Planning for Distribution of COVID-19 Vaccine

Non-Hospital Healthcare Workers

Overview

The Kentucky Department for Public Health (KDPH) is coordinating with local health departments (LHD) to begin distribution of COVID-19 vaccines. Completing the following survey will help KDPH and LHDs effectively allocate vaccines throughout the state.

COVID-19 Vaccine Survey

Please go to https://ky.readyop.com/fs/4j5k/0482 and complete the survey titled, “Non-Hospital Healthcare Worker COVID-19 Vaccine Survey” before January 8th, 2021. The Green River District Health Department will use the information provided from this survey as a planning tool to determine how many doses of COVID-19 vaccine are needed for non-hospital healthcare workers within our counties. When completing the survey, include all employees in your organization regardless of county of residence.

- NOTE: This survey does NOT register your agency as a vaccine provider. If you are interested in becoming a vaccine provider, please refer to Vaccine Provider Enrollment for more information.

Allocation Planning Process

- Step 1: GRDHD collects information through the survey from agencies that employ non-hospital healthcare workers.

- Step 2: KDPH allocates vaccines to enrolled providers based on Advisory Committee on Immunization Practices (ACIP) recommendations and priority groups.

- Step 3: Enrolled providers will work with their respective LHD to target employers with non-hospital healthcare and senior care workers.

Considerations for Employers

While all healthcare workers will have the opportunity to be vaccinated, it is unlikely that all personnel will be vaccinated at the same time. When developing employee vaccination schedules, please consider the following:

- Vaccine distribution is likely to be interrupted, delayed, or staggered due to high demand;

- As with any vaccine, the initial immune system response may result in side effects. While these side effects are generally safe and do not indicate infection, some employees may feel unable to work the day after receiving the vaccination. As a result, consider staggering employee vaccination schedules to ensure proper staffing throughout the distribution period;

- If vaccine distribution is limited, consider prioritizing employees who are high-risk (e.g., pre-existing medical conditions, age, and risk of exposure, etc.) using the Vaccine Prioritization Guidance outlined in the next section.

[December 21, 2020]
Vaccine Prioritization Guidance

Public health will allocate available COVID-19 vaccines to enrolled providers in the Kentucky Immunization Registry. Public health agencies will follow ACIP recommendations on the prioritization populations for the COVID-19 vaccine in phases.

Within each phase, there may be need to further prioritize each group, especially when vaccine resources are limited. Job risk exposure, individual’s health status, and care for medically vulnerable patients should all be considered for sub-prioritization. Equitable allocation of vaccines is critical and persons considering prioritization should include all non-hospital healthcare workers, senior service workers, and support staff based upon the following guidance.

Healthcare Job Risk Exposure

Very high exposure risk
- Healthcare workers who perform aerosol-generating procedures;
- Healthcare or laboratory personnel collecting or handling potential COVID-19 specimens;
- Morgue workers performing autopsies on persons known or suspected to have had COVID-19 at the time of death.

High exposure risk
- Healthcare and healthcare support workers who perform direct patient care;
- Medical transport workers moving known or suspected COVID-19 patients;
- Mortuary workers involved in preparing decedent bodies;
- Other essential personnel with high potential for exposure to known or suspected sources of COVID-19.

Medium exposure risk
- Staff who have non-clinical contact with the public e.g., administration, facility/maintenance staff, in-person customer service, registration, pharmacy

Low exposure risk
- Healthcare workers with little to no contact with the public or COVID-19 sources;
- Healthcare workers who are teleworking and/or provide telemedicine;
- Persons who do not require contact with potential sources of COVID-19;
- Office workers who do not have frequent close contact with coworkers, customers, or the public.

Individual Risk

Further consideration of individual risk may be considered for essential workers. Individual risk factors include:
- Age (especially those 65 and older)
- Comorbidities (diabetes, obesity, cancer, COPD, heart conditions, immunocompromised, pregnancy, etc.)

Vulnerability of Patients Served

Further consideration must be given to the types of patients/clients normally served and the vulnerability of those persons (oncology, dialysis, home health, senior services, etc.)
Questions

Questions regarding the survey and/or COVID-19 vaccine can be addressed to Brooke Fogle, Public Health Preparedness Coordinator, Brooke.Fogle@grdh.org