

## Personal Protective Equipment (PPE) Prioritization and Distribution for COVID-19 in King County

October 6, 2020

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### How are we making decisions about how PPE is allocated?

King County collaborates with federal and state partners to address requests for medical-grade personal protective equipment (PPE). This includes items like medical face masks, N95 respirators, goggles, gowns, gloves, and hand sanitizer. Due to the unprecedented scarcity of this equipment, this has been challenging.

Recently, more vendors have items like gloves, shoe covers, and surgical masks in stock and can fulfill small orders. Other items – for example, N95s and sanitizing wipes – are proving harder to acquire.

The Washington State Department of Health (DOH) sets the priority for allocating publicly procured PPE that is followed by all counties. These guidelines give the highest priority to the following Tier 1 frontline health-care settings:

1. Hospitals, including psychiatric hospitals
2. EMS Services
3. Long term care facilities and hospice centers
4. Alternate care or isolation and quarantine facilities
5. All public health agencies for outbreak investigations

These frontline healthcare workers have the most risk of exposure to coronavirus and work with patients at the highest risk for severe health outcomes. Providing PPE to these individuals may also help to prevent shortages of healthcare staff due to illness and preserve the healthcare system.

Once Tier 1 orders are filled, DOH identifies Tier 2 organizations to be prioritized for PPE, such as other healthcare settings with cases (congregate settings, behavioral health residential facilities, outpatient clinics), COVID-19 test sites, jails, crisis responders, medical examiners, and law enforcement agencies. If additional PPE remains, the next tier of prioritization is for healthcare settings without confirmed or suspected cases, opioid treatment programs, funeral homes, childcare centers, and quarantine facilities.

### Who is eligible to order PPE through King County EOC?

Organizations that fit into the state's four prioritization tiers can [order supplies](#) from the King County Emergency Operations Center (EOC) if they are unable to procure through commercial vendors and can implement conservation strategies to reduce their consumption of PPE.

Sectors not included in the DOH guidance can submit a request for cloth face coverings and other supplies via [King County's Donations Portal](#) if they are unable to procure through normal channels.

Orders will be prioritized based on [DOH's guidance](#) and reviewed by Public Health to recommend how much of each item to distribute to each requester based upon the quantity ordered, estimated burn rate (daily usage), estimated COVID cases in that setting, available supply, and the population served by the requesting agency, among other factors. Public Health does not always have complete information available for every request and tries to make reasonable inferences in our calculations.

The King County EOC will fulfill up to 14-21 days of supplies requested by partners subject to available inventory. Our current turnaround time from request to delivery is about 1.5 – 2 weeks.

### How much of the PPE orders are we able to fill?

This varies week by week and by item depending on the quantities shipped to the King County EOC by the state, in addition to what the county was able to purchase or received through donations. The table below summarizes quantities requested and distributed to Tier 1, 2, and 3 sectors during the month of September 2020. There were 452 requests either partially or completely fulfilled during this period.

Tier	Type	Item	Requested	Allocated	Percent
1	Alternate Care Facilities	Face Shields	550	550	100%
1	Alternate Care Facilities	Gloves	6,570	4,500	68%
1	Alternate Care Facilities	Gowns	1,830	1,434	78%
1	Alternate Care Facilities	Surgical mask	230	230	100%
1	Alternate Care Facilities	N95	800	810	101%
1	Hospital	Gloves	5,000	5,000	100%
1	Hospital	Surgical mask	2,000	2,000	100%
1	Long Term Care Facilities	Face Shields	6,984	7,037	101%
1	Long Term Care Facilities	Gloves	315,207	300,200	95%
1	Long Term Care Facilities	Gowns	51,406	37,196	72%
1	Long Term Care Facilities	Surgical mask	103,146	103,190	100%
1	Long Term Care Facilities	N95	7,430	7,450	100%
1	Public Health	Face Shields	610	660	108%
1	Public Health	Gloves	78,612	59,100	75%
1	Public Health	Gowns	90	160	178%
1	Public Health	Surgical Mask	1,554	1,560	100%
1	Public Health	N95	4,065	4,090	101%
2	Community Health Clinic	Face Shields	1,100	1,100	100%
2	Community Health Clinic	Gloves	17,000	16,000	94%
2	Community Health Clinic	Gowns	7,000	5,000	71%
2	Community Health Clinic	Surgical Mask	11,400	11,400	100%
2	Community Health Clinic	N95	7,000	7,000	100%
2	Health Clinic (General, Behavioral, Dental)	Face Shields	2,694	2,697	100%
2	Health Clinic (General, Behavioral, Dental)	Gloves	175,656	182,000	104%
2	Health Clinic (General, Behavioral, Dental)	Gowns	10,423	7,280	70%
2	Health Clinic (General, Behavioral, Dental)	Surgical Mask	33,282	33,390	100%
2	Health Clinic (General, Behavioral, Dental)	N95	13,506	14,020	104%
2	Home Health/Home Care	Surgical Mask	2,000	2,000	100%
2	Jails	Surgical Mask	2,000	2,000	100%
2	Jails	N95	5,250	5,280	101%
2	Local Gov't, Not Public Health	Gloves	2	100	5000%

