

ACF and CDC Early Childhood Vaccine Priority Stakeholder Webinar

Katie Hamm: Hello, and welcome. Good afternoon to all of you who are joining us from the east coast. Good morning to those of you on the west coast and Hawaii and Alaska. It's a pleasure to be with you today. My name is Katie Hamm, and I am the Acting Deputy Assistant Secretary for Early Childhood Development. I'm excited to welcome you to our ACF and CDC webinar. I am joining you today from Washington DC. And the traditional lands of the Nacotchtank, Anacostan, and Piscataway people.

Now, throughout the webinar today, we invite all of you to put your questions in the Q&A box. Please be sure to put them in the Q&A box so that we see them and can get to those questions later in our webinar today.

So, today we are just about at the one-year mark of when our lives changed suddenly due to the COVID 19 pandemic. Early educators across this country in child care centers, family child care, homes, Head Start, Early Head Start, preschool programs have been on the frontline of this pandemic for almost the entirety of that year. While other businesses and services closed, many of you remained open to care for the children of the essential workers and those parents who were called back to work. You have risked your own health and safety to care for our country's children, too often for low wages that do not reflect the importance of your work or the skills that you bring to caring for children.

I want to say thank you to each and every early educator listening today, and I want to say thank you to the staff of the organizations across the country that have supported our country's early educators and advocated on their behalf. We are thrilled that Congress has passed and the president has signed the American Rescue Plan, which will provide much needed resources to Head Start and child care.

In the coming weeks, you'll be hearing more from us about those funds, and we know that they are urgently needed. We are committing to deploying those resources as soon as possible to get them to child care providers, Head Start and Early Head Start programs, and parents. We are also committed to the health and safety of the early childhood field, and that is why President Biden announced that early educators, including staff at child care centers, family child care homes. Early Head Start and Head Start will receive priority for the COVID 19 vaccine. And the directive also includes teachers in pre-K-to-12 settings, as well as those educators who are working with our unaccompanied children and programs.

So, today you're going to hear more about the vaccine and how early educators can access this at retail pharmacy locations across the country as well as through their states. Where there are vaccines available at multiple locations. In order for child care and early education programs to continue to operate or to reopen safely and quickly, we want to talk about how we can kind of get you those vaccines as soon as possible. And so, we're asking you to help get the word out to everyone working in these settings. That's not just the folks who are working directly with children in a classroom or in a family child care home, but also the staff that support that. And

we want to make sure that this availability and message reaches everyone, especially those who have been disproportionately impacted by the pandemic. And so, that includes those groups and those programs that include a lot of our Black and Latina and Tribal communities, who have been disproportionately affected. And we want to make sure that we do outreach and support to get to the diversity of child care providers across the country.

I am also really excited to be here today with Dr. Bernadine Futrell, who is the Director of the Office of Head Start. We both started just a few weeks ago and she comes to the Administration for Children and Families bringing significant personal experience with Head Start. She joined us from the National Head Start Association, where she was the Senior Director for Effective Practice. And prior to her time at the National Head Start Association, Dr. Futrell led superintendent certification programs at the American Association of School Administrators. So, we're lucky to have her in this effort. And I want to turn it over to Dr. Futrell to say a few words of welcome.

Dr. Bernadine Futrell: Thank you, Katie, and hello everyone. I'm Dr. Bernadine Futrell. I am the Director of the Office of Head Start. I am honored to be here with you today, and I am so thankful for this moment to be with you all and to lead the Office of Head Start. On the line, we also have Dr. Marco Beltran and Kate Troy, who are our co-leads for the Office of Head Start for the COVID-19 response team. Last year, the lights went out, and you have been navigating a way out since then. I know the Head Start community and the child care community is strong and resilient. I have seen it firsthand as a child enrolled in Head Start. I've been a part of it as an assistant teacher in a Head Start program. And I've learned so much from this community during my career and most recently my work at the National Head Start Association. So, when I say to you, thank you. I want you to know that I'm saying thank you to you, to Head Start, for saving my life. And thank you to each of you for the work that you do every day as Head Start and public health leaders in your community.

Today, our community is at a point of significant impact. With the promising news that we will talk about today with our colleagues from the CDC and the great news from yesterday's signing of the American Rescue Plan from President Biden. We know that we are on a path to building back better and stronger. The vaccine and these relief funds are key components to an overall catalyst. To get us all back better and stronger in unity and love. I am so grateful to see so many of you on the line today and grateful to the health and human services colleagues, including our ACF family, the CDC, the Office of Child Care and the Office of Head Start. Thank you, Katie.

