



**BOARD OF SUPERVISORS
AGENDA LETTER**

Agenda Number:

Clerk of the Board of Supervisors
105 E. Anupama Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Department Name: County Executive Office
Department No.: 012
For Agenda Of: October 5, 2021
Placement: Departmental
Estimated Time: 45mins
Continued Item: No
If Yes, date from: N/A
Vote Required: Majority

TO: Board of Supervisors
FROM: CEO Mona Miyasato, County Executive Officer
Contact Info: Terri Maus-Nisich, Assistant CEO

DocuSigned by:

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SUBJECT: COVID-19 Health and Human Services Recovery and Resiliency Strategies

County Counsel Concurrence

As to form: N/A Select_Concurrence
Other Concurrence: N/A

Auditor-Controller Concurrence

As to form: N/A

Recommended Actions:

It is recommended that the Board of Supervisors:

- a) Receive and file a report on the COVID-19 Health and Human Services Recovery and Resiliency Strategies;
- b) Provide direction as appropriate regarding Health and Human Services Disaster Recovery and Resiliency Strategies and related funding considerations, and
- c) Determine that the above actions are not a project under the California Environmental Quality Act (CEQA), because pursuant to sections 15378(b)(4) and 15378(b)(5) the recommended actions consist of organizational, administrative, or fiscal activities of government that will not result in direct or indirect physical damages in the environment.

Summary Text:

This item is on the agenda for presentation of the COVID-19 health and human services recovery and resiliency strategies. The strategies are designed to support and provide structure to recovery activities and address the impacts of COVID-19 on the vulnerable, under resourced and underserved within the County. The Board is not being asked to make funding decisions at this meeting. Staff will bring a discussion of funding allocations and qualified uses of the American Rescue Plan Act at the October 19, 2021 Board of Supervisors meeting. However, the Board may provide direction as to priorities among the different strategies presented in Attachment A, as appropriate.

Background:

In the spring of 2021, in addition to ensuring the ongoing robust response to the COVID-19 pandemic, the County Executive Office initiated a review of key impacts in the health and human services sectors resulting from the pandemic. This effort was structured to ensure the provision of supports and safety net services to those immediately economically, socially and emotionally impacted by COVID-19, as well as address emerging mid and long-term recovery needs. Throughout the nation, state and locally, COVID-19 has disproportionality impacted communities of color, low wage essential workers, seniors and historically underserved and marginalized populations. The strategies recognize the impacts to this population and provides a strategic framework for health and human services and disaster related services. Full implementation will require strategically braided funding, enhanced community engagement and collaboration, as well as accelerated data gathering in order to address equity and inclusion, combat uncertainties about the future, promote economic and social opportunities and ensure the health and safety of the most vulnerable. The initial strategies set forth for consideration were also developed to ensure the County of Santa Barbara can recover in a way that is sustainable, resilient, inclusive, equitable, and just.

Discussion

The health and human services recovery and resiliency strategies were developed by the leadership teams of multiple County departments including the County Executive Office, Behavioral Wellness, Social Services, First 5, Child Support Services, Community Services and the Office of Emergency Management. While deeply engaged in pandemic response activities during that period, the Public Health Department also engaged to ensure seamless coordination of recovery services as well as ongoing involvement in community outreach and engagement programs. During spring through summer of 2021, departments convened on three occasions to assess impacts of COVID-19 on clients, as well as examine direct and emerging needs exhibited throughout the continuum of services. In order to ascertain direct and secondary impacts of COVID-19, data was gathered and each department was asked to respond to a series of questions designed to identify impacts to clients, as well as the community at large, and ultimately craft strategies to address.

Broad impacts identified by departments and experienced at an individual and community level are referenced in Attachment A.

The recovery strategies are designed to:

- Address pressing primary and secondary impacts of COVID-19 on communities.
- Integrate *Whole Community* practices to bolster individual, organizational, governmental and community cross-collaboration as vital partners in identifying assets, capacities and gaps in achieving equitable recovery and resiliency.
- Build recovery content team experts and integrate departmental efforts and monitor trends.
- Drive rapid and innovative recovery activities that can be planned resourced and executed.

The desired outcomes of full strategy implementation are:

- Recover in a resilient state with improved equity, inclusion, livability, wellness, and economic vitality with measurable outcomes by:
 - Ensuring supports to provide basic health and human needs and recovery are viewed and evaluated through an equity lens and the underserved, under-resourced and marginalized are thoughtfully engaged;
 - Building on best practices employed during COVID 19 response by incorporating them into organization processes;
 - Emerging in an enhanced state of community disaster preparedness;
 - Ensuring coordinated, integrated accessible data is developed and gathered for decision making;
 - Coordinating departmental efforts, leverage shared resources, talents, skills and abilities; and
 - Diversifying, integrating and maximizing funding opportunities to address recovery efforts and longer-term resiliency.

Recovery Focus Areas

Rather than developing department specific initiatives, this framework identifies six Recovery Focus Areas with related strategies, and ultimately integrates programs across departments. A Department Head is designated as Recovery Focus Area Lead to ensure completion and the Health and Human Services ACEO is charged with oversight of the effort. The COVID-19 Recovery Focus Areas were identified to ensure that current and future services will not only support all individuals through the current crisis, but will lift the marginalized and underserved above the pre-COVID-19 experience, ensuring:

- 1) All are prepared to quickly overcome challenges if other events or disaster were to occur; and
- 2) All can enjoy equitable access to services, build opportunities and thrive in our community.

