



SUMMARY REPORT

Agenda Date: 1/5/2021

To: County of Sonoma Board of Supervisors
Department or Agency Name(s): Department of Health Services
Staff Name and Phone Number: Barbie Robinson, 565-7876
Vote Requirement: Majority
Supervisory District(s): Countywide

Title:

COVID Fiscal Update, Community Needs, Eviction, and Sick Leave Policies

Recommended Action:

- A) Receive report on H.R. 133 - Consolidated Appropriations Act, 2021 and the current protections provided with the Federal, State, local Eviction and Sick Leave policies.
- B) Authorize the Director of Health Services, or designee to execute the continued COVID-19 Response Plan hereby described, to execute agreements, and to obtain necessary resources, services, supplies, equipment, and such other properties to be lacking or needed for the protection of life and property, and to bind the county for the fair value thereof not to exceed the cumulative appropriations authorized including those in this item.
- C) Direct staff to return with additional budgetary adjustments necessary to expand Department of Health COVID-19 Response Plan through 6/30/2021, which may include up to \$5 million from county discretionary resources.
- D) Provide direction to staff regarding the Local Aid Strategies and direct staff to return to the Board for further action, or, alternatively authorize additional appropriations to support Local Aid strategies and authorize the Director of Health Services, Community Development Commission, Department of Emergency Management, Office of Equity, County Counsel, and/or Economic Development Board, or designee, to execute the Local Aid Strategies approved by the Board, to execute agreements, disperse funding, and to obtain necessary resources, services, supplies, equipment, and such other properties and to bind the county for the fair value thereof not to exceed the appropriations authorized (4/5ths vote required to appropriate additional funds).

Executive Summary:

On 12/27/2020, the Consolidated Appropriations Act H.R. 133 - COVID Relief Bill was signed into law. Staff will provide a report to the Board on the components of the Bill and the provisions that are relevant to the County. The COVID Relief Bill will provide much needed support to some members of the community in Sonoma County. The details of the Act and an understanding of the level of support are still being determined; therefore, the funding from this Act is not included in this item. Specifically changes were made to the Eviction Moratorium and Sick Leave policy with the COVID Relief Bill. Information on the current Eviction Moratorium and Sick Leave, changes in the COVID Relief Bill, State and Local policies is detailed and presented.

On July 27, 2020, during Budget Workshops, the Director of Health Services presented to your Board an overview of a plan to allow for a sustainable response through June 30, 2021 to continue the County's COVID-

19 Response efforts. On September 1 and December 15, 2020, a request for appropriations and a proposed plan for Novel Coronavirus/COVID-19 Section within the Public Health Division was approved.

The staff report provides the Board with an update of the Department's COVID-19 Response efforts, including the enhanced COVID-19 strategies, and vaccination coordination efforts. Further, a request for continuing to support the COVID Section, core response programs, enhanced strategies through June 30, 2021 is included here, as well.

Overall, the costs of the COVID-19 Response for fiscal year 2020-2021 are estimated at \$76.5 million based on current known conditions as of the date of this Report. DHS staff anticipates that most of the \$40.1 million of estimated remaining costs after December 31, 2020, will require \$27.8 million in County discretionary funds in the absence of additional federal/state aid to local government. If CARES Act funding is extended beyond December 30, 2020, the estimated County discretionary funds of \$27.8 million could be reduced to \$20.2 million. The COVID Relief Bill does include a provision extending the CARES use through December 31, 2021, however the State of California does have to approve the extension. The State cannot approve the extension until State Legislators meet in January. Specific amounts for cost estimates references throughout the rest of the report are included in Attachment 1.

If the \$7.6 million in CARES Act funding were to be extended beyond December 30, 2020, then up to \$20.2 million in total from the county discretionary sources will be needed for the anticipated continued pandemic response in 2021. The Board allocated \$1.6 million for the On The Move contract during the December 15, 2020 meeting of the \$20 million General Fund Set-Aside established during the September Budget Hearings. The \$20.2 million for the COVID Response and the \$1.6 million for the On The Move contract total to a \$21.8 million need from county discretionary sources. The \$20 million set aside is available for the ongoing COVID Response and On The Move contract leaving a \$1.8 million gap needing funding from county discretionary sources. \$5 million will be appropriated from county discretionary sources when staff returns for the necessary budgetary adjustments request as \$16-17 million has been appropriated during previous Board Meetings.

Sonoma County is currently under a Stay at Home order as of December 10, 2020 as a result of the number of new cases and hospitalizations with the 11 Bay Area counties. In addition, at the State level, there is a significant budget surplus (\$26 billion estimated by the LAO) some of which will likely be used to address the impacts of COVID on the economy. Based on an interest expressed by Board Members in December due to many Federal benefits expiring, staff has brought forward information about potential local aid strategies, including financial assistance, business grants, food programs, and rental assistance as options for funding at the Board's discretion. It should be noted that the COVID Relief Bill passed by Congress does not provide for reimbursement of funds expended by the County for any local aid package. To the extent the Board is interested in exploring a local aid program, this item provides information on the status of discretionary balances available from the PG&E settlement funds, FY 20-21 Board Contingencies and County Reserves.

Discussion:

I. COVID-19 Legislation and Policies

Federal Update - H.R. 133 Consolidated Appropriations Act, 2021

The Consolidated Appropriations Act of 2021, H.R. 133, was signed into law on December 27, 2020. The bill includes \$900 billion in stimulus relief for the COVID-19 pandemic and a \$1.4 trillion omnibus spending bill for the 2021 federal fiscal year, combining 12 separate annual appropriations bills. Direct aid to counties was not

included in the final package, the bill does include key investments in county priorities including vaccine distribution, nutrition assistance, child care, rental assistance, broadband and others.

Key provisions of interest to the County included in H.R. 133:

HOUSING AND RENTAL ASSISTANCE

Rental Assistance and Eviction Moratorium:

\$25 billion in rental assistance to states, local governments, and tribes through the formula established by the Coronavirus Relief Fund. Counties above the 200,000 population threshold will be able to request a direct allocation from the Treasury Department.