Katie: Thank you so much, Dr. Futrell. Also here today is Dr. Ellen Wheatley, the Acting Director of the Office of Child Care, and you'll have a chance to hear from her a little bit later about how the Office of Child Care is supporting these efforts. For today's webinar, our primary goal is to share information about the CDC's retail pharmacy program and how that program is working to support vaccine priority for teachers and early educators.

The CDC has also developed a vaccine toolkit for outreach to schools and child care programs. And we are asking everyone to use the hashtags #sleeveupforchildcare and #sleeveupforheadstart to encourage your community, your program staff, and your colleagues

and peers to get vaccinated. And you can check out those hashtags in the chat box so that you have them. And we encourage you to post on social media – on Facebook, on Twitter, on Instagram – throughout this presentation and share your thoughts. There will also be time later in the discussion for Q&A, so just remember to use that Q&A function throughout the presentation, get your questions in, and we will answer them. If we don't get to all of them today, we will make sure to get you answers.

So, I am pleased. This has been a great partnership between the CDC and ACF as we reach out to the early childhood community and share this incredible resource and information. So, I'm really excited that we have two of those experts and partners from the CDC today. And I am going to turn it over to Kathleen Ethier, the Director of CDC's Division of Adolescent and School Health and the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB prevention, and Anita Patel, the Senior Advisor for Pandemic Preparedness and Response at the Centers for Disease Control and Prevention. So, Kathleen and Anita, I will turn it over to you.

Dr. Kathleen Ethier: Thank you so much for having us, and I just also want to just thank all of our ACF colleagues. This is ... It's been a whirlwind of a week, and it's hard to believe it's only been a week, but we've just enjoyed so much getting to know all of you getting to know your partners and really treasure this opportunity to speak with everyone who's here today.

As Katie mentioned, my day job is as the director of the division of adolescent and school health here at CDC. But for the month of March, for a very good reason, I am the lead of the teacher school staff and child care workers vaccination program and the vaccine task force for the COVID-19 response. Next slide, please.

So, I want to tell you a little bit about about how we are working with this program, what we're trying to do, and then I'm going to turn it over to Anita Patel my colleague, who's going to share more about the federal retail pharmacy program.

As most of you know, last Tuesday, President Biden announced that he was directing all states to open their eligibility for COVID a vaccine to, teachers, school staff and child care workers ... and that also we would be prioritizing the unavailable appointments in the federal retail pharmacy program – which we're going to talk some more about – to these groups.

And so, we came together at the beginning of last week to really work toward helping along kind of two lines. One, to help those people who want a vaccine – who are vaccine ready – to find available vaccine, and then to also build vaccine confidence among those who might be hesitant or resistant to getting a vaccine. And we're doing that in a variety of different ways. One is to do what we just mentioned, which is to work with our ACF colleagues and all of their partners to get the word out, but also to hear back about the tools and resources that you might need and also barriers that you're facing and that your members are facing on the ground. And so, to enable us to do that, we've developed a whole suite of communication tools, which we'll talk a little bit about today, that we've made available so that we can ask you to help us get the word out about this program.

The other thing that we're trying to do is to understand whether or not we're being effective. So, we're looking for all of the ways in which we can get a sense of whether or not the folks on the ground are really being able to access vaccines. Next slide, please.

So, when we think about how to move people toward being ready to be vaccinated into increase – as you see on the right-hand slide, the demand – we really work toward addressing issues, building trust, trying to build that confidence so that we can move people from the refusal side all the way over to the demand side. And that's what we're going to be spending a lot of time doing this month. Next slide, please.

This is just some examples of some of the communication tools that we've developed and made available. Rebecca Polinsky will be putting links to those tools in the chat. And all of this is here to help you help others get the word out and provide information about the safety and the efficacy of the vaccine, to highlight the importance of being vaccinated, and to hopefully answer questions about how to get appointments. Next slide, please.

So, here's what we're asking of all of you. One, get vaccinated. And if you need additional questions answered, please feel free to reach out. Communicate with ... If you're the head of an organization or you work within an organization, help communicate to your members and constituents through all of the regular channels that you do and using the information that we have available. So, promoting and sharing those resources is really, incredibly important. And then doing as much of that on social media – as we mentioned – as possible. So, we're using the hashtag #sleeveupforchildcare, #sleeveupforheadstart. You can use the word for or the No. 4, whatever works for you. Just really getting the word out is incredibly important. Next slide, please.

