



# Forming Lasting NWD System Partnerships through Collaboration on Vaccine Outreach

Partnerships are at the heart of robust and sustainable No Wrong Door (NWD) Systems. As NWD Systems expanded across the country, new partnerships emerged and existing partnerships strengthened. The states with the top scores in the Aging and Disability Resource Center (ADRC)/NWD access function in the [LTSS Scorecard](#) have forged strong collaborative partnerships between the state aging and disability agencies and the state Medicaid agency. Additionally, in building strong systems of access, ADRCs<sup>1</sup> and other NWD entities have engaged with key state and local partners to expand the reach to all populations. These unique partners are listed in the table below. For some, collaborating on the COVID-19 pandemic response has opened additional opportunities for partnership. ACL strongly encourages partnership and coordination with state and local agencies for vaccine outreach. This document provides ideas for expanding and strengthening critical NWD partnerships through collaboration on vaccine outreach for all populations and payers.

State Level Partners:	Community Based Organization Partners:
<ul style="list-style-type: none"> <li>• State Unit on Aging (SUA)</li> <li>• State Council on Developmental Disabilities (DD Councils)</li> <li>• State Department or Division of Disabilities</li> <li>• State Assistive Technology (AT) Act programs</li> <li>• State health department</li> <li>• State Labor and Workforce Development agency</li> <li>• State Transportation agency</li> <li>• State Medicaid agency</li> <li>• State Departments supporting Military or Veteran programs</li> <li>• University Centers for Excellence in Developmental Disabilities (UCEDDs)</li> </ul>	<ul style="list-style-type: none"> <li>• Area Agencies on Aging (AAAs)</li> <li>• Providers (i.e. adult day centers, home health agencies, transportation)</li> <li>• Health plans</li> <li>• Local health departments</li> <li>• Housing and Urban Development service coordinators</li> <li>• Residential housing providers</li> <li>• Employment centers</li> <li>• Faith-based organizations</li> <li>• Centers for Independent Living (CILs)</li> <li>• Other disability partners</li> <li>• Advocacy partners</li> <li>• Traumatic Brain Injury (TBI) partners</li> <li>• Tribal partners</li> <li>• Other local government partners</li> </ul>

### *Adult Day Centers*

[Nevada Senior Services](#), the ADRC in Las Vegas, opened their own small-scale vaccine site for Nevada's most vulnerable older adults and their caregivers partnering with adult day centers. Students in the physician assistant program at Touro University helped administer the vaccine.

### *Coalition Building Among Multiple Partners*

The ADRC in Alabama formed a vaccine advisory committee that recommended a statewide public relations vaccination campaign. They plan to include positive messages to combat hesitancy with emphasis on new freedoms and connections once vaccinated and how vaccination helps to end the

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<sup>1</sup> In this document, we generally use the term “ADRC” to refer to the local actions taken by ADRCs and/or other local NWD entities.



pandemic. The ADRC met with Alabama's Developmental Disability Council (ACDD), the UCEDD, the CILs, and advocacy partner, the Alabama Disabilities Advocacy Program (ADAP). All entities agreed to a uniform, collaborative partnership to present a statewide vaccine education campaign targeting older adults, individuals with disabilities, and caregivers. They also plan to partner and collaborate with other aging and disability organizations for this statewide campaign, including tribal entities in the state.

### *State Councils on Developmental Disabilities*

In each state and territory, a Developmental Disabilities (DD) Council receives federal funding to support programs that promote self-determination, integration, and inclusion for all individuals with intellectual and developmental disabilities (I/DD). Eleven states have reported partnering with DD Councils to support their COVID-19 activities, which include vaccine outreach. Consider reaching out to partner with your DD Council if you have not already. See the Texas inclusion initiative in the next section.

### *Faith-Based Organizations*

Faith-based organizations have a unique and important role to play in gaining public trust and promoting vaccine acceptance. Some ADRCs have existing partnerships with faith-based organizations to promote community inclusion. An [ADRC in Texas](#) collaborated with the Texas DD Council to facilitate an inclusion initiative for individuals with I/DD and local faith-based organizations. The initiative organized workshops for faith-based organizations on how to welcome and include individuals with disabilities. They also created an online directory to help persons with disabilities and their families locate places of worship. ADRCs in [Wisconsin](#) have also partnered with faith-based organizations on COVID-19 vaccine outreach.

### *Healthcare Clinics*

The Wyoming ADRC partnered with a dialysis center to provide vaccinations to individuals coming in for dialysis treatment. They also created a COVID-19 call center to help people to schedule vaccinations and coordinate transportation to vaccine appointments. The ADRC coordinated with universities, the public health department, and pharmacies to help to schedule individuals for the vaccine.