- No less than 90 percent of the funds must be used for payment of rent, rental arrears, utilities and home energy costs, utility and home energy arrears, and related housing expenses; up to 10 percent of funds are available for housing stability services
- Ensures support for the most in-need households, with a preference for households with 50 percent of area median income and below
- Support can cover up to 18 months of arrears and prospective assistance, with prospective assistance limited to no more than 12 months
- Extends the current CDC eviction moratorium until January 31, 2021

Housing and Homelessness:

The final budget Act includes a funding increase for the Community Development Block Grant (CDBG) program with language specifying that CDBG funds can be spent on activities to address homelessness. Other programs receiving a funding boost in FY 21 include: Homeless Assistance Grants (a \$200 million increase); Section 8 Housing Vouchers (a \$1.9 billion increase); and, Project-Based Rental Assistance (a \$900 million increase).

Coronavirus Relief Fund - CRF:

H.R. 133 extends the date by which states and local governments are allowed to spend CARES Act CRF awards from December 30, 2020 to December 31, 2021.

Contact Tracing and Testing:

\$21.6 billion in direct grants for states, localities, and territories with funds set aside for certain hot spots. Includes authorization for grants to Federally Qualified Health Centers, Rural Health Clinics, local governments, school-based health clinics, schools, academic medical centers, colleges and universities, research labs, veterinary labs, nonprofits, Indian tribes, and other entities.

FOOD AND NUTRITION

Supplemental Nutrition Assistance Program:

Temporarily increases the individual monthly Supplemental Nutrition Assistance Program benefit by 15 percent for six months through June 30, 2021. The bill waives work and other requirements for college students who are otherwise income-eligible for SNAP.

Pandemic-EBT Program:

Expands the program to cover families with children in child care.

Emergency Food Assistance Program:

Provides funding for The Emergency Food Assistance Program (TEFAP), including funds for storage and administration and to support food banks and food pantries.

Women, Infants, and Children - WIC:

Provides support for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to

temporarily increase the value of WIC benefits to allow participants to purchase additional fruits and vegetables.

Other Nutrition Support:

The bill also provides increased funding for school and child care meal programs; funding for senior nutrition services, including Meals on Wheels, and extends waivers providing flexibility in Older Americans Act nutrition services:

Extends free meals reimbursement through the Child and Adult Care Food Program to young adults up to age 25 residing in emergency shelters; and, includes additional funds for the Commodity Supplemental Food Program to provide food boxes to more senior citizens.

SICK LEAVE & FAMILY AND MEDICAL LEAVE

Families First Coronavirus Response Act:

The final agreement extends a provision from the Families First Coronavirus Response Act (FFCRA) that provides a refundable tax credit to support employers who offer paid sick leave, as well as paid family and medical leave. It should be noted that government entities are not eligible to receive this benefit. While H.R. 133 extends the tax benefit, it does not appear to extend the employer mandate to provide such leave.

UNEMPLOYMENT INSURANCE

Pandemic Unemployment Assistance and Pandemic Emergency Unemployment Compensation:

The final bill extends pandemic-related UI benefits - including Pandemic Unemployment Assistance (PUA) and Pandemic Emergency Unemployment Compensation (PEUC) - through March 14, 2021. The legislation also restores the Federal Pandemic Unemployment Compensation (FPUC) program. Starting after December 26, the FPUC will provide an enhanced supplement of \$300 per week, which will be paid in addition to and at the same time as regular State or Federal UC benefits. It should be noted that a limited number of workers, who have lost both wage and self-employment income, will be eligible for an additional \$100 per week supplemental benefit.

Payroll Protection Program:

The bill extends the Payroll Protection Program to March 31, 2021 and expands the eligible uses of program dollars. The final deal includes over \$284 billion for first and second forgivable PPP loans, dedicated set-asides for very small businesses, and lending through community-based institutions like Community Development Financial Institutions and Minority Depository Institutions. The agreement also simplifies the forgiveness process for loans of \$150,000 or less, expands PPP eligibility for critical access hospitals, local newspapers and TV and radio broadcasters, housing cooperatives, and 501(c)(6) nonprofits, including tourism promotion organizations and local chambers of commerce, and will allow businesses in the restaurant and hospitality industries to receive larger awards of 3.5 times the average monthly payroll (instead of 2.5 times) and for costs. \$20 billion is included for new Economic Injury Disaster Loan (EIDL) grants for businesses in low-income communities, \$3.5 billion for continued SBA debt relief payments, and \$2 billion for enhancements to SBA lending. The deal also includes \$15 billion in dedicated funding for live venues, independent movie theaters, and cultural institutions.

State Update - Throughout the 2020 legislative session, the Governor and State legislature attempted to address COVID-19 response gaps in federal legislation in the areas of housing, homelessness and sick leave. Temporary relief was secured in the following areas:

Sick Leave

On April 16, 2020, Governor Newsom issued Executive Order N-51-20 to provide California food sector

workers who are not covered by federal paid leave laws with supplemental paid sick leave for COVID-19-related reasons. AB 1867 went into effect in September 2020 expanding supplemental paid sick leave for COVID-19-related reasons for employers with at least 500 employees and for smaller employers who were covered by the Families First Coronavirus Response Act (“FFCRA”) but who excluded health care providers and first responders from paid sick leave under that Act. Employees are entitled to two weeks of paid leave if they are (1) subject to a federal, state, or local quarantine or isolation order related to COVID-19; (2) advised by a health care provider to quarantine or isolate due to concerns related to COVID-19; or (3) prohibited from working by the employer due to health concerns related to the transmission of COVID-19. This does not cover employees who work remotely and is in effect only until Dec. 31, 2020, or upon the expiration of any extension of the paid sick leave provisions of the FFCRA, whichever is later.

Workers Compensation

On May 6, 2020, Governor Newsom signed Executive Order N-62-20, which provides that under certain circumstances it is presumed that workers who contract a COVID-19-related illness between March 19 and July 5, 2020 have done so at work and are thus eligible for workers' compensation benefits. SB 1159 went into effect in September 2020 and expands access to workers' compensation and makes it easier for first responders, health care workers and people who test positive due to an outbreak at work to get the support they need, including necessary medical care and wage replacement benefits.