So, I'm going to stop there. I'm going to hand it over to Anita, who's going to share with you more information about the federal retail pharmacy program and ways in which you can help folks, utilize that program to get vaccinated. Thank you so much for having me, and I'll hand it over to Anita.

Dr. Anita Patel: Thank you so much. So, we are really excited that the federal retail pharmacy program will be supporting this initiative, but we think it's super important and are really excited to get this work going.

So, a little bit about the federal pharmacy program. The retail program has brought on board 21 national partners and network administrators. So, this includes large chain pharmacies as well as some of the smaller ones across the country. Altogether, we have 40,000 store locations that are part of the network, and we have over 10,000 that are activated already, and that number will continue to grow as supply increases.

[Crosstalk]

We do have an incremental rollout for the vaccine program across jurisdictions that are working very closely with our state partners to turn on stores and outlets as supply continues to

increase. Our network capabilities include a retail pharmacy setting, which I think most people are familiar with, but we also have offsite mobile support that the partners are willing to do. And they're definitely willing to do this as part of our initiative to reach more education workers.

The pharmacy for our program, as I mentioned, has 21 partners. Three of them are actually focused on a different initiative around long-term care facilities, which leaves us with 18 really strong network partners to really help with this initiative.

So, if you, if you take a look at this list, I'm sure you'll find a pharmacy partner that you're used to going to see right now, the pharmacy network is spread out to be about a 15-mile radius of at least 80% of the population. And as I mentioned, we'll continue to turn on stores as the weeks progress. As we've been talking about today, the initiative that the president has introduced to really prioritize reaching, our education workforce, we've allowed for the pharmacy partners to take initial and additional initiatives to prioritize further being able to schedule individual state increased access to vaccines.

So, how are they going to do this? The 21 partners have different ways, obviously, of screening and scheduling. What we've asked them all to do is to prioritize any unbooked vaccinations slots for teachers, school staff, and child care workers. The pharmacies are encouraged to honor all existing appointments, so we're not trying to derail anybody who's already made a first-dose appointment or who's requiring a second dose. But we are looking to prioritize teachers, school staff, and child care workers with any new appointments. In addition to that, screeners and schedules have been updated and we'll walk through some of that. So, you can be familiar with how this looks in operations. And lastly, they're also reaching out to do additional efforts for pop-up clinics working closely with schools within their communities.

To make it a little bit easier, USG has launched the Vaccine Finder tool. Our Vaccine Finder website is used for normal routine vaccinations, and CDC has worked to update this to really be focused on COVID vaccines. Sorry.

And so, to be focused on COVID vaccines, if you go to www.vaccinefinder.org, you'll be able to reach Vaccine Finder, be able to navigate the experience to help find vaccines. You can choose the vaccine that you're looking for, enter your zip code and the radius that you want to search for. And then, what will happen is a site that's near you will pop up to show if there's vaccine in stock in order for you to be able to make an appointment. When you click on the box that pops up right now, what happens is it will lead you to another screen where you can actually go to check appointment availability. This is one of the ways that you can find vaccines that may be available near you, and we're trying to make this a one-stop shop. In addition to this, we've also taken steps with all of our pharmacy partners, so be sure that when you go to their websites that you're able to know where to go and what to do next.

An example of this is here. It's I think many folks are familiar with CVS. CVS has on their website an area where you can go to find COVID-19 vaccines. As you look for your state and you click on that state you'll note if appointments are available, and these change on a daily basis. When

you go to make an appointment, they'll ask you if you're starting vaccination or if you're receiving a second dose. Either way as an educator, you'll be prioritized for a vaccine.

So, as we go through the steps, all of the pharmacy partners are asking for their screening criteria, many have stated the general group of education workers, but they've also included other priority groups based on what state eligibility criteria is. As you click through and once you confirm eligibility, you'll be able to schedule an actual appointment.

So, again, don't get discouraged. If you go online and find that all the schedulers are full, the scheduling slots will increase as vaccine continues to increase. And in addition to that, the schedulers are updated on a daily basis to add a day, so it's about figuring out what time some of the partners update we're working to get that information a little bit more transparent.

In addition to that, I mentioned that the pharmacy partners are partnering right up with schools within their communities and school districts. We've got, just this week, of efforts underway, and here you'll see our Walgreens effort by Meijer, who's a regional partner in the Michigan area and Ohio area. And also, Albertson is on the bottom right-hand side here. These partners have already committed and are conducting clinics along with either the jurisdiction, so their state or local partner or in addition to that, with schools themselves. So, lots of efforts underway and you'll continue to see that grow.

