Vaccinations for Often Forgotten Homebound Adults

COVID-19 has shined a bright light on many health inequities plaguing Los Angeles County, and an often silent and forgotten group is now in that spotlight: those who are eligible but cannot access COVID-19 vaccinations because they are homebound. The CDC defines homebound people as, “those that need the help of another person or medical equipment such as crutches, a walker, or a wheelchair to leave their home, or their medical provider believes that their health or illness could get worse if they leave their home, and they typically do not leave their home.”

These residents often suffer from disabilities that significantly increase their risk of death and severe disease from COVID-19 infection. Many of them are also seniors, whose death rates are up to 100 times that of their younger counterparts should they become infected. Now that vaccine supplies are increasing and becoming easier to store and administer, and vaccine eligibility has expanded to include all seniors, as well as those with severe underlying conditions and disabilities, Los Angeles County must find a way
to bring the COVID-19 vaccines directly to this population of vulnerable homebound residents.

Rates of homebound adults are estimated to be 5-6% across the United States, which would equate to over half a million people in Los Angeles County, but there is a paucity of data on actual numbers. We do know that in Los Angeles County, over 220,000 people receive in home support services, or IHSS, and 55,000 homebound seniors received free meals delivered to their homes via Meals on Wheels and similar programs. These represent only a portion of those who are home-bound, as there are many who do not participate in IHSS. This also demonstrates the lack of resources faced by many homebound seniors who must rely on free meal delivery services for survival. The paucity of data on the number of homebound seniors in Los Angeles County highlights one of the major barriers faced by this population: it is nearly impossible to offer appropriate services to a group that may have difficulty advocating for themselves and whose true population size is not known. When these services include access to a lifesaving vaccine, we must take proactive steps toward creating programs to meet these homebound adults where they live and bring vaccines to them. This is about accessibility and ensuring that we leverage our resources and networks to reach a population that has been cast aside for too long. Their lives depend on it.

I, THEREFORE, MOVE that the Board of Supervisors to:

1. Instruct the Department of Public Health, in collaboration with Workforce Development, Aging and Community Services, the Department of Public Social Services, the Personal Assistance Services Council, Department of Health
Services, Department of Mental Health, Fire Department and other relevant County departments, to assess the COVID-19 vaccine needs of homebound individuals, prioritizing seniors, and develop a strategy with health plans and other partners to provide COVID-19 vaccinations to homebound individuals, and report back in 21 days. The report back should include:

a. Special consideration for those who are IHSS participants, those who receive home-delivered meals through programs, like Meals on Wheels, and WDACS meal delivery program, those who receive services directly in their homes, and any other homebound populations.

b. Distribution of relevant COVID-19 informational materials in multiple languages and accessible formats.

c. Increased utilization of promotores and other community health workers.

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