### *Health Departments*

The ADRC in Tennessee used volunteers to contact individuals living at home and enrolled in the Tennessee Options for Community Living Program (state-funded long-term services and supports (LTSS) program, Tenn Options) to assist them in signing up for appointments and coordinating transportation. Additionally, through a partnership with their in-home care association that provides services to individuals enrolled in the Tenn Options Program, they coordinated vaccinations in the home for those unable to make appointments in the community. The ADRCs coordinated with the state health department to obtain doses for home care agencies to administer in homes.

*"Public health has traditionally been less focused on aging and disability – this (bittersweet) situation has offered opportunity to really build connections between the aging and disability services network and public health."*

*-ADRC COVID Grantee*

### *Health Plans, Health Systems and Hospitals*

The [ACL Strategic Framework for Action](#) encourages state NWD entities to forge partnerships with hospitals, health plans and health systems. Although many CBOs have established relationships, vaccine outreach efforts may offer an opening to establish new or strengthen existing ties. ADRCs can offer support in [outreach, scheduling, and transportation](#) to vaccine sites which make ADRCs ideal partners



with health systems and hospitals. Health plans, health systems, and hospitals partnering with local ADRCs is an effective approach to ensuring that ADRCs reach a broader audience of older adults and individuals with disabilities. In rural and frontier areas especially, individuals may trust health care providers when it comes to vaccine acceptance. [A survey by the Tennessee Department of Health](#) found that people were most likely to trust physicians and medical staff for information on vaccines.

The America's Health Insurance Plans (AHIP) and Blue Cross Blue Shield (BCBS) started the [Vaccine Community Connectors Initiative](#), an effort committed to increasing vaccine access and distribution to over two million older adults aged 65 years and older across the nation. Through this initiative, the dedicated health plans work with local aging and disability organizations, state, and federal leaders to identify seniors in need of vaccination and facilitate vaccine registration and scheduling, coordinate services, and educate seniors on the safety and efficacy of the vaccine. ADRCs and other NWD partners can leverage this opportunity and coordinate efforts. Three ADRCs in Alabama have partnered with BCBS on this initiative to address vaccine hesitancy in 18 counties. BCBS refers members with vaccine hesitancy or vaccine access issues to the ADRC. The ADRC addresses the issues that impact vaccination status and coordinates with the plan to provide in-person care coordination and resources to address vaccine hesitancy.

The Maryland Department of Aging and the Maryland Department of Health partnered with MedStar Health to bring COVID-19 vaccination clinics to independent living facilities and senior communities across the state. The Maryland Department of Aging used their strong relationships with local ADRCs to organize efforts to address the needs of those in the community. Through this initiative, MedStar has delivered vaccines to more than 7,000 Marylanders ages 65 years and older.

Oregon Wellness Network (OWN), part of the Oregon ADRC network, plans to develop a coordinated process to address vaccine hesitancy and social isolation. Their goal is to target persons in the healthcare system or enrolled in a health insurance plan that are vaccine hesitant or require assistance to overcome vaccine access barriers.

### *Housing/Supportive Services*

ADRCs partner with many of the community-based organizations providing services to Housing and Urban Development (HUD)-assisted housing programs including AAAs, CILs, and home health agencies. In Vermont, the [Support and Services at Home \(SASH®\) program](#) (statewide housing and supportive services program) acted quickly to respond to the COVID-19 pandemic. SASH teams, comprised of staff from the housing sites, the AAAs (key members of the state's ADRC), Community Mental Health, and Community Health Teams actively engaged in the state's COVID-19 vaccination plan by collaborating with local pharmacies to have SASH affordable housing communities serve as COVID-19 vaccination sites.

ADRCs can partner with housing providers to provide vaccination outreach, education, registration, and scheduling for residents; assist residents with transportation to vaccine locations; and partner with housing sites. The Secretaries of the Departments Health and Human Services and HUD issued a [joint letter](#) encouraging ADRCs/AAAs and CILs to partner with housing to promoting vaccine access "to ensure that the national response to COVID-19 delivers equitable, comprehensive care to those experiencing disproportionate impact, including HUD-assisted individuals and households."



### *Kinship Care Organizations*

Kinship care, care of children by relatives when parents cannot care for them, [impacts over 2.65 million children](#). As of 2019, there was [an estimated 2.79 million children under age 18 living with a grandparent](#). Of those, over one million are over the age of 60, with approximately 30 percent living with a disability, placing them at higher risk of COVID-19 exposure and complications. Relatives caring for children are more likely to live below the poverty level, receiving little additional financial assistance.

During the pandemic, grandparents, particularly grandparents with chronic conditions and disabilities, faced additional challenges with stay-at-home school and day care responsibilities while balancing the social, familial, and community connectedness.

While there are a few ADRCs (e.g., GA, OR, VT, WA, WI), that serve as, partner with, or link to [Kinship Navigator](#) programs, opportunity exists for ADRCs to consider partnership with local kinship care organizations as well as child welfare organizations in support of grandparents' needs for additional assistance during the pandemic. This also includes supporting children's needs for food and health security and any unexpected child care needs should a child's kinship parent contract COVID-19 and require additional health and supportive services.