This has been the first week partners had to be able to have plans in place starting on Monday, so this will also continue to scale up. There's also all the other state level initiatives that are underway with the pharmacy partners. So, for example, Pennsylvania is working closely with the pharmacy partners that are part of the federal retail network to have closed vaccination sites offered to teachers and child care workers. So, lots of great efforts underway, and we're hoping that this will continue to grow as the weeks progressed.

And that's it for my end. Thank you.

Katie: Thank you so much. That was really, really helpful. I am now going to turn it over to Dr. Ellen Wheatley, who is going to talk about some of the work that the Office of Child Care is doing on this initiative.

Dr. Ellen Wheatley: Thank you, Katie. We are very busy in the Office of Child Care, and we're working with the Office of Early Childhood Development and Head Start as well as CDC on the #sleeveupforchildcare hashtag and the logo. Childcare.org includes vaccine information per state for the state-run vaccine program, and vaccinefinder.org of course has the opportunity to find the retail pharmacy options. We're helping our grantees and stakeholders to understand the difference between the state and federal retail pharmacy opportunities. For example, in some states, you have to bring a proof of employment to your state-run vaccine center, but that's not true for the retail pharmacy program. March 9th – that was just Monday – we had a webinar for state territory and tribal child care grantees and to learn about state priorities and the federal retail plan. And the OCC announcements that we have sent out about the vaccine opportunities reaches over 7,000 federal state and local stakeholders and providers.

The states can provide funding to providers directly for help for their staff for transportation to a vaccine center or retail pharmacy and for the time off that they may need in order to reach an appointment. In addition, they also can use that funding for a substitute while regular staff is getting a vaccine. We continue to work with, our grantees on a variety of options. Our Regional Offices are working directly with the states, territories, and tribes. If you have any questions about what is available, childcare.org has a lot of information, and I have posted in the chat the link to where the provider information is. And then you can explore childcare.gov for family information, and there are many other training opportunities there as well.

So, I want everyone to know that we will keep working on this and supporting vaccination for all child care providers. I am pleased now to turn this back over to Dr. Bernadine Futrell.

Dr. Futrell: Thank you. Thank you, Ellen, so much. And I want to thank our colleagues for sharing the great information, and Kate, thank you for your leadership and bringing us all together. We are very ... It's very promising to hear that information. I just wanted to share just briefly some of the things specific – excuse me – for the Head Start community as we think about kind of sharing this information that you've heard today, and then also providing support. We are committed, from the Office of Head Start to provide the Head Start community with information that will empower a Head Start to get access to the vaccine.

Bottom line, this is a game changer, and we want to get the good information out in the community, and we're asking you to spread the word. Top line, all three vaccines are safe and effective at preventing COVID-19 and reducing the risk of serious illnesses if you do contract the virus. So, I think that is huge breakthrough and huge news that we should be very excited and hopeful about.

So, you might be asking, what could I do Outside of getting myself vaccinated. So, what you can do the opposite of Head Start is encouraging, our grantees that you could do the following. You could offer paid time off for other paid leave for time spent receiving the vaccine. You can offer sick leave or paid leave if you have a staff member who's experiencing side effects, post the vaccine. You might think about using transportation assistance to transport to different vaccination locations, maybe temporary coverage to allow absence from the workplace. You're also reminded specifically for Head Start grantees that with written policies and adequate documentations, expenses necessary to support staff receiving the vaccines are allowable costs to your base grants, CARES Act, and the CRRSAA funds.

I do see a few questions for the Office of Head Start here. I do want to just lift up that we are going to have a webinar on Wednesday, March 17th at 2:00 p.m. where we will kind of follow this conversation. So, I have a little bit of a tabletop conversation specifically with the Head Start community around the importance of the federal retail pharmacy program to describe, in more detail, some of the actions that programs can take to support Head Start in obtaining their vaccines.

I do see one question that's coming a lot, so I'm going to just address it here. We'll talk more about it next week, but the federal government ... This is about requiring the vaccines for Head

Start. Specifically, the federal government does not require vaccinations for individuals. The decision has always remained with the program- and community-specific decision, applicable to your state law.

So, programs will consider or should consider, rather, guidance from the CDC, guidance from the Occupational Health and Safety Administration, as well as state and local guidance and making that decision. With that, Katie, I'm going to turn it back over to you because I know there are a lot of questions that people are eager to hear from our great colleagues at CDC. Thank you.

