COVID-19 Vaccinations Should Be Administered to All Eligible and Willing Residents and Healthcare Workers in Post-Acute and Long-Term Care Facilities

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COVID-19 infections disproportionately affect older adults and people with chronic diseases, leading to high morbidity and mortality. Vaccines for COVID-19 are effective and safe in these populations. Therefore, all residents and healthcare workers in post-acute and long-term care facilities should get vaccinated if they are eligible and willing to receive the COVID-19 vaccine.

To support equity and efficiency in COVID-19 vaccine administration in post-acute and long-term care settings:

1. **AMDA recommends that the first dose of COVID-19 vaccine be administered to short-stay and rehabilitation residents while they are in the nursing home.**

   Many nursing homes have scheduled vaccinations for their long-stay residents. Some nursing homes have elected to exclude short-term residents due to the uncertainty regarding availability and timing of the second dose of vaccine. Withholding the first dose of vaccination due to the uncertainty of second dose is unethical. A single dose of currently authorized vaccines is 65% effective at preventing COVID-19 infections. Additionally, protection has been demonstrated as early as 11-14 days following the first vaccine dose. Residents who are discharged may face greater barriers to accessing the vaccine and deserve to benefit from the partial protection offered by the first dose. Strategies to administer the second dose include having the resident return to the building for their second dose and partnering with home health agencies, local hospitals, retail pharmacies, and local and state public health departments.

2. **AMDA recommends COVID-19 vaccine distribution and administration that continues to prioritize residents and healthcare workers in post-acute and long-term care facilities.**

   Under the current pharmacy partnership program, three dates are assigned to each facility for vaccine administration. Once these dates pass, there will still be a continued need for vaccine distribution and administration to nursing home residents and healthcare workers. Reasons for this include new admissions and recently hired staff, delays in vaccination due to COVID-19 infection, receipt of monoclonal antibody, treatments for other medical conditions (e.g., chemotherapy, steroids, biologics) and deliberation over the decision to vaccinate. Strategies to ensure ongoing availability of COVID-19 vaccines to nursing home residents and healthcare workers include encouraging more participation by existing long-term care pharmacies and consultant pharmacists and expanding the current pharmacy partnership program to promote access through local hospitals, retail pharmacies, and local and state public health departments.

3. **AMDA urges directives from state and federal governments that reduce barriers to COVID-19 vaccinations.**

   Vaccine distribution and administration varies across states and localities, with an array of accompanying barriers, such as mandates that both doses of vaccine be administered in the same
physical location and the pharmacy partnership program imposing written or two-person telephone consent requirements that are not required by law or the emergency use authorization, and are inconsistent with standard immunization practices. Additionally, some pharmacy partners have applied exclusionary criteria not supported under Centers for Disease Control and Prevention (CDC) guidance. Reports include denial of vaccination after PPD (tuberculosis skin testing), withholding vaccination for recently exposed residents, and requiring a doctor’s approval for people with allergies such as eggs or peanuts. These unnecessary barriers impede timely and equitable vaccination uptake. Strategies to reduce barriers include permitting vaccine administration within existing healthcare networks (e.g., hospitals, nursing homes, pharmacies, and/or home health agencies that already work together to provide care) and use of vaccine eligibility criteria consistent with evidence-based guidance provided by the CDC.

We anticipate that increasing vaccine production and continued emergency use authorization of new COVID-19 vaccines will improve supply and availability. By undertaking the above actions, long-term care facilities should be able to overcome the numerous barriers that presently exist to comprehensive resident and healthcare worker vaccination. The overall goal is to vaccinate every eligible resident and healthcare worker who desires to receive the vaccine. These efforts are vital for the ongoing safety of residents and healthcare workers of our nation’s post-acute and long-term care facilities and to the community as we all work together to end the COVID-19 pandemic.

Approved by the AMDA Executive Committee
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