Wake County COVID Vaccine Distribution Prioritization Framework for Health Care Workers in Phase 1a:

*Phase 1a is subject to modification in accordance with State or Federal guidance and availability of vaccine. More information on Wake County Phase 1b prioritization framework (and beyond) will be released later.

Overview and Inclusion Criteria:

Wake County will use recommendations of the Advisory Committee on Immunization Practices (“ACIP”) and the North Carolina Department of Health and Human Services to develop a prioritization framework for COVID-19 vaccine distribution by Wake County.

The goal of Phase 1a is to stabilize healthcare delivery by vaccinating health care workers at highest risk of exposure to patients with COVID-19, those working on the vaccination rollout, and protect those at highest risk for mortality should they be infected with COVID-19 within Long-Term Care settings.

Health care workers at high risk for exposure to COVID-19 are defined as those:

- Caring for patients diagnosed with COVID-19
- Working directly in areas where patients diagnosed with COVID-19 are cared for, including staff responsible for cleaning, providing food service, and maintenance in those areas
- Performing procedures on patients diagnosed with COVID-19 that put them at risk, such as intubation, bronchoscopy, suctioning, invasive dental procedures, invasive specimen collection, and CPR
- Handling people for who have died from COVID-19
- Outpatient providers who have an increased risk of exposure beyond that of a typical general outpatient setting should be included in the Phase 1a. This could include outpatient providers who are focused on COVID-19 patient evaluation, respiratory care (e.g., respiratory diagnostic testing centers), members of a dedicated respiratory care team, or those frequently involved in COVID-19 testing sites. Outpatient dentists or dental hygienists are included in Phase 1a if they meet the above criteria for outpatient providers.
- In addition, health care workers administering vaccine in initial mass vaccination clinics are part of this first phase.

Due to extremely limited vaccine supply, Wake County will initially take the lead in vaccinating the following groups:

- EMTs/Paramedics
• Public Health staff included in Phase 1a (vital to COVID vaccine response)
• Long-term care facility staff and residents at facilities not enrolled in the Pharmacy Partnership for Long-Term Care or covered by another hospital or health system
• Other high-risk community health care workers who meet the criteria for Phase 1a

Health care personnel (HCP) are defined as paid and unpaid persons serving in health care settings who have the potential for direct or indirect exposure to patients or infectious materials (ACIP, 12/2/2020).

Based on limited vaccine availability, further sub-prioritization for activation may be necessary to ensure those HCPs at highest priority receive the vaccine first. The sub-prioritization process applies these three guiding principles:

1. Risk of exposure—HCPs with the highest risk of exposure to COVID-19 due to their job duties will be among those prioritized first.
2. Ensure healthcare capacity—HCPs who are vital to prevent interruptions in service delivery that would adversely impact the health of the community.
3. Mitigate health inequities—HCPs include a broad range of occupations, including those who are members of historically marginalized populations (HMPs).

The following inclusion criteria further describe eligibility for Phase 1a based on HCP category.

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<th>HCP Category</th>
<th>HCP Inclusion Criteria</th>
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| Hospital workers at highest risk for exposure due to caring for COVID positive patients or potentially having contact with infectious secretions | • Clinical staff providing services to COVID positive patients in hospital setting  
• Support staff (including cleaning/environmental health staff) working in these clinical areas with potential for exposure |
| State-Certified EMTs/Paramedics who currently perform direct patient care duties (i.e. daily job duty involves emergency response to medical incidents) | • EMTs/Paramedics who have increased risk of exposure due to direct patient contact with potentially COVID positive individuals. |
| Healthcare and Public Health staff working at COVID-19 vaccination sites for high-risk healthcare workers | • Clinical staff with direct patient contact administering vaccines or involved in post-vaccination response  
• Support staff working in these sites in specific roles with potential for exposure |
<p>| Long-term care facility staff and residents at facilities not enrolled in the Pharmacy Partnership for Long-Term Care | • Long-term care facility staff (and residents) at facilities not enrolled in the Pharmacy Partnership for Long-Term Care or not be vaccinated by another organization. |
| Healthcare workers in outpatient settings with risk of exposure beyond a typical outpatient setting | • Clinical staff at high risk of exposure beyond that of a typical general outpatient setting. This would include outpatient providers who... |</p>
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<th>Group</th>
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| Individuals handling decedents with COVID      | - Medical examiners  
- Morticians and support staff with direct exposure to potentially infectious materials |
| Home health workers providing direct clinical care for COVID-19 positive individuals | - Home health workers who provide clinical care with direct patient contact in homes for individuals who are known or potentially COVID positive or high-risk clients (e.g. ventilator, tracheostomy, etc.) |