Katie: Great. Thank you so much, Dr. Futrell and Dr. Wheatley. We are going to move into our Q&A now. We have a lot of questions about who exactly is eligible under this directive. And I want to just kind of start with that question since so many of you have asked it. So, the HHS directive applies to family child care homes, child care centers, unaccompanied children facilities, and Head Start and Early Head Start along with Pre-K to 12th grade teachers. And it includes not just the staff who work directly with children as teachers, as early educators, but it also includes the staff who work in those programs. So, if you are driving a bus, providing transportation, you are included. If you are a food preparation or janitorial or sanitation staff, you are included.

We, at the federal government at ACF and the CDC, are not going to be able to anticipate every employee, employer relationship that might exist in your programs and in family child care homes. Sometimes, you have contractors, you have volunteers, you have different kinds of relationships, and we're not going to be able to spell that out. We're asking that you use your best judgment and figuring out within the directive if your staff and if the people that you work with are eligible.

Our goal is to make sure that the early childhood community can become vaccinated under this priority. So, as Dr. Wheatley said, there isn't a requirement that you show proof of employment because we know that there are sometimes family child care providers who might not have proof of employment or a badge that says that they're a family child care provider.

So, we do not want to put up those barriers that would stand between our early educators and getting vaccinated. We want you to get vaccinated. Eventually, we want everyone to get vaccinated, but we especially want school staff and early educators and the early childhood community to be vaccinated. So, with that, I am going to turn some questions to our colleagues at the CDC.

Our first question is around cost. So, when people go to get a vaccine, if they don't have health insurance, will they be expected to pay for these vaccines or will they need anything regarding health insurance?

Dr. Patel: So, I'll take that one. It's Anita. So, there is no cost associated with the vaccines to the individual. So, if you have health insurance, we do ask that you present your health insurance information that will ensure that the administration fee that the pharmacies are allowed to cost

allowed to charge is covered by insurance. If it's not, the pharmacies will bill that administration fee to an additional program, so there'd be no cost to the individual.

Katie: Great. Thank you so much. We also have a question about proof needed. As I said earlier, it is self-attestation, but we have someone who's asked for a code at one of the clinics, and we're wondering if there is or should be any code required for early educators.

Dr. Patel: There should not be any codes required. If the clinic is done in collaboration with the state, the state may have a different structure in place that may require additional pieces. So, the pharmacy retail program versus a state program is likely where that variable is.

Katie: Great. And I think that's an important point. There are two pieces of this. There are vaccines provided through states and states are asked to prioritize early educators broadly, but they might also have other priority categories, and the retail pharmacy program is vaccines that have been provided directly to these pharmacies. And they're being asked to prioritize early educators with those vaccines, so that's an important distinction, although I can see why it might be somewhat confusing to folks who are looking to get an appointment. And on that point, we have a few questions that have come through on availability – folks finding that they look in their area and all those appointments are full. So, what would you recommend to them? And do you have any sense of what they could expect in the coming weeks?

Dr. Patel: Sure. So, we are still in a situation where supply is limited. So, we're not able to have appointments for everybody who wants them just yet, and the supply, as I mentioned, there's just only so much vaccine. So, there will be a scarcity of resource. There is just to level set expectations. You may not get an appointment on your first try. We do encourage everybody to keep trying. Appointments will continue to be added as additional supply becomes available.

Katie: Great.

Dr. Patel: I would also say, definitely check your pharmacy of choice website on a daily basis, likely the morning is going to be better or really late at night. And so, as appointments are added or subsequent days, what the pharmacies are doing is a rolling schedule. So, they add a day every day onto the end of their actual schedules. So, there's a few tricks there, which hopefully folks will begin to figure out as they get onto the scheduling tools.

Dr. Ethier: One thing too This is Kathleen. One thing to add is that we are very focused for the month of March on early educators and child care staff. But an important part of the directive was to open up the state program and to make folks broadly eligible through those state programs as well as the pharmacy program.

Although we won't be prioritizing appointments after March, the increase in eligibility will stay. So, we're making a real push in the month of March to get as many people their first shot as possible, but once the eligibility has changed, it stays open. So, I think to Anita's point, if you

don't get an appointment on your first try, please do keep trying because, because you are now eligible.

Katie: Thanks so much. We have a couple of questions just about the ID needed. So, do you need to show a social security number or a driver's license in order to be eligible? And do you have to reside in the state where you're getting the vaccine?