*“Partnerships that are established as part of this vaccine access funding opportunity might be lasting partnerships for future work.”*

### *Meal Delivery Organizations*

[Meals on Wheels](#) partnered with the Colorado Health Department to bring the COVID-19 vaccine to people receiving Meals on Wheels in the south metro Denver area. Volunteers, accompanied by a health care professional, administered the vaccine.

### *State Assistive Technology Programs*

Approximately over half of ADRCs have a formal partnership with their state AT program. Much of the collaboration includes partnering to promote [social connectedness](#). Some ADRCs plan to use vaccine funding to support technology such as tablets and hot spot distribution by partnering with their state AT programs. Be sure to check out the [ADRC/AT Partnership Checklist](#).

### *State Labor and Workforce Development Agency*

State workforce development agencies address employment and labor issues. Intersection with ADRCs could occur in a variety of areas from direct service workforce to supportive and competitive employment for older workers or workers with disabilities. In California, [the health and human services agency partnered with their state workforce agency](#) to encourage vaccination of minority groups. ADRCs could reach out to state workforce agencies to explore potential partnerships on vaccine outreach, which may then lead to other alliances.

### *State Medicaid Agency*

The state Medicaid agency is a critical ADRC partner in streamlining access to LTSS. [ADRCs in Georgia](#) partnered with Medicaid to reach out directly to Medicaid HCBS recipients and their caregivers to book vaccine appointments, answer questions, and facilitate transportation. If the ADRC does not have a strong or formal relationship with Medicaid, offering this type of vaccine outreach support may be a place to start.



### *State Transportation Agency*

The [Delaware ADRC partnered with DART Paratransit](#) (part of the Delaware Department of Transportation) and an independent pharmacy to offer transportation to vaccination appointments. Paratransit reached out to individuals on their roster who had not used services within the past six months. The ADRC then targeted the individuals on that list who were in counties hit hardest by COVID-19 surges and, through the pharmacy, offered to administer the vaccine in the person's home. Nursing students from the University of Delaware were recruited to monitor individuals who received the vaccine for the 15-minute observation period.

[ADRCs in Pennsylvania](#) are providing free transportation to get vaccines. The rides are courtesy of regional public transportation provider rabbittransit, in partnership with local ADRC offices across several counties in the south-central Pennsylvania region. While free shuttle service is coordinated through the ADRCs, the service is offered to anyone, not just seniors, who has scheduled an appointment to receive the vaccine and are in need of transportation. [Idaho Area V Agency on Aging](#) and Wisconsin ADRCs of [Brown County](#) and [Wolf River Region](#) are providing similar services by partnering with state and local transportation agencies.

### *University Centers for Excellence in Developmental Disabilities (UCEDDs)*

UCEDDs serve as liaisons between academia and the community. They represent an expansive national resource for addressing issues, finding solutions, and advancing research related to the needs of individuals with I/DD and their families. Some ADRCs have strong alliances with UCEDDs, which assist in vaccine education, coordination, and outreach to older adults and people with disabilities.

The University of Nebraska Medical Center's Munroe-Meyer Institute partnered with local aging and disability organizations and both the county and state departments of health to increase vaccine delivery to individuals with I/DD across the state. Through this initiative, I/DD-specific vaccination clinics were built and over 2,000 vaccines administered to individuals with disabilities.

The University of Missouri Kansas City's Institute for Human Development (UMKC), the lead agency for Missouri's ADRC COVID grantee funding, is serving as a connector, bringing various groups together to coordinate vaccine outreach. Additionally, UMKC creates and circulates a number of resources aimed at increasing vaccine education and comfort among people with disabilities in plain language and in American Sign Language.

### *Veterans Administration (VA)*

As noted in a [2017 AARP Public Policy Institute publication](#) on ADRC and VA promising practice partnerships, ADRCs and VA continue to partner in serving mutual populations including Veterans, their caregivers, and families.

Through a myriad of VA-funded programs, ADRCs play a key role in connecting with Veterans, caregivers, and families. Most notably, the [Veteran Directed Care](#) (VDC) program contracts with ADRCs, CILs, and AAAs to provide administrative, assessment, care coordination, and fiscal support to the VA and enrolled Veterans and families. ADRCs are an important connection to Veterans and their families and serve as educators, resources, and facilitators of vaccine outreach and education.

ADRCs, AAAs, and CILs under contract as VDC providers should partner with their local VA to identify how they may expand their roles as vaccine outreach conduits, supporting the VA in messaging to



Veterans, caregivers, and families about the importance of vaccines and how to go about accessing vaccinations. Many VA facilities and clinics now offer vaccines to [eligible populations](#). ADRCs should reach out to their local VA facilities and clinics to determine who serves as a vaccine site to expand their ability to provide timely vaccine-related information.