", we are still struggling to develop a comprehensive plan to test the greater population.

Additionally, the "ability to surge intensive care unit capacity" concerns me. To what level of surge are we to accommodate? Given the levels of surge, I believe Idaho is positioned to meet a surge Community Level 3. However, whether Idaho could handle an external surge today is in question, particularly as it relates to the ability to staff such a need.

My question, would it be possible to be less specific on the steps needed to move into level one? I would recommend we eliminate (red colored text and yellow highlights), or be less specific.

v/r

Brad

[Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

**The Next Day, Gov. Little Released The Plan That Appears To Ignore Many Of The Concerns That Brad Richy, Director of Idaho Office of Emergency Management, Raised Directly To The Governor's Office The Day Before**

**Brad Richy Wrote That He Needed More Clarity On Using The Term "Sufficient" And Didn't Feel Like Idaho Has "Sufficient PPE Levels" To Meet Governor Little's Proposed Criteria Including "Quickly" Supplying PPE...Yet The Next Day Gov. Little Released Reopening Guidelines Using That Exact Language**

Brad Richy Wrote That He Needed More Clarity On Using "Sufficient" And Didn't Feel Like Idaho Has "Sufficient PPE Levels" To Meet Governor Little's Proposed Criteria "I'm a bit challenged to understand the use of the term "sufficient", as it relates to testing, PPE, and surge capacity staffing. Having worked the PPE issues, I don't know how soon I would feel comfortable with determining that Idaho has sufficient PPE levels to meet this criteria, and the continued need to request that FEMA to fill urgent needs." [Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

**Brad Richy Wrote That The "The Ability To "Quickly" Supply PPE To Those In Need Has Not Yet Been Achieved""** "The ability to 'quickly' supply PPE to those in need has not yet been achieved. While we believe healthcare providers have not gone without, we continue to hear concerns about the short supply on hand and the need to reuse items multiple times in order to preserve inventory as long as possible. The production of PPE, medications and equipment is out of Idaho's hands, we can only hope to get our fair share when the resources are needed." [Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

**Governor Little's Reopening Plan Released The Next Day Said One Of The Needed Capabilities Is "Ability To Quickly Supply Sufficient PPE, Medications, And Critical Medical Equipment To Handle Dramatic Surge If Needed"**



## STRATEGIES, RESPONSIBILITIES, AND CAPABILITIES NEEDED

The State of Idaho must remain focused on achieving the following core preparedness responsibilities.

### TESTING AND CONTACT TRACING:

- Ability to quickly set up safe and efficient screening and testing sites for symptomatic individuals, including those with mild symptoms
- Contact tracing in place for all COVID-19 positive results
- Screening and testing locations in all regions of the state in place that serve older individuals, rural and lower income populations, and racial and ethnic minorities, such as Native Americans and Hispanics

### PLANS AND STRATEGIES:

- State and local preparedness plans are in place including surge plans
- Crisis Standards of Care Plan established
- Long-Term Care Task Force operational to support long-term care facilities
- Testing strategy developed
- Contact tracing strategy developed

### HEALTHCARE SYSTEM CAPACITY:

- Ability to quickly supply sufficient PPE, medications, and critical medical equipment to handle dramatic surge if needed
- Ability to quickly test symptomatic healthcare workers
- Ability to surge intensive care unit capacity

[Guidelines For Reopening Idaho, 4/23/20]



**Just One Day Earlier, Brad Richy Wrote That Idaho *Might* Be Able To Confirm That It Could Test “Symptomatic Healthcare Workers Rapidly” Even As It Struggled To Develop A Comprehensive Testing Plan...Yet The Next Day Gov. Little Released Reopening Guidelines That Kept The Exact Language That Richy Questioned**

**Brad Richy Wrote That “We Are Still Struggling To Develop A Comprehensive Plan To Test The Whole Population”** “Testing also remains a concern. While Idaho may be a position to confirm its increasing ability to test ‘symptomatic healthcare workers rapidly’, we are still struggling to develop a comprehensive plan to test the greater population.” [Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

**Gov. Brad Little’s Reopening Plan Included As A Capability Needed “Ability To Quickly Test Symptomatic Healthcare Workers”**



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[\[Guidelines For Reopening Idaho, 4/23/20\]](#)

**Brad Richy Also Raised Concern About Idaho’s Ability To ‘Surge Intensive Care Unit Capacity’ And Asked To Understand Exactly What That Meant...Yes Gov. Brad Little’s Reopening Plan Included The Exact Language That Richy Questioned The Day Before**