Dr. Patel: So, for the first question in regarding ID, you do not have to show ID. You may be asked for it in some situations by state-law-related items, but you actually don't have to show it itself. So, there's a nuance where the pharmacist may have to ask for it, but if you say I don't have it, that additional piece of identification is not needed. You also don't need to disclose where you work. That is not part of the retail pharmacy program. In some of this, some of the screeners may request it. It's more to ensure that those who are not educators that are trying to get into the program are a little bit more discouraged, so just want to make sure that that's clear too. And then lastly, in terms of ... What was the last question? Sorry.

Katie: I think you hit it. It was about state residency and ID.

Dr. Patel: The one thing with residency. So, we do encourage people to get vaccinated in the state that they're in the allocations of vaccine and how we provide vaccine. Cause again, we don't have ample supply right now. It is state-based, but we also recognize that people live their borders to another state, maybe just next door to you. So, to the extent possible, we do recommend that you stay in your state, but that is not a requirement for the program.

Katie: We also have a question about whether retail pharmacy locations are available in the U.S. Virgin Islands. Could you speak to availability of retail pharmacy locations in the territories and the tribes?

Dr. Patel: Sure, so on the tribal nations, we have activated stores and we'll continue to activate stores as supply increases. And for our Pacific islands in the territories, we've also activated stores. It's much more limited just because of the way the pharmacy networks are designed within those areas.

Katie: Great, and we have a couple of questions just about who should get the vaccine. So, one question is, is the vaccine safe for pregnant women? And there was also a question about if you already have had COVID-19, should you still get the vaccine? Kathleen, we might have lost Dr. Patel. So, I don't know if you might be able to answer that. And you're on mute, Kathleen.

Dr. Ethier: Got it. Sorry. I can try. I would actually go for any of the questions about safety and efficacy and for specific populations, I actually would refer you back to our website because I think there is more information there than I think I can present right now.

And so, I think that's probably the best place to get that information. And so, if you were pregnant and trying to decide whether or not to get vaccinated, please look there for the most up-to-date information. And Katie, I'm sorry, what was the second part of the question?

Katie: If you've had COVID-19 already, should you get the vaccine?

Dr. Ethier: Yes, we are recommending that people who have had COVID-19 also get the vaccine.

Dr. Patel: And I'm sorry. It's Anita. One additional thing to add to the pregnancy question. Also, if you do decide to get the vaccine and your pregnant, we do encourage you to participate in V-safe. So, V-safe is a vaccine safety monitoring program. That's a survey-based program, so we definitely would encourage you to enroll in that if you do make the decision to get vaccinated.

Katie: Great. Thank you. And we have another question just related to the vaccine itself. If people have allergies, where should be looking to get a list of ingredients that are included in the vaccine so they can determine if it's safe for them?

Dr. Patel: So, there's additional information on the CDC website, specifically around anaphylaxis and allergic reactions to the vaccines. They do vary, and the components of the vaccine are listed for the items that we want to make sure that people are aware of before they get vaccinated. And we can share those links out with you as well.

Katie: Thank you. Another question is around the Vaccine Finder website. One user said that there were only a few states listed on the website, and they were just a little confused about how to find their states. So, do you mind clearing that up, Dr. Patel?

Dr. Patel: Sure, absolutely. So, a couple of things. Vaccine Finder is a new website. We launched it about two and a half weeks ago. We partnered with eight jurisdictions as part of the launch and the week after to really input all of their data and all of their provider locations sites. So, what you see there when you first entered the website, that it states that these eight jurisdictions are reporting into Vaccine Finder, that's an addition to the entire federal retail pharmacy program.

So, we are going to continue to build the other provider locations that are state run, but the entire retail program that we'll have vaccine as part of the federal retail pharmacy program, that entire network is populated and is showing across all states.

Katie: Thank you. we have a couple other questions about who is eligible. We have a question about if administrative staff in early childhood programs are eligible. And yes, anyone who is an employee of the child care center, the family child care home, the Head Start Early Head Start program is included in this directive.

And there was also a question about if states can include other categories. The example was doulas or other people who work with children and families. And states can be more inclusive, but we're talking about the kind of federal retail pharmacy program. So, Dr. Patel, I didn't know if you wanted to add anything there.

Dr. Patel: No. I think where the federal pharmacy program is going to align, and like you said, we will be more inclusive if the state requests. But we're definitely going to be targeting, or at least so prioritizing, anybody under the directive.

Katie: Great, and we have a question about where people can find information that is in other languages. It looks like we have a couple of folks who are looking specifically for Arabic, Farsi, Somali, and Swahili. Is there a website or a place that people can go to get multiple languages and resources to share in multiple languages?