The Recovery Focus Area are:

1. Behavioral Health
2. Economic Revitalization and Employment
3. Community Health and Wellbeing
4. Organization and Technology
5. Housing and Homelessness
6. Disaster Resiliency

The Recovery Focus Area strategies are referenced in Attachment A.

Please note that Public Health is not included as a specific Recovery Focus Area as the Department is continuing the ongoing COVID-19 response efforts, in addition to addressing Public Health infrastructure through dedicated funding. Foundational work by Public Health to outreach and engage with underserved and under-resourced populations to ensure equity and inclusion across all services permeates the recovery

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and resiliency strategies outlined. In conjunction with County departments, hospitals, health system providers, businesses, community-based organizations, and the residents of Santa Barbara County, Public Health planned and executed a host of response efforts to protect the health and safety of the whole community. State and federal and local funding has been utilized to maximize the ongoing response and public health recovery efforts within in Santa Barbara County with a focus on:

- Isolation and Quarantine
- Public Information, community outreach and engagement
- Contact Tracing
- COVID-19 Vaccination Efforts
- Field-Testing sites
- Epidemiology and Surveillance
- Disease Control and Investigation
- Emergency Medical Services/Public Health Preparedness
- Department Operations Center and ongoing Health Center Operations
- Public Health Workforce Development
- Health Disparities

Throughout the nation, state and locally COVID-19 has disproportionality impacted communities of color, low wage essential workers, seniors and historically underserved and marginalized populations. Throughout pandemic response efforts, Public Health efforts are structured to provide a whole community response. However, significant multifaceted education, outreach, and robust community engagement has been implemented to reach vulnerable populations to:

- address disparities in health outcomes,
- eliminate service barriers; and
- address service and information gaps.

These efforts are informed through data collection, analysis, and evaluation. Efforts will continue and as noted have informed and are integrated with existing and proposed community-based outreach efforts referenced within the strategies in Attachment A.

Resourcing the Plan - Summary

Full plan implementation requires the strategic use of current and anticipated funding sources, and collaborative and integrated cross-departmental initiatives to maximize resources and efficiencies.

Specific strategies which are presented for future ARPA funding consideration were assessed based on the following criteria:

- One-time funding for capital facility acquisition/improvements or technology,

- One-time funding for assessment or study to determine specific program, service technology or facility needs,
- Short term (1 to 3 years) targeted funding to address anticipated limited term (1 to 3 year) service need; and
- Short term (1 to 3 years) targeted investment to establish service or program with identified long term funding source to support anticipated ongoing service need.

In some cases, while the intent to for one-time funding, ongoing funding may still be required beyond three years, depending on success of the initiative. Those items are noted in Attachment A. Staff will continue to look at available funding streams to support those possible needs. Strategies have been identified along with estimates of costs and resource needs for each of the focus areas. The chart below reflects the estimated costs under each of the focus areas and options for future consideration of ARPA funding based on the noted criteria.

Focus Areas' Estimated Costs and Funding Needs

Focus Area	Funded as of 9/20/21	ARPA REQUEST Primary Year 1 Impact Strategy Estimated Need	Future Year 2 and 3 Strategy Estimated Need	Total Estimated Cost
Behavioral Health	\$ 1,500,000	\$700,000	\$ 2,490,000	\$ 4,690,000
Community Health and Wellbeing	\$ 0	\$ 800,000	\$ 1,850,000	\$ 2,650,000
Economic Revitalization and Employment	\$ 0	\$ 150,000	\$ 1,160,000	\$ 1,310,000
Organization and Technology	\$ 0	\$ 410,000	\$ 500,000	\$ 910,000
Housing and Homelessness	\$ 13,521,899	\$ 4,200,000	\$ 17,549,294	\$ 35,271,193
Disaster Resilience	\$ 0	\$665,000	\$ 1,030,000	\$ 1,695,000
Total	\$ 15,021,899	\$ 6,925,000	\$ 24,579,294	\$ 46,526,193

The funding table reflects the estimated cost of \$46,526,193 for the focus areas over a three-year period, inclusive of one-time capital costs. As of September, 20, 2021, funding of \$15,021,899 has been allocated comprised of one-time ARPA funds, allocated through prior Board action of \$9,982,500, and state grants of \$5,039,399. In moving forward, the primary year one impact strategy estimated funding need is \$6,925,000 and year's two and three funding need is \$24,579,294, for a total remaining funding need of \$31,504,294. Staff is aware that other needs may arise before next fiscal year that would add to the total need shown above.

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Funding other than ARPA funds may be available, and needs that cannot be accommodated in the current fiscal year may be considered next fiscal year.

Funding options will be aggressively pursued by departments and will include leveraging a variety of possible sources as referenced for each Recovery Focus Area within Attachment A. County staff are monitoring federal and state legislative budget packages as guidance is forthcoming on allowable uses and possible grant opportunities. However, because of there is no certainty about when, how, or how much of those of funds would be guaranteed to come to the County, staff is requesting consideration of ARPA funding at this time.

Fiscal Analysis:

ARPA funding for Year 1 Primary Impact Strategies are not requested with this Board letter.

Deliberations regarding prioritization of ARPA funding will occur at the Board of Supervisors meeting of October 19, 2021. Items represented within the Year 1 Primary Impact Strategies are eligible for ARPA uses.

Attachments:

Attachment A: Health and Human Services Recovery and Resiliency Strategies

Authored by:

Terri Nisich, Assistant CEO