Evictions

AB 3088 was signed on August 31, 2020 and protects tenants from being evicted before February 1, 2021, as a result of rent owed due to a COVID-19 related hardship accrued between March 4 - August 31, 2020, if the tenant provides a declaration of hardship according to the legislation's timelines. Tenants are still responsible for paying unpaid amounts to landlords, but those unpaid amounts cannot be the basis for an eviction. Landlords may begin to recover this debt on March 1, 2021, and small claims court jurisdiction is temporarily expanded to allow landlords to recover these amounts. The legislation also extends anti-foreclosure protections in the Homeowner Bill of Rights to small landlords; provides new accountability and transparency provisions to protect small landlord borrowers who request CARES-compliant forbearance; and provides the borrower who is harmed by a material violation with a cause of action.

Additional legal and financial protections for tenants include:

- Extending the notice period for nonpayment of rent from 3 to 15 days to provide tenant additional time to respond to landlord's notice to pay rent or quit.
- Requiring landlords to provide hardship declaration forms in a different language if rental agreement was negotiated in a different language.
- Providing tenants a backstop if they have a good reason for failing to return the hardship declaration within 15 days.
- Requiring landlords to provide tenants a notice detailing their rights under the Act.
- Limiting public disclosure of eviction cases involving nonpayment of rent between March 4, 2020 - January 31, 2021.
- Protecting tenants against being evicted for “just cause” if the landlord is shown to be really evicting the tenant for COVID-19-related nonpayment of rent.

Existing local ordinances can generally remain in place until they expire and future local action cannot undermine this Act's framework. Nothing in the legislation affects a local jurisdiction's ability to adopt an ordinance that requires just cause, provided it does not affect rental payments before January 31, 2021.

Legislators have already introduced several critical pieces of legislation for the 2021 session:

Evictions:

AB 15 (Chiu) would extend the protections afforded under AB 3088 through December 31, 2021. In order to avoid eviction, renters with COVID hardships would need to pay 25 percent of the rent owed between September 1, 2020, and December 31, 2021. If tenants are able to pay at least 25 percent by December 31, 2021, any remaining amounts owed to the landlord would be converted to civil debt and could not be used as the basis of an eviction. Landlords would be able to file a lawsuit in small claims court to recover rent owed from tenants starting January 1, 2022. If a tenant could not pay 25 percent of the rent owed between September 2020 and December 2021 by December 31, 2021, they could face eviction starting January 1, 2022. Assembly member Chiu intends to expedite this bill in January.

Homelessness:

AB 71 (Rivas/Chiu) would establish a permanent source of funding to reverse the cycle of homelessness in California. The bill would create the Bring California Home Fund in the State Treasury for the purpose of providing at least \$2,400,000 annually to fund a comprehensive, statewide homeless solutions program upon appropriation by the Legislature. The bill would require the Bring California Home Fund to contain revenues derived from specified changes to the Personal Income Tax Law or the Corporation Tax Law.

As of December 18th, in a joint statement from the Senate President pro Tempore and the Assembly Speaker, the Legislature's session return date was pushed from January 4th to January 11th due to the increased COVID-19 cases and safety concerns for Capitol staff.

California Small Business COVID-19 Relief Grant Program:

\$475 million of funding administered by the California Office of the Small Business Advocate will be distributed by Lendistry as the Intermediary, with certain third-parties designated by Lendistry to provide additional support. Round 1 application window opened December 30, 2020 and closes January 8, 2021 with approval notifications released on January 13, 2021. Program information can be found at careliefgrant.com.

Eviction Policies - Effective April 6- September 1, 2020, the Judicial Counsel of California enacted Emergency Rule 1, a temporary ban on eviction proceedings in California courts to prevent an onslaught of evictions before the legislature could act. On August 31, 2020, AB 3088 passed, which disallowed eviction on the basis of rent unpaid between March 1, 2020 and August 31, 2020, and on the basis of unpaid rent due between September 1, 2020 and January 31, 2021, so long as the tenant paid 25% of the rent due and completed an affidavit of hardship caused by COVID-19. Rental debt still accrues under this law, but is recoverable in small claims instead of via eviction proceedings. The state law set a repayment period to begin on January 31, 2021.

AB 3088 limited the ability of counties to enact their own eviction protection ordinance during the effective period of the legislation, and limited the repayment term under already-enacted local ordinances to begin no later than March 1, 2021. In Sonoma County, which had an eviction protection ordinance in place with a repayment term of 60 days after the termination of a local declaration of emergency, the repayment term now currently runs through April 30, 2021. The state law prohibits the County from extending the repayment term or the commencement date of the repayment period. Thus, unless the state acts to lift this restriction, the County does not have authority to extend the beginning or the end of the repayment term. However, the state law expressly preserves the right of counties to pass just cause eviction ordinances.

Multiple proposals have been made for the extension of state-level eviction protections, including AB 15, which would extend the eviction for nonpayment prohibition until January 1, 2022, and extend the repayment of rent until the end of the later of that date or any applicable local repayment law, which in Sonoma County would be 60 days after termination of the local emergency declaration. The legislature reconvenes on January

11, 2021, and it is likely to take up the issue before expiration of the existing protections on January 31, 2021. The County cannot take effective action to ban evictions for non-payment, or extend repayment terms, until such time.

A federal eviction ban imposed by the Centers for Disease Control, which was first slated to expire December 31, 2020, has been extended by the Coronavirus Response and Relief Supplemental Appropriations Act (the Act) to January 31, 2021. The federal ban applies to persons making less than \$99,000 per year, or \$198,000 for joint filers, and does not require a 25% rent payment. Unlike the California law, the federal eviction ban does not modify the terms of repayment or limit collection of past due rent via unlawful detainer action. The Act, signed on December 27, 2020, also appropriates \$25 Billion for emergency rental assistance, to be used for households with an income not greater than 80% of the Area Median Income, with a household member unemployed or otherwise hurt financially by the pandemic, and at risk of homelessness. As of the date of this document, federal guidance on accessing such funds has not become widely available.

Sick Leave Policies- The following section details information on the Sick Leave Policies and Laws at the Federal, State, and Local levels with current expiration dates. The Families First Coronavirus Act (FFCRA) was signed into law on March 18, 2020. The Act provided paid sick and family medical leave for workers in response to the COVID-19 Pandemic. Other Executive Orders and Ordinances have been implemented by the State of California and local municipalities since the FFCRA became law to address gaps protecting workers within the community.

