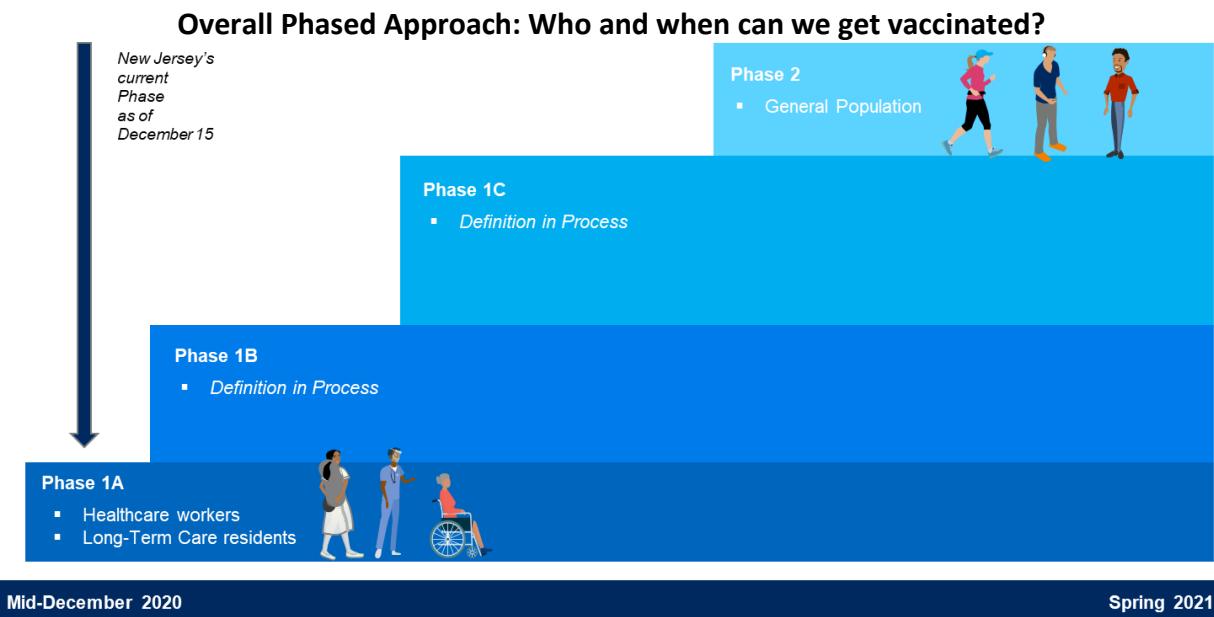


New Jersey's Phased Approach to COVID-19 Vaccination: Phase 1A

New Jersey is using a phased approach to COVID-19 vaccination to ensure that limited vaccines are distributed in a fair and equitable manner. Phase 1A started December 15, 2020. During 2021, additional people will become eligible to receive vaccination in New Jersey. Decisions about priority groups and how the doses will be spread across the state may change based on changes in vaccine supply and public demand.



How did New Jersey determine the Phased Approach?

New Jersey's phased approach is informed by the Centers for Disease Control and Prevention (CDC), Advisory Committee for Immunization Practices (ACIP), the National Academies of Sciences, Engineering, and Medicine (NASEM), the New Jersey Department of Health COVID-19 Professional Advisory Committee (PAC), the Coronavirus Task Force (CTF), and extensive stakeholder engagement.

When does Phase 1A start in New Jersey?

COVID-19 vaccinations began in New Jersey on December 15, 2020. This is after the Food and Drug Administration (FDA) issued an emergency use authorization (EUA) for a COVID-19 vaccine and after the Centers for Disease Control and Prevention (CDC) adopted recommendations of the Advisory Committee for Immunization Practices (ACIP).

When will New Jersey change phases?

Specific dates are not known at this time. Factors like supply of vaccine, public confidence and uptake, time, and federal guidance will inform data-driven decisions. Governor Murphy and Commissioner of Health Persichilli will announce when New Jersey changes phases.

There are approximately 650,000 people eligible for Phase 1A, so it may be weeks before New Jersey moves to Phase 1B.

Who can get vaccinated during Phase 1A?

During Phase 1A, New Jersey will build step by step to serve all eligible populations. New Jersey started in December 2020 by fortifying our hospitals, including prioritizing those at highest risk of exposure to

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COVID-19. New Jersey's plan will continue into our vulnerable skilled nursing facilities, using the CDC-supported Pharmacy Partnership for Long-term Care. As Phase 1A progresses, non-hospital-based healthcare personnel and residents of other long-term care settings will also become eligible.

How do I prove that I am eligible for vaccination?

You are eligible if you live, work, or are being educated in New Jersey and can self-identify as meeting the criteria for the current sub-phase. No professional nor medical documentation is required.

Why does Phase 1A include healthcare personnel and long-term care residents?

According to the [Advisory Committee for Immunization Practices](#):

- Health care settings in general, and long-term care settings in particular, can be high-risk locations for SARS-CoV-2 exposure and transmission.
- Early protection of health care personnel is critical to preserve capacity to care for patients with COVID-19 or other illnesses.
- Long-term care facility residents, because of their age, high rates of underlying medical conditions, and congregate living situation, are at high risk for infection and severe illness from COVID-19.

Who are “healthcare personnel” in Phase 1A?

Healthcare personnel are paid and unpaid persons serving in health care settings who have the potential for direct or indirect exposure to patients or infectious materials.