Dr. Patel: Is it more in regards to vaccine information itself or specific for the initiative. I just wanted to make sure we're ...

Katie: So, this person was looking specifically for information for child care provider. So, I think that would include information both about the vaccine itself as well as this particular initiative and the retail pharmacy program.

Dr. Ethier: So, I think for ... Increasingly, on CDC's website, there is a wider variety of languages available. Our toolkit hasn't ... Some of the specific things for child care workers have not been expansively put into other languages. It is in both Spanish and English. And so, we will hopefully start to translate that into more languages. I can't speak specifically to the languages that you raised, but we do understand the importance of trying to have materials translated into as many languages as possible, and we'll continue to work on that.

Katie: Great. Thank you so much. We have another question about the vaccine and age limits and which vaccines are safe for children?

Dr. Patel: So, right now, the vaccines that are under emergency use authorization are authorized for 16- and 18-year-olds. So, we actually have no vaccines that are authorized for age groups younger than that, just yet. We do hope that that will expand as the months progress, so more news to come on that.

Katie: Great. Thank you so much. I think that we have ... Oh, we have a question about the vaccines and what the difference is between the different vaccines and if people should try to find appointments for a particular vaccine that might be more effective than others.

Dr. Ethier: I think right now while supply is still low ... And Anita, you can weigh in on this. I think while supply is still low, we're encouraging you to get whatever vaccine is available at the location closest to you. Right now, there's just isn't enough vaccine to make lots of choices between them. And, Anita, I don't know if you have anything you'd like to add to that.

Dr. Patel: Yeah. I think you know, CDC is, along with our NIH colleagues and others, are very much recommending all three of these vaccines. All three of these vaccines are safe and they're effective. We really want people to get vaccinated.

So, we encourage you to get whichever vaccine you can, again, just given the supply situation. The major differences between these three vaccines is the J&J vaccine happens to be a one dose. So, we recognize that some people don't want to get a second dose. That is a huge advantage from a compliance standpoint, as well as just a patient-preference standpoint. But right now, again, just reemphasizing: All three vaccines are safe; all three vaccines have been

found to be effective; and really want to make sure people get vaccinated as soon as the vaccine becomes available to them.

Katie: Thank you so much. we have more questions about who is eligible under this directive. Specifically, someone is asking about Early Head Start child care partnerships. If you are a part of an Early Head Start child care partnership, both the staff who work in child care or the family child care provider that you're partnering with, as well as the folks who are employed by the Early Head Start program and the staff that work at that Early Head Start program would all be eligible.

Someone asked about if they partner with other social service providers like housing, a program that helps with housing. This directive is really specific to early childhood. So, it does not cover people who might be employed by another entity that is providing a complimentary social service. We obviously think that is incredibly important, but this particular directive does not include them.

If you have someone who is employed by the Head Start program that is providing services to families in that Head Start program, they would be included as part of this directive. And again, we would just emphasize that there are a lot of different employee-employer relationships, and it will require some judgment. It is self-attestation, but please keep in mind that this is really about making sure that our early educators and our teachers get vaccinated so they can continue to provide services safely and/or reopen if that's what needs to happen. So, we do want to keep the focus there, but also remove any barriers that we can.

We also got a question about the costs, and both Dr. Futrell and Dr. Wheatley mentioned that we have guidance. That explains and affirms that federal funding, whether it's Head Start or child care funding can be used to support vaccine access. So, let me explain that a little bit, and I'm sure that the Office of Head Start in their webinar next week can explain this a little bit more for their grantees. But on the child care side, what it means is that the federal child care money that's gone to states is available for states to use to provide access to vaccines by covering the transportation costs, providing paid time off so that providers can get the vaccine and then if they're experiencing any side effects. States are not required to do that, but those resources are available. And we have, as the federal government told states that they can use their federal child care resources in that way.

And if you have any questions, about that, please feel free to, to follow up with that information will be going out to the child care and development fund lead agency so that they know that the resources can be used in that way.

A couple more questions about the vaccine. I will read them, but I'll just ask my CDC colleagues if maybe these are things you want to answer directly or point people towards where they might be able to find more resources. So, we have, questions about vaccine safety or people who are nursing or lactating.

And yeah, I think that's the primary category people were asking about. And then, if the vaccine actually prevents contracting COVID-19. Did you want to address that or maybe point to books where there might be more information?