Tier	Type	Item	Requested	Allocated	Percent
2	Local Gov't, Not Public Health	Surgical Mask	25	30	120%
3	Child Care	Face Shields	30	30	100%
3	Child Care	Gloves	5,735	6,400	112%
3	Child Care	Gowns	40	20	50%
3	Child Care	Surgical Mask	235	240	102%
3	Health Clinic (General, Behavioral, Dental)	Face Shields	300	300	100%
3	Health Clinic (General, Behavioral, Dental)	Gloves	6,000	4,100	68%
3	Health Clinic (General, Behavioral, Dental)	Gowns	400	200	50%
3	Health Clinic (General, Behavioral, Dental)	Surgical Mask	1,050	1,050	100%
3	Home Health/Home Care	Face Shields	60	60	100%
3	Home Health/Home Care	Gloves	54,800	54,800	100%
3	Home Health/Home Care	Gowns	100	116	116%
3	Home Health/Home Care	Surgical mask	3,400	3,400	100%

Note: % filled is likely a slight undercount since it does not incorporate any requests that were filled with a like item. For example, using large gloves to fill requests for extra-large gloves when the latter are unavailable (or swapping latex for non-latex). Similar situations occur for gowns.

The King County EOC works to fill orders for 14-21 days of supplies for Tier 1 facilities (frontline medical providers). If there is excess inventory after Tier 1 orders are filled for any supplies, the EOC allocates the remaining supplies to Tier 2 and 3 organizations which have the potential for greater social distancing like congregate facilities, outpatient clinics, testing sites, and law enforcement agencies.

During September, the King County EOC was able to fill about 71% of gown requests, 96% of non-latex glove requests, 74% of N95 requests.

### How are we ensuring PPE equitably distributed to communities who are disproportionately impacted by the disease?

Public Health received input from its Equity Response Team and the Pandemic Advisory Committee on the current PPE distribution model and how Public Health can work within existing DOH guidance to better address health disparities. Public health is working with these teams to improve accessibility and awareness of PPE resources, modifying its internal strategy to prioritize agencies like Community Health Clinics, testing sites and social service providers within DOH guidelines and continuing to do targeted outreach with partners qualifying for medical PPE. The King County EOC continues to be a key partner in efficiently fulfilling PPE orders once approved by Public Health.

### Gaps and Challenges

There continue to be challenges and gaps in PPE allocation that we're working to address. These include:

- Ensuring access to PPE for workers in essential occupations and service providers that are not included in DOH's Tiers 1-4.
- Ensuring sufficient PPE for community testing sites.

- Outreach and technical support to partners who may not be aware of or have barriers to the ordering process, such as in-home childcare providers with limited English proficiency
- Distributing PPE to families caring for an ill person in their home

### **When and how are PPE policies updated?**

King County updates its internal PPE distribution processes when any of the following occur:

- Changes in clinical and regulatory guidance for use of PPE in medical settings
- Changes of the DOH's Tiering system
- Changes in the availability of PPE through commercial distributors
- Changes in statewide or local social distancing measures
- Changes in the usage pattern by eligible sectors, such as facilities reopening to non-critical services
- New epidemiological information which impacts King County containment and mitigation strategies, such as data on higher rates of illness and death among communities of color

When significant changes are needed in local PPE allocation policies, Public Health will facilitate a data driven process engaging stakeholders to reach consensus on modifications to the local strategy.

### **Transparency and Accountability**

We understand the shortage of PPE causes deep concern, stress, and difficulty for all essential workers as they continue to provide services and care for individuals. King County is actively working with industries and the State to increase production and public procurement. We are committed to providing a transparent and fair process for allocating PPE and working to ensure distributions are done so in a manner which does not reinforce existing health disparities.