1. **Federal Law:** The Families First Coronavirus Response Act (FFCRA) covers certain public employers, and private employers with fewer than 500 employees and affords employees with 80 hours of paid sick leave for COVID-19 qualifying reasons, and up to 12 weeks of paid Emergency FMLA leave for child-care COVID-19 related reasons. While the FFCRA was not extended in the recent COVID-19 relief package and thus the FFCRA leave benefits are no longer required, employers may nonetheless voluntarily elect to provide the leave benefits and will be entitled to a tax credit through March 21, 2021. Also, Democrats have pledged to take up the issue again of extension in January, 2021.
2. **California Law:** The Governor issued an executive order effective September 19, 2020 that extended paid sick leave available to employees who were ineligible for such leave under the federal FFCRA, i.e. employers with 500 or more employees nationwide and health care providers and emergency responders who were not required to provide leave under the FFCRA, as well as food sector workers. While this executive order has not yet been extended, Cal/OSHA COVID-19 related benefit protections became effective November 30, 2020 and extend through next year. Generally speaking, the Cal/OSHA protections require that employers provide paid time off (which can mean allowing employees to use their accrued leave) to employees who are excluded from the workplace due to COVID-19 reasons and who are otherwise able and available to work.
3. **Local Ordinances:** Local paid sick leave ordinances largely mirror the benefits afforded by the FFCRA and cover those employees who are not covered by the FFCRA, i.e. primarily employers who have more than 500 employees. (Coverage and protections vary slightly from jurisdiction to jurisdiction.) Most local ordinances, including the County of Sonoma's, were tied to the expiration of the FFCRA, and thus set to expire at the end of 2020 unless the public entity takes action to extend the local ordinance. To date, the ordinances of two jurisdictions will automatically continue through 2021. Five jurisdictions either have or plan on extending their local ordinances, with most extended through March 31, 2021. None of the extensions require an employer to provide a new bank of leave; instead, they simply continue, for a limited time, the obligation to provide COVID-related leave when needed to the extent

an employee has not already exhausted their leave buckets. It is not yet known what Oakland and Los Angeles County will be doing. According to a recent check, the City of Santa Rosa is not currently planning on extending its local ordinance. Thus, at this point in time, it appears as though a majority of the jurisdictions that enacted paid sick leave ordinances in the first place are electing to adopt an urgency ordinance extending the expiration of the local ordinance for a time period ranging from two months to six months.

II. COVID Response Costs and Update

Your Board approved \$25 million in CARES Act and \$11.4 million in FEMA revenue and expenditures appropriations on September 1, 2020, for the COVID-19 Emergency Response from July 1, 2020 through December 31, 2020.

On October 20, 2020, your Board approved the redirection of \$4 million in CARES Act funding for the Enhanced COVID-19 Strategies from October 20, 2020 through December 31, 2020.

As of mid-December, we estimated that \$7.6 million of CARES Act was going to remain unspent due to savings in the following categories - Start dates for staff hiring have been lagging due to a longer than anticipated recruitment timeline, resulting in additional savings; extension of the State's Optum Serve contract testing services originally planned to sunset on September 30, 2020, which in turns created savings for the County; and later start than anticipated for the non-congregate shelters as part of the Enhanced COVID-19 Strategies.

On December 15, 2020, your Board approved \$8.6 million in FEMA and other grants and \$14.1 million in County discretionary funds for a total of \$22.7 million to continue the Emergency COVID-19 Response and Enhanced COVID-19 Strategies from January 1, 2021 through March 31, 2021.

In early 2021, the Department will come back to your Board to request appropriations to allow the Department to continue the Emergency COVID-19 Response and Enhanced COVID-19 Strategies from April 1, 2021 through June 31, 2021.

A. COVID-19 Section Update

DHS continues to mobilize every resource at our disposal and collaborate with state, regional, and local partners to develop a comprehensive and coordinated response to the virus. As a key part of that effort, DHS has been working since September 1, 2020 to establish a COVID-19 Section. Costs for the COVID Response Plan are broken down by program area in Attachment 1.

Programs (Overall):

The COVID-19 Section provides targeted support to create an inclusive, comprehensive, and consolidated approach across all response operations that is also responsive to the changing conditions of the incident. Functions include the recruitment, training and onboarding of staff and volunteers; equity and inclusion support; human resources and logistics support; operation of a public information hotline, facilitation of Alternate Care Sites and Non-Congregate Shelters for surge capacity, public information and outreach; and comprehensive testing, case investigations, and contact tracing.

The COVID Section continues to build partnerships and adjust strategies to maximize the impact of our efforts in testing, case investigation, and contact tracing. To cover increased testing needs we are working with the State through LHI and have expanded both high-volume fixed sites and a mobile testing unit. Augmenting our case investigation and contact tracing staff, includes partnerships with the State, and Centers for Disease Control and Prevention (CDC) Foundation, The COVID Section continues to collaborate with On the

Move/CURA Project to implement the enhanced strategies for health equity. COVID-19 vaccine distribution has also begun with Phase 1a, Tier 1 targeting Healthcare Workers and Long-Term Care Facility staff and residents.

Staffing/Recruitment:

To date, nearly all County employees providing COVID response have returned to their regular, customary roles. DHS hired 57% of the Extra Help and Permanent Time Limited staffing allocations approved by the Board, with another 90+ candidates in background check or onboarding (127 out of 210.5 positions).

All leadership roles of the COVID-19 Section are hired and on boarded, including 4 of the 5 Department Analyst roles that were the last positions to fill. Filling nursing positions to perform case management continues to be a challenge due to the high demand of healthcare workers nationwide. Nursing positions, as well as Community Health Workers performing contact tracing, continue to remain open as continuous recruitments.

B. CORE COVID-19 Section Programs Update

1. Contact Tracing

Case investigation and contract tracing was initiated at the very beginning of the pandemic in Sonoma County, first with our Disease Control staff, expanding to nurses from other programs, and then adding volunteers, extra help hires, temporary staff, reassigned State staff, and US Centers for Disease Control Foundation trainees. From a small group working from Excel spreadsheets with a half-day training and support from consultants and managers, the team has grown into an organized unit with intensive training, thorough protocols and online library of resources, an online database for case and contact management, and a network of community partners to help provide the resources our clients need to stay safely isolated and quarantined.

