



January 13, 2021

Mr. Jeffrey Zients
COVID-19 Coordinator

Dr. Bechara Choucair
COVID-19 Vaccine Coordinator

Dear Mr. Zients and Dr. Choucair,

LeadingAge and the Visiting Nurse Associations of America (VNAA) look forward to working with the Biden-Harris Administration. We are writing to you today to ask you to take steps to ensure that *all* health care workers, including those who serve older adults in home and community-based settings, have the opportunity to be vaccinated against COVID-19.

Specifically, we ask that:

- Widespread vaccination clinics specifically targeting health care workers who work in home or community-based settings be offered in as many locations as possible, or on site at providers' administrative offices;
- A system be developed for providers who serve people at home or in the community to volunteer or be selected to help distribute the vaccine.

LeadingAge and the VNAA represent more than 5,000 nonprofit aging services providers and other mission-minded organizations that touch millions of lives every day. Our membership encompasses the entire continuum of aging and disability services. We bring together the most inventive minds in aging services to make America a better place to grow old.

Right now, older adults and the providers who care for them are at the center of the pandemic storm. Eighty percent of all COVID-19 deaths are among people aged 65 and older. Individuals living in congregate residential settings, such as nursing homes and assisted living communities, are at particularly high risk because the virus is easily transmitted in close quarters.

However, even more older adults in communities across the nation have tested positive for COVID-19 and died. In fact, more than half (53%) of COVID-19 deaths among adults 65+ were outside of nursing homes. Thousands of providers of aging services care for and serve older adults in the community and wherever they call home. For example, nurses, aides, physical and occupational therapists, and other staff work each day in home care, hospice, Programs for All Inclusive Care for the Elderly (PACE), and adult day services centers.

All of these health care workers keep older adults out of congregate settings, where the risk of exposure is even higher. They also keep older adults out of hospitals, which are currently overburdened. In short, getting these workers vaccinated should be of the utmost priority – and so far, that urgency is not being met by the logistical rollout of the vaccine.

These health care workers must be vaccinated. The process to get these staff vaccinated has been uncoordinated, slow, and dependent on either personal relationships with state and local governments, or relationships or affiliations with hospitals/health care systems, rather than a systematic process. These workers are for the most part included Phase 1a, but in many areas of the country are still awaiting instruction on when they will have their opportunity. In those areas where there is the option for these staff to get vaccinated, the logistics are immensely burdensome. Unlike in hospitals and long term care, where staff have the opportunity to be vaccinated at their place of employment, health care workers who serve the home and community are being asked to travel to clinics that may not be geographically convenient and are not scheduled in consideration of their work schedules. Whether there are appointment slots or doses available is often completely dependent on partnership with a local hospital or department of health, with executives of these organizations spending massive amounts of administrative time to simply get access to vaccinations.

We hope these patterns change with the recent announcement of expanded access to doses for states but we still ask for the following with regard to staff vaccinations:

- At a minimum, clinics should be offered specifically for health care workers affiliated with home and community-based care in as many geographic locations as is feasible.
- Ideally, organizations should have the opportunity to schedule vaccine clinics at their administrative offices.

As the vaccine rollout quickly extends to all older adults, the need for these staff to be vaccinated becomes even more critical. These providers can help to vaccinate their clients and families – they have better access than any other resource that the government could muster. By delaying the vaccination of these staff, the government is forgoing a potential critical tool to getting the broader adult population vaccinated. **We therefore recommend the development of a process for agencies to raise their hands or be selected to help distribute the vaccine.** Home health agencies and PACE organizations regularly provide flu shots and could be mobilized to assist in this effort for their clients and even the broader community with the right resources. There are also hospice organizations and medical model adult day services providers who could assist in these efforts.

We look forward to your work to achieve the President-Elect’s vaccination goals. We stand ready to help and want to be sure that this critical part of the aging services continuum is not left behind. Please contact Ruth Katz, LeadingAge senior vice president for policy (rkatz@leadingage.org), with questions or to set up a meeting to discuss these issues further.

Sincerely,



Katie Smith Sloan
President and CEO, LeadingAge
Acting President and CEO, Visiting Nurse Associations of America