Dr. Patel: So, it's Anita. I'm actually going to drop the links on the chat because the questions are pretty complicated, and I want to make sure that we're providing the most up-to-date information on those. So, I will drop the links to that information in the chat box. I've also found the information on all three vaccines, the J&J vaccine, Pfizer, as well as Moderna. And the fact sheets that do have various languages. It looks like FDA has got over 30 languages in which those fact sheets are translated in. So, we'll share those out too in case those are helpful.

Katie: Thank you so much. And I can say as a user, there's a ton of information available on the CDC website. So, definitely, I encourage everyone who has questions or wants more information to check out the centers for disease control and prevention. More than likely, your question is answered there. And there are a lot of really, really great resources to find out more.

So, a lot of questions about the vaccine, and would just encourage folks to go there. Dr. Patel, you mentioned that people can search for vaccine appointments by the type of vaccine. Do they have a choice as to which one they get, or do they sign up for an appointment specific to the vaccine type?

Dr. Patel: There are. So, their schedulers are actually all being updated. Until now we didn't really have a difference. And again, the major difference between the vaccines right now is the one dose versus two dose. So, when we had just the two doses of the mRNA vaccines for the Pfizer and Moderna, that vaccine selection criteria was really not part of a lot of the screeners or the schedulers. Given that the J&J product has now been introduced, the schedulers are being updated. You may not get an opportunity to select a vaccine, but you will be told what vaccine you would be getting. So, it's variable, depending on the supply at the site. It's also variable based on the scheduling tools and the platforms that are being used. So, there's ideally, we're getting to the state where we want people to be able to select a vaccine and be directed using Vaccine Finder to where that vaccine is. But in addition to that, an appointment is also available. So, again, Vaccine Finder is in a beta mode, early launch, but we do think it's going to be useful to support this program and it will continue to iterate more useful user experience and a useful user tool.

Katie: Great. Thank you. So, for the child care and Head Start directors and the organizations that are on today, what can they do to help their staff and their early educators get vaccines?

Dr. Ethier: So, I think the most important things that they can do is to utilize all the tools that we've made available, which will help them both have some language to communicate, will help them feel more confident in talking about the program, and where to get vaccinated. So, using the toolkit that we've made available, I think, will help. And then, also using all of the on-the-ground tools around how to make appointments that Anita shared, and if it would help to go through the process now that you've seen kind of how it works, to sit with folks and help

them make appointments, if you're able to do that and have that be helpful. I think anything that you can do to educate yourselves and understand the safety and the efficacy in any issues with the vaccines that you can help answer people's questions. So, we've tried to pull together as much information to help people feel more competent themselves in talking about the vaccines. And then, circle back to us if there's anything that we can do to help. If there's any information that would be useful, we're always, we always love to hear feedback.

Katie: Thank you so much, Kathleen. Yeah, the early childhood community is a group of people that is always giving back and serving children and serving families. So, it's really remarkable that we have an opportunity here to help our country fight this pandemic.

And before we wrap up, I have a request for everybody who's joining us today. We need your help in getting the word out, and we're going to ask you right now to go to Facebook, go to Twitter, go to Instagram, whatever your preferred social media platform is. We're going to put in the chat, some texts, and we're going to ask you to post that right now so you can help us get the word out. We're going to ask you to tell your peers – all through March early educators are a priority for the COVID-19 vaccine – go to vaccinefinder.org, to find a pharmacy location near you and get your shot. And use one of those hashtags, [#sleeveupforchildcare](#) or [#sleeveupforheadstart](#), depending on the community you identify with. And use that hashtag so other people can see that you're part of the effort. We know that the most important folks to talk to other early educators are our peers. So, if you have gotten your vaccine or if you do get it, make sure to talk to your colleagues, your peers, and tell them how you got the vaccine, why you got the vaccine and encourage them to take advantage of this opportunity.

We are going to be sharing resources throughout the month of March. Please don't hesitate to get in touch with us. If you have questions, we will try to get more information out. We're going to be sharing resources. We want to hear from you about how this is going for you and your staff and your colleagues, and we want you to stay tuned in and help us with this effort.

I want to extend a special thank you to the Centers for Disease Control and Prevention, to Dr. Patel and, to Kathleen for joining us today. You're a wealth of information. We really appreciate it. Thank you to Dr. Futrell and Dr. Wheatley for being with us to talk about the Office of Child Care and the Office of Head Start and those efforts. We are so appreciative of all your work, all that this community has done throughout the pandemic. We hope there's a light at the end of the tunnel, and we look forward to working with you to push this this forward and make sure our early educators get vaccinated.

Thank you so much for your time today.