**Brad Richy Wrote That The Ability To ‘Surge Intensive Care Unit Capacity’ Concerned Him** “Additionally, the ‘ability to surge intensive care unit capacity’ concerns me. To what level of surge are we to accommodate? Given the levels of surge, I believe Idaho is positioned to meet a surge Community Level 3. However, whether Idaho could handle an external surge today is in question, particularly as it relates to the ability to staff such a need.” [Idaho Department Of Health And Welfare, 4/22/20, Obtained Via Accountable.US Public Records Request]

Gov. Brad Little's Reopening Plan Released The Day After Brad Richey Raised His Concerns Included As A Needed Capability "Ability To Surge Intensive Care Unit Capacity"



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- **Ability to surge intensive care unit capacity**

[\[Guidelines For Reopening Idaho, 4/23/20\]](#)

## Although Gov. Brad Little Issued A Stay At Home Order, He Faced Intense Opposition Within His Own State Party To Reopen The State

**Little Typically Listens To Health Experts Around COVID-19, Which "Doesn't Sit Well With Some Of His Fellow Republicans"** "Little typically listens to health experts when it comes to making decisions involving how the state should react to the coronavirus. That doesn't sit well with some of his fellow Republicans, despite Little's success in slowing infections. Idaho's first recorded infection came on March 13 in Blaine County, which includes Sun Valley Resort and its ski area that draws national and international visitors, and is thought to be a likely vector for the virus' entry into Idaho. Just three weeks later, on April 4, Idaho had 1,000 infections." [\[Associated Press, 4/22/20\]](#)

**Some In The State Questioned Gov. Little's Decision To Keep A Stay At Home Order As Cases Slowed** "Meanwhile, protests have increased, as have criticisms from other Republicans in what is one of the nation's reddest states. 'There is a Libertarian ideology that is going to be more hesitant, or question more, the necessity of a statewide stay-at-home order,' Kettler said. 'And once the caseload (of virus infections) is slowing, that's where you can see that shifting of mindset even more.' That has been manifested in everything from ignoring park closures to holding prohibited yard sales to protests outside the closed Statehouse in Boise." [\[Associated Press, 4/22/20\]](#)

**Fellow Elected Officials, Including The Lt. Governor Pushed Against Gov. Little's Stay At Home Orders And One Called Him "Little Hitler."** "In northern Idaho, Republican state Rep. Heather Scott last week referred to the governor as 'Little Hitler' and compared the stay-at-home orders to Nazi Germany during the Holocaust. Republican Lt. Gov. Janice McGeachin, a small business owner in eastern Idaho, in an April 17 letter told Little she couldn't support the isolation order going past April 30, which she said would be catastrophic for the economy. 'I also fear the potential of a constitutional showdown between some of the people of Idaho and your Administration,' she wrote. And early on, Republican House Speaker Scott Bedke in an April 12 letter to Little voiced concerns about the governor's use of emergency powers and their potential curtailment by the Legislature." [\[Associated Press, 4/22/20\]](#)

**Governor Little's Re-Opening Plan Vs Idaho Emergency Management Director Brad Richy's Initial Comments On The Plan**

Governor Little's Announced Re-Opening Plan	Idaho Emergency Management Director Brad Richy's Comments On The Plan 24 Hours Before It Was Released
<p><b>HEALTHCARE SYSTEM CAPACITY</b></p> <ul style="list-style-type: none"> <li>Ability to quickly supply sufficient and critical medical equipment to surge if needed</li> <li>Ability to quickly test symptomatic workers</li> <li>Ability to surge intensive care units</li> </ul> <p><b>HEALTHCARE SYSTEM CAPACITY</b></p> <ul style="list-style-type: none"> <li>Ability to quickly supply sufficient and critical medical equipment to surge if needed</li> <li>Ability to quickly test symptomatic workers</li> <li>Ability to surge intensive care units</li> </ul>	<p>I'm a bit challenged to understand the use of the term "sufficient", as it relates to staffing. Having worked the PPE issues, I don't know how soon I would feel comfortable sufficient PPE levels to meet this criteria, and the continued need to request that to "quickly" supply PPE to those in need has not yet been achieved. While we have gone without, we continue to hear concerns about the short supply on hand and in order to preserve inventory as long as possible. The production of PPE, medical hands, we can only hope to get our fair share when the resources are needed.</p> <p>I'm a bit challenged to understand the use of the term "sufficient", as it relates to staffing. Having worked the PPE issues, I don't know how soon I would feel comfortable sufficient PPE levels to meet this criteria, and the continued need to request that to "quickly" supply PPE to those in need has not yet been achieved. While we have gone without, we continue to hear concerns about the short supply on hand and in order to preserve inventory as long as possible. The production of PPE, medical hands, we can only hope to get our fair share when the resources are needed.</p>
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