To date, the team has handled approximately 30,241 records of cases (18,202) and contacts (12,039) (with 2,453 open and 27,788 closed) through CalCONNECT, the online case and contact management platform developed as a collaboration between the CDPH, Accenture, and Salesforce.

As of December 22, 2020, the case investigation/contact tracing team was receiving an average of 305 new cases and 95 new contacts per day for interview and follow-up. This volume represents a quadrupling of the case numbers just one month ago, indicating a significant surge related to holiday gatherings and lack of adherence to public health orders and recommendations. Temporarily assigned County Disaster Service Workers who were transitioned back to their programs in mid-November have been called back to the COVID Section to cope with the surge of cases and will remain with us through the end of January until new hires can be fully trained to replace them. Additional assistance is being sought from a number of different sources, including the Kaiser Foundation/Public Health Institute “micro-teams” of case investigators and contact tracers that will be embedded at Kaiser facilities and community health centers (FQHCs) in the County as early as the end of January.

As of December 31, 2020, we have a total of 86 individuals supporting case investigation and contact tracing. They are comprised of 32 extra help staff, 11 temporary agency staff, 26 State redeployed employees, 5 Centers for Disease Control and Prevention (CDC) Foundation trainees, 4 volunteers, and 8 County DSWs whose return to regular service has been postponed due to demand. In addition, 15 PHN/RNs support outbreak investigation and complex case management tasks, including five who have transitioned from the Testing Team. An additional 9 nurses are still in various stages of the hiring process.

The COVID section anticipates an ongoing need for staffing to provide adequate coverage through the winter months when high spikes are anticipated due to greater time indoors, the flu season, and holiday gatherings. To provide adequate staffing for these essential functions we recommend a continuous recruitment process for Community Health Workers (CHWs) (with heavy preference for bilingual, bicultural staff and those who can work full-time) to fulfill needs for case investigators, contact tracers, and testing navigation workers, to account for staff turnover and the length of time required to get new staff prepared.

The training and orientation process for these positions is lengthy because of the volume of information that Case Investigators (CI) and Contact Tracers (CTs) must learn to be of help to the community and the new systems they are required to learn to manage documentation appropriately. It takes approximately one month to prepare CI/CTs to take on their responsibilities fully, and requires ongoing supportive supervision to maintain quality.

As a result, the COVID Unit will continue to use the following strategies:

- 1) Finish recruiting and retain 65-70 case investigation/contact tracing staff able to work a minimum of 32 hours per week to maximize FTE and reduce management burden.
- 2) Focus on recruiting bilingual/bicultural CHWs to serve the bulk of our clients appropriately.
- 3) Maintain 10-15 cross-trained CHWs to be able to support testing efforts (intake, outreach and education, and isolation support referrals) as well as contact tracing.
- 4) Continue to build partnerships with CURA Project and other community organizations who can extend the reach of the Health Department and provide the community with appropriate messaging around actions they can take to protect themselves and their families as well as wraparound services to support isolation and quarantine.
- 5) Maximize distribution of easy-to-follow guidance for worksites and congregate facilities, and information for individuals seeking help to manage COVID exposures and illnesses and find resources.

2. ACS/NCS Programs

Alternate Care Site

The Alternative Care Site (ACS) is comprised of non-congregate spaces for COVID-19 persons with surge capacity available as necessary for additional residents. In August 2020, the ACS relocated to Best Western Dry Creek Inn in Healdsburg with a capacity of 60 rooms for COVID-19 or COVID-19 pending result patients. Since the move to the Healdsburg ACS (the first guest was admitted on 07/20/2020), DHS has served 522 individuals. The breakdown of the type of clients served is as follows:

- 79 Contacts
- 232 COVID Positive Individuals
- 211 Persons Under Investigation (PUIs) for COVID-19

The cost estimate model assumes that 35 rooms out of the 60 rooms will be occupied through June 30, 2021; however, additional hotel rooms have been identified in Sonoma (See Strategy 5 under Section 4 below: Isolation and Quarantine Support for further information). DHS is also looking at securing additional hotel rooms in Santa Rosa.

Targeted populations include those who are COVID-19 positive that do not require hospitalization, but still require some level of monitoring by medical staff such as Registered Nurses and Medical Assisted Personnel; and those who are pending COVID-19 tests who are unable to isolate at home.

Non-Congregate Sheltering (NCS)

Non-Congregate Sheltering (NCS) are comprised of motel rooms and shelter with projected occupancy of 34 rooms and space for 60 individuals at another NCS site with a surge capacity of up to 99 individuals. In December, two new motel rooms opened, one in Sebastopol and the other in Healdsburg, with a capacity of 73 rooms servicing up to 105 individuals. Targeted populations include FEMA eligible homeless vulnerable individuals over 65 with certain underlying health conditions (respiratory, compromised immunities, chronic disease). The cost estimate model assumes that this capacity will remain the same through June 30, 2021. The estimated cost in Attachment 1 includes room rental, special room cleaning, meals, security, laundry services, and service providers.

Sonoma County Fairgrounds NCS

Is comprised of 34 FEMA trailers with projected occupancy of 70 individuals through June 30, 2021. Targeted populations include FEMA eligible homeless who are COVID-19 vulnerable individuals over 65 with certain underlying health conditions (respiratory, compromised immunities, chronic disease.) The estimated cost in Attachment 1 includes general services trailer set-up, sewer and trash services, clinic in a can service, meals, security, janitorial and laundry services, household supplies, and service provider.

3. Disease Control

The cost estimate in Attachment 1 to support DHS disease control efforts includes existing focused Public Health disease control personnel redirected to the COVID-19 emergency response to the extent necessary, medical and testing supplies, emergency ambulance and Paramedic services contracted staff, contracted disease control consultants, and other related testing expenses.

4. Public Health Lab

The Public Health Lab utilizes existing resources redirected to COVID-19 and has expanded laboratory capacity/capability to detect/test for COVID-19 with new equipment, additional staff, and supplies. The PHL also provides guidance on specimen collection, testing procedures, regional lab resources, and reports summarized lab reports for COVID-19 response activities. The current daily average of specimens that the lab processes is now 800-1,000 specimens per day with existing regular staff working overtime, three contract microbiologists, and 5.5 extra-help lab technicians. The full implementation of the PerkinElmer system, the streamlining of electronic data sharing and the adequate staffing as supported in this budget allows the Public Health Lab to maintain the goal of processing 750-1,000 test specimens day with a turn-around time of 48 hours or less. The proposed staffing level will allow for a day shift and a swing shift, and also support 24/7 operation as needed. It is estimated that the same level of funding is needed to maintain capacity through at least the end of June 30, 2021.

