

January 28th, 2021

Erica Pan, MD, MPH, State Epidemiologist, Co-Chair
Community Vaccine Advisory Committee
California Department of Public Health
1616 Capitol Avenue
Sacramento, CA 95814

Nadine Burke Harris, MD, MPH, California Surgeon General, Co-Chair
Community Vaccine Advisory Committee
California Health and Human Services Agency
1600 Ninth Street, Room 460
Sacramento, CA 95814

Dear Drs. Pan and Burke Harris,

I am writing to urge the State of California, in partnership with local public health departments, to confer with child care resource and referral agencies (R&Rs) in each county to assist with the planning of disbursement of COVID-19 vaccinations to California's child care workforce. While some counties have entered Phase 1B, Tier 1B and opened up vaccination to child care providers, the process of making an appointment, as well as the appointment times available, make it nearly impossible for providers to schedule and attend a vaccination appointment. We are also aware that verification of providers can be hard to know if you are unfamiliar with this field.

Child care providers, also essential workers, have remained open throughout the pandemic, putting themselves and their families at risk of COVID-19 infection. In fact, many have become ill, and some have died. Nonetheless, they provide the care that other frontline essential workers so desperately need, as well as other workers as more businesses have been allowed to operate.

Child care providers are overwhelmingly women of color who earn low wages. Home based providers in particular, provide care that is available during non-traditional hours, including nights and weekends, allowing medical and other frontline professionals to leave their children with the provider they know and trust. However, vaccination clinics tend to only operate during traditional working hours, and communication with this population can be challenging. California needs to be intentional in providing vaccinations during the times the child care workforce is available.

Child care resource and referral agencies have time and again proven themselves to be essential partners in responding to disasters. In this pandemic, they were extremely effective in distributing \$50 million worth of cleaning supplies, PPE and stipends to child care providers.

They are deeply rooted in their communities, affording them the privilege of being trusted messengers to a diverse community of child care providers, which is also important to combat vaccine hesitancy. Furthermore:

- A child care infrastructure exists across the state with key local partner agencies that are important coordinating and community points of contact in each county. Vaccine administrators in each county should tap the expertise of their county R&Rs, First 5 Commission, and Local Child Care Planning Council. These local level entities are also connected across the state agencies, and have direct relationships with state departments (ex. DSS child care licensing, and the Department of Education, First 5 CA Commission), child care unions and other associations to help reach individual providers.
- R&Rs have a direct relationship with the state Child Care Licensing Division so they have the contact information for each licensed provider (Family Child Care Home or center based) in their county/assigned area, making it easier to verify who is a child care provider. They can communicate with Centers that can help identify staff working or who will return to work. This contact with providers can help DPH and local partners conduct outreach, help in planning for ideal administration strategies to reach child care providers, track interest in the vaccine, and possible assistance to follow up with the second dose as necessary.
- R&Rs work with child care payment programs that are in contact with providers caring for children, including school age license exempt centers, who are legally exempt from licensing as they receive public child care subsidy funds. First 5s support family resource centers that also have contact with license exempt providers who have direct contact with families, and R&Rs have contact with nanny agencies (from Trustline, background check program), and organized camps.
- R&Rs have a regular communication mechanism to reach providers (to update where child care spots exist). R&Rs are a provider's trusted messenger, whom they look to for resources such as training and information. Trust is important to encourage people to become vaccinated.

In short, R&Rs can help local DPH identify and plan for successful scheduling, mobilizing and organizing to make it easy for providers to be vaccinated en masse. By including R&Rs in vaccine distribution plans, each county can have a clearer understanding of how to best use the

existing community system to mobilize this sector of essential workers. R&R staff can be key in identifying the best time and locations of vaccine distribution for providers, and help get that vital information out to the community. Because they have accurate contact data on which providers are currently available to care for children, they can also help prioritize by geography, and notify each and every provider, and encourage them to take the vaccine.

To borrow words from Governor Newsom, California's R&Rs are ready to meet the moment. Please utilize them to more quickly and effectively distribute vaccines to our child care workforce.

In Partnership,

A handwritten signature in black ink, appearing to read "Linda Asato". The signature is fluid and cursive, with the first name being more prominent.

Linda Asato
Executive Director

Cc: Giannina Perez, Office of the Governor
Kris Perry, California Health and Human Services Agency
Maricela Rodrigues, Office of the Governor
Marcela Ruiz, California Department of Social Services
Melissa Stafford Jones, First 5 Association
Emilio Vaca, California Department of Social Services