This includes any type of worker within a healthcare setting. Examples include, but are not limited to:

- ✓ licensed healthcare professionals like doctors, nurses, pharmacists, and dentists
- ✓ staff like receptionists, janitors, mortuary services, laboratory technicians
- ✓ consultants, per diem, and contractors who are not directly employed by the facility
- ✓ unpaid workers like health professional students, trainees, volunteers, and essential caregivers
- ✓ community health workers, doulas, and public health professionals like Medical Reserve Corps
- ✓ personnel with variable venues like EMS, paramedics, funeral staff, and autopsy workers
- ✓ other paid or unpaid people who work in a healthcare setting, who may have direct or indirect contact with infectious persons or materials, and who cannot work from home

Who are “unpaid” healthcare workers?

Persons who work within a healthcare setting, but are not paid. These include, but are not limited to health professional students, trainees, volunteers, and essential caregivers.

What are “healthcare settings” in Phase 1A?

For COVID-19 vaccination, any venue where healthcare occurs is a healthcare setting.

Examples include, but are not limited to:

- ✓ Acute, pediatric, and behavioral health hospitals and ambulatory surgical centers
- ✓ Health facilities like psychiatric facilities, Federally Qualified Health Centers, and rehabs
- ✓ Clinic-based settings like urgent care clinics, dialysis centers, and family planning sites
- ✓ Long-term care settings like nursing homes, assisted living facilities, group homes, and others
- ✓ Occupational-based healthcare settings like health clinics within workplaces, shelters, jails, colleges and universities, and K-12 schools
- ✓ Community-based healthcare settings like PACE and Adult Living Community Nursing
- ✓ Home-based settings like hospice, home care, and visiting nurse services

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- ✓ Office-based healthcare settings like physician and dental offices
- ✓ Public health settings like local health departments, LINCS agencies, harm reduction centers, and medicinal marijuana programs
- ✓ Retail, independent, and institutional pharmacies
- ✓ Other settings where healthcare is provided

Where can healthcare personnel get vaccinated?

New Jersey is developing an extensive network of vaccination sites that will be open to all healthcare workers. By early January, the vaccination sites network will include acute care hospitals, large state-coordinated mega sites, county/local sites, retail pharmacies and other medical locations. At this time we are not able to arrange for all groups to receive distributions directly, so healthcare personnel may need to go off-site to be vaccinated. Hospital workers and volunteers will have an opportunity to receive the vaccine at the hospital where they work or volunteer.

All other healthcare workers and volunteers, including those outside of hospitals and long-term care, will be able to receive the vaccine through other vaccination sites at pharmacies, urgent care centers, federally qualified health centers, hospitals, local health departments, other state- and county-run sites, and other medical clinics.

How can a healthcare worker schedule an appointment to be vaccinated?

New Jersey will launch a statewide vaccine scheduling system to help consumers connect with identified nearby points of dispensing sites. More details are coming soon.

If you are healthcare worker who is not based in a hospital, an appointment may not be available to you during the first weeks of the vaccination campaign due to significantly limited vaccine availability. NJDOH hopes to be able to serve all healthcare workers who wish to be vaccinated by the end of January 2021, pending vaccine availability.

Who are “long-term care residents” in Phase 1A?

Long-term care residents are adults who reside in facilities that provide a range of services, including medical and personal care, to persons who are unable to live independently.

What are “long-term care settings” in Phase 1A?

Facilities that provide a range of services, including medical and personal care, to persons who are unable to live independently. This includes, but is not limited to:

- ✓ Skilled nursing facilities
- ✓ Veteran’s homes
- ✓ Assisted living facilities, continuing care retirement communities, and personal care homes
- ✓ Group homes like residential care homes, adult family homes, adult foster homes, and intellectual and developmental disabilities group homes
- ✓ HUD 202 Supportive Housing for the Elderly Program residences
- ✓ Institutional settings like psychiatric hospitals, correctional institutions, county jails, and juvenile detention facilities (for eligible minors, e.g. 16+ years of age may be eligible for Pfizer vaccine under the emergency use authorization)
- ✓ Other vulnerable, congregate, long-term settings

What is the [Pharmacy Partnership for Long-term Care](#) and who will it serve in Phase 1A?

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Residents and staff of long-term care facilities have been a priority throughout the state's vaccination planning. New Jersey and federal agencies have partnered with CVS and Walgreens to provide end-to-end management of the vaccination process, including storage, handling, cold chain management, on-site vaccinations, and fulfillment of reporting requirements at certain types of long-term care facilities.

During the October sign-up period, New Jersey actively promoted this opportunity to long-term care providers and now is working with CDC and Operation Warp Speed to optimize the number of facilities accepted into the program. For enrolled facilities, the partnership will facilitate safe and effective vaccination for residents and healthcare personnel serving within their facility who have not yet been vaccinated off-site. CVS and Walgreens will contact enrolled facilities to coordinate, share information, and, when the partnership is activated during Phase 1A, to begin scheduling on-site clinics.

The Partnership will begin with serving skilled nursing facilities and will expand to other types of long-term care settings. New Jersey has also started to establish alternative providers for settings that are not served by the Partnership.

What data will I need to share to be vaccinated?

NJIIIS will securely store the vaccine recipient's name, address, date of birth, race, ethnicity, and gender. These are standard data elements that have been used across vaccines administered in New Jersey. These will be requested during pre-registration and/or on-site. Information about the vaccine provider, substance, and administration will be collected from the POD personnel.

There are other data that may be asked of vaccine recipients and that will not be stored in NJIIIS. Depending on the POD and its scheduling process, New Jerseyans can also expect to provide additional demographic and occupational data to ensure equitable and efficient scheduling of vaccinations. These data points will be informed by ACIP recommendations about prioritization (e.g. Phase 1A will include healthcare personnel).

Finally, medical screening questions will be asked to assess eligibility under the EUA and ACIP recommendations specific to the vaccine product offered at the point of dispensing.