5. Hotline

The DHS COVID-19 resource and information Hotline continues to provide timely accurate information and services to the communities most impacted by COVID-19 as well as the population of Sonoma County at large. The Hotline's current focus is to provide test scheduling and to provide test results to all callers who need assistance while remaining educated and ready to address information needs of all sectors impacted by the COVID-19 pandemic in the county. Current staffing includes a Hotline Analyst, Senior Office Assistant, a

Coordinator, and 10 hotline operators. This work is supplemented by volunteers through the Medical Reserve Corps.

Since March of 2021, the Hotline has received 101,168 calls with a monthly average of 8,431 calls. The lowest call volume was in October with 5,076 calls and the highest call volume was in November with 22,416 calls.

Additional operator staff added since early December has increased the number of logged calls to an average of 445 calls per day. More calls are taken resulting in fewer voicemails and missed calls. While incoming calls still out-pace calls taken, the gap has narrowed considerably. In early November we saw a one-day high count of nearly 6000 incoming calls. Due to overall efforts to educate the public on their ability to use online tools to make their own test appointments, incoming calls were reduced to a daily average of 570 calls. This has decreased voicemails to an average of less than 20 per day. Voicemails continued to be addressed by hotline operators.

As expected, we have had a significant increase in the number of callers whose test results are positive, and the additional staff has also allowed a specialized team of operators trained to work with these callers, in a more timely and detailed manner. The Isolation Team educates the callers in proper isolation strategies using online videos sent via email or text message. They also talk to the individual callers and their families at length about their initial needs prior to alerting the caseworkers to take over. This Isolation team addresses between 12 and 24 positive cases per day.

We expect call volume to increase as the winter surge of positive cases continues. This may indicate the need to continue to increase staff to take calls while the Isolation Team members focus only on assisting callers with positive test results to isolate properly in order to protect their families and the community at large. Finally, as vaccine distribution accelerates, we anticipate that we will also need to handle vaccination injection scheduling should the hotline be called upon to perform that duty.

C. Logistics Update

1. Personal Protective Equipment

There will be a continued need for PPE to protect staff that are working as part of COVID-19 response efforts. PPE needs are comprised of N95/KN95 masks, surgical masks, face shields, coveralls, goggles, protective glasses, surgical gowns, isolation gowns, gloves, wipes, sanitizer, and boot/shoe covers.

Table 1: PPE distributed as of December 18, 2020

COVID-19 PPE Totals To Date (as of 12/18/2020)						
ID #	PPE Description	Total PPE Requested by Op Area	Total Individual Units Received	Total Individual Units Shipped	Total Individual Units On-Hand	Total % Shipped of Total Received
1	N95 Masks - Adult	172,873	857,577	(426,911)	430,666	49.8%
2	N95 Masks - Small	57,750	152,960	(66,200)	86,760	43.3%
3	Surgical / Procedure Masks	260,300	928,990	(335,120)	593,870	36.1%
4	Safety Glasses	2,808	17,479	(6,373)	11,106	36.5%
5	Safety Goggles	6,307	9,263	(5,405)	3,858	58.4%
6	Face Shields	18,479	105,670	(22,548)	83,122	21.3%
7	Surgical Gowns (All Sizes)	106,751	191,750	(98,670)	93,080	51.5%
8	Tyvek Suits / Coveralls (All Sizes)	35,864	100,926	(43,842)	57,084	43.4%
9	Nitrile Gloves (All Sizes)	964,398	1,109,930	(999,446)	110,484	90.0%
10	Infrared Thermometers	638	4,245	(587)	3,658	13.8%
11	Booties	-	63,392	(31,192)	32,200	49.2%
12	Hand Sanitizer	1,117	13,563	(7,995)	5,568	58.9%
		1,627,285	3,555,745	(2,044,289)	1,511,456	57.5%

2. Sanitary Stations

Sanitary stations were strategically placed at various locations within the County of Sonoma to help mitigate the COVID-19 spread among vulnerable populations. All sanitation stations (porta- potties, hand washing stations, showers) have been demobilized in Cloverdale, Guerneville, Rohnert Park and Sonoma. Showers in all cities have been demobilized.

The list below shows the remaining porta-potties and hand washing stations.

Table 2: Sanitary Stations

LOCATION	ADDRESS	ADDRESS SPECIFICS (IF NEEDED)	CITY	TOILET	HAND WASHING	SHOWER
Plaza Park	Healdsburg Ave. @ Matheson St.	Parking Lot	Healdsburg	1	1	
Petaluma roundabout	Petaluma Blvd. S @ Crystal Ln.	Dead end portion of the roundabout (opposite Crystal Ln)	Petaluma	1	1	
Courtyard Marriott Hotel	Hopper St.	New Riverfront development area past the under-construction hotel is an accessible freeway overpass	Petaluma	1	1	
Clover Creamery	Clover Creamery @ Lynch Creek Trail	Open field	Petaluma	1	1	
Santa Rosa Community Health	1110 North Dutton Ave.		Santa Rosa		1	
HSD			Santa Rosa		1	
DHS (SR Community Health)	1300 N Dutton Ave.		Santa Rosa		1	
DHS (SR Community Health)	1300 N Dutton Ave.		Santa Rosa		2	
HSD Economic Assistance	2550 Paulin Dr.		Santa Rosa		2	
County Fuel Station	2650 Paulin Dr.		Santa Rosa		1	
Utility Field Office	35 Stony Point Rd.		Santa Rosa	1	1	
DHS (SR Community Health)	3569 Round Barn Circle		Santa Rosa		4	
Redwood Empire Food Bank	3990 Brickway Blvd.		Santa Rosa		1	
Sonoma County Fairgrounds		4H Lots	Santa Rosa		1	
Homeless Services Center	600 Morgan St.		Santa Rosa	2	3	
DHS (SR Community Health)	711 Stony Point Rd., Ste 17		Santa Rosa		2	
DHS (SR Community Health)	751 Lombardi Ct.		Santa Rosa		3	
Brookwood Health Center (SR Community Health)	983 Sonoma Ave.		Santa Rosa	1	1	
DHS	983 Sonoma Ave.		Santa Rosa		1	
Near W 9th St. @ N Dutton Ave	S/E Corner (City property)		Santa Rosa	1	1	

III. Enhanced COVID-19 Response Strategies Update

Strategy 1: Expand Intensive and Data Driven Testing

DHS has made significant progress in reaching the goals to provide more accessible testing to communities that are located in the most highly impacted census tracts according to the Healthy Places Index (HPI). These sites are strategically placed throughout the county to help serve our disproportionately affected community members and have been chosen based on HPI guidance as well. DHS Community Health Workers continue to

work alongside other services, like CURA and IsoCare, in order to help provide the community access to resources, as well as education during their day of test. Additionally, our DHS communications team is actively working to ensure that the community is appropriately receiving information on how to access testing nearest to them.

Due to the challenge of attracting and retaining staff to cover all of the expanded access needs, DHS continues to explore all options for maximizing testing capacity at a reasonable cost, including transition of various testing responsibilities to a vendor(s) providing end-to-end testing services. DHS is evaluating options and will continue to provide pop-up testing in the interim to the most vulnerable community members.

The Department is still examining the feasibility of utilizing a third-party vendor to provide ongoing testing services for Contact Tracing Drive Through testing. The vendor would move forward with the Departments' approved testing program and strategy by continuing the community contact testing services. We are currently discussing capacity and costs with several vendors for this. This option would allow the Department to more efficiently streamline key testing functions in an all-inclusive service.

Pop-up testing in collaboration with health care partners has begun and contracts have been completed with facilities (Federally Qualified Health Centers). Health care partners require support from DHS for bi-cultural and bilingual Community Health Workers (CHWs), which DHS provides to these sites. FQHCs have now begun conducting one pop-up per week in collaboration with DHS which are capable of processing up to 100 clients each.

As of December 21, 2020, the seven day average number of tests conducted by the Public Health Testing team was 393 tests per day.

Table 3: Total # Tests Conducted at All DHS Sites- October 19 - December 21, 2020

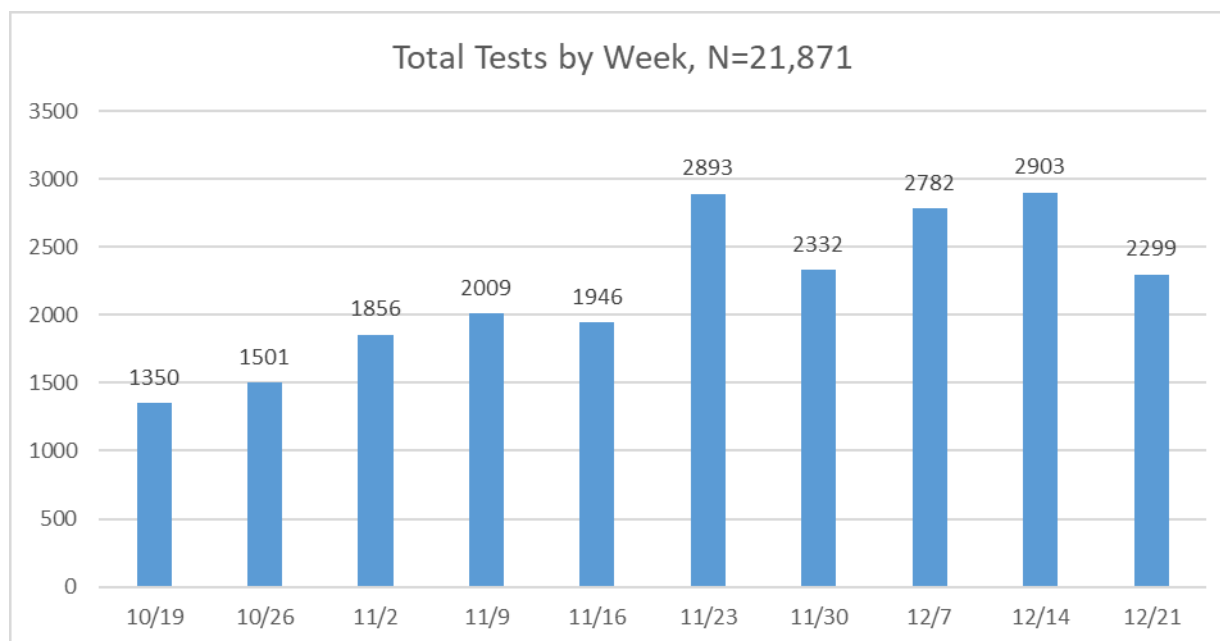
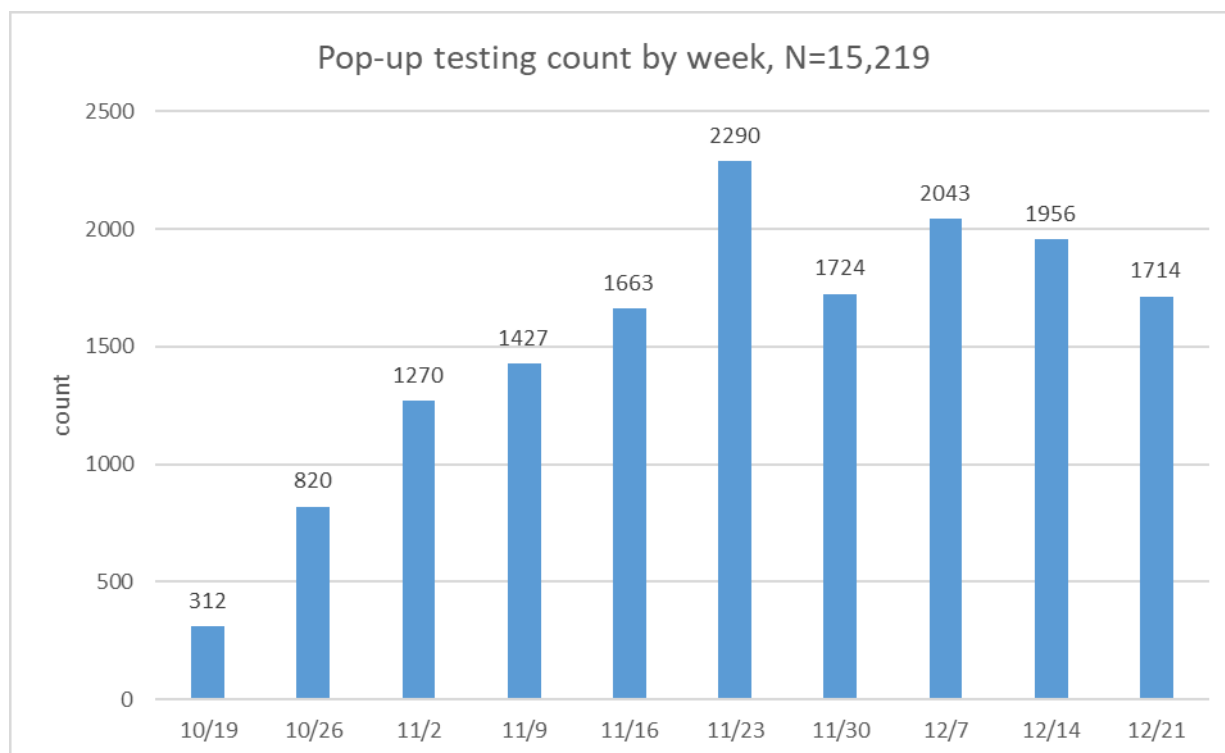


Table 4: Total # of Tests Conducted at Neighborhood Pop-up Sites - October 19 - December 21, 2020



Strategy Improvement 2: Enhanced Outreach to the Latinx Community Update

DHS is collaborating closely with the COVID-19 Urgent Response and Aid (CURA) Project coordinated by On the Move, a locally based non-profit organization. The CURA Project continues to deliver essential support and services in connection to healthcare, testing navigation, and emergency financial assistance to the Latinx and Indigenous communities in Sonoma County.

CURA staff have partnered with County DHS staff to provide outreach and support at the pop-up testing sites. CURA staff are able to engage those being tested, inform them about the resources available and develop the relationships that are essential for effectively supporting individuals through quarantine and isolation. Ten bilingual, bi-cultural Community Health Workers and 5 volunteer health care professionals are conducting outreach and education events at vineyards, in the fields and other high-risk areas in an attempt to provide education about COVID-19, distribute PPE, link individuals to a medical home and assist in the process to sign up for a testing appointment.

Total Outreach Events Attended: 58

Total Individuals Reached Through Outreach Efforts: 3,854

CURA is regularly surveying participants in the program, and preliminary data from 109 respondents shows high levels of satisfaction with the program. Survey respondents' familiarity with COVID increased from 14% before the program to 88% after the program. Importantly, 71% of the respondents were willing to get vaccinated. This last data point is critically distinct from other reports from the Latinx and indigenous language-speaking communities that overwhelmingly show distrust of the COVID vaccine and vaccination process. 100% of the respondents felt comfortable and respected during the process. 100% of the respondents felt their culture was respected. 100% of the participants were served in their preferred language and this was very important to the respondents. Comments from respondents included the following:

Community narrative data regarding CURA project assistance:

- “Que me ayudaron cuando más lo necesite.” (They helped me when I needed it the most)
- “Por la ayuda financiera que nos ayudó mucho en estos tiempos de dificultad.” (It was the financial support that helped me during these times).
- “Saber que alguien se preocupa por nosotros y no estamos solos en este país y fue algo hermoso saber que tenemos ayuda y no estamos solos. Muchas gracias con todonuestro corazón.” (To know that someone cares for us and that we are not alone in this county was beautiful, to know that we had help and that we are not alone. Thank you with from the bottom of my heart”
- “Puede resolver algunos gastos y mi renta por el mes de diciembre y además de eso pude comprar alimentos para mis hijos. Creo que fue una gran bendicion para mi ymuch gente que vivimos al dia”(I was able to solve of my expenses and my rent for the month of December in addition I was able to buy food for my children. I think it was a huge blessing for mi and my people every day”
- “Estamos muy agradecidos y les damos gracias por todo. es muy importante saber que no estamos olvidados a pesar de nuestro estatus legal.” (We are really thankful, and we thank you for everything, it was important that we were not forgotten regardless of our legal status).

Other recent highlights from the CURA project include the following:

- Developed a text messaging service so anyone who signs up will receive weekly messages with COVID-19 updates, how to access services, and awareness about how to continue to practice risk reduction activities.
- Increased partnerships with several other organizations and agencies to help spread the word about CURA and also raise awareness of the current challenges we are facing in our communities in regards to COVID-19.
- Continued efforts of community engagement through a social media and radio team.
- Exceeded goal of people reached through outreach efforts in less than 4 weeks.
- Secured an ongoing presence at Lola’s Market to share resources and hand out PPE. This allows us to talk directly to individuals about being safe during the holidays and minimizing the spread through risk reduction practices.
- Assisted in establishing a direct referral process to IsoCare from our outreach team. This helps with getting people connected to isolation care management with the onset of symptoms.
- In the process of producing videos to help the community navigate the resources CURA offers.

With the recent addition of a Health Equity Manager in the COVID unit, DHS continues its focused strategies to improve its COVID19 response and vaccination preparation for underserved populations. Improved data collection methods, using culturally-responsive practices, will allow deeper and better insight to the communities we serve in preparation for vaccination efforts. The Equity Manager and the Latinx Health Work Group members have begun to engage in planning and evaluation around vaccination education and outreach

efforts.

Strategy Improvement 3: Financial Assistance Programs

Testing Event Gift Cards

The County has been piloting the use of gift cards as an enabler/incentive for people living in our target census tracts to be tested. The testing team was providing up to 300 cards daily at their testing events. As participation significantly increased, we were unable to support a process of handing out cards at the events. We utilized the list of client addresses to focus in on participants within the targeted census tracks only. The volume of cards issued has decreased utilizing this method.

While the program has been successful at increasing testing, it is also very human resource intensive. We will issue gift cards at FQHC testing events until we deplete our supply and discontinue the program as gift card cost is not eligible for FEMA or CARES Act reimbursement.

Financial Assistance to Safely Isolate and Quarantine

