Identifying Essential Critical Infrastructure Workers

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HEALTHCARE / PUBLIC HEALTH

- Workers who perform critical clinical research, development, and testing needed for COVID-19 response.
- Healthcare providers and caregivers including physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, optometrists, speech pathologists, chiropractors, and diagnostic and therapeutic technicians and technologists.
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.).
- Workers in other medical and biomedical facilities (including ambulatory health and surgical, blood banks, clinics, community mental health, comprehensive outpatient rehabilitation, end-stage renal disease treatment, health departments, home healthcare, hospices, hospitals, long term care, nursing care facilities, organ pharmacies, procurement organizations, psychiatric residential, rural health clinics and federally qualified health centers, and retail facilities specializing in medical good and supplies).
- Manufacturer workers for health manufacturing (including biotechnology companies), materials and parts suppliers, logistics and warehouse operators, distributors of medical equipment (including those who test and repair), and manufacturers of personal protective equipment (PPE), isolation barriers, medical gases, pharmaceuticals (including materials used in radioactive drugs), dietary supplements, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, and tissue and paper towel products.
- Public health / community health workers, including those who compile, model, analyze and communicate public health information.
- Blood and plasma donors and the employees of the organizations that operate and manage related activities.
- Workers who manage health plans, billing, and health information, who cannot practically work remotely.
• Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely.
• Workers performing information technology and cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely.
• Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely.
• Pharmacy employees necessary to maintain uninterrupted prescription filling.
• Workers performing mortuary funeral, cremation, burial, cemetery, and related services, including funeral homes, crematoriums, cemetery workers, and coffin makers.
• Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident.

LAW ENFORCEMENT, PUBLIC SAFETY, AND OTHER FIRST RESPONDERS

• Public, private, and voluntary personnel (front line and management) in emergency management, law enforcement, fire and rescue services, emergency medical services, and private security, to include public and private hazardous material responders, air medical service providers (pilots and supporting technicians), corrections, and search and rescue personnel.
• 911 call center employees and Public Safety Answering Points who can’t perform their duties remotely.
• Fusion Center employees.
• Workers – including contracted vendors -- who maintain, manufacture, or supply equipment and services supporting law enforcement emergency service and response operations (to include electronic security and life safety security personnel).
• Workers supporting the manufacturing of safety equipment and uniforms for law enforcement, public safety personnel, and first responder.
• Workers supporting the operation of firearm or ammunition product manufacturers, retailers, importers, distributors, and shooting ranges.
• Public agency workers responding to abuse and neglect of children, elders, and dependent adults.
• Workers who support weather disaster / natural hazard mitigation and prevention activities.
• Security staff who maintain building access control and physical security measures.

RESIDENTIAL/SHELTER FACILITIES AND SOCIAL SERVICES
Workers in dependent care services, in support of workers in other essential products and services.
Workers who support food, shelter, and social services, and other necessities of life for vulnerable groups and individuals, including in-need populations and COVID-19 responders (including travelling medical staff).
Workers in animal shelters.
Workers responsible for the leasing of residential properties to provide individuals and families with ready access to available housing.
Workers responsible for handling property management, maintenance, and related service calls who can coordinate the response to emergency “at-home” situations requiring immediate attention, as well as facilitate the reception of deliveries, mail, and other necessary services.
Workers performing housing construction related activities to ensure additional units can be made available to combat the nation’s existing housing supply shortage.
Workers performing services in support of the elderly and disabled populations who coordinate a variety of services, including healthcare appointments and activities of daily living.
Workers supporting the construction of housing, including those supporting government functions related to the building and development process, such as inspections, permitting, and plan review services that can be modified to protect the public health, but fundamentally should continue and serve the construction of housing (e.g., allow qualified private third-party inspections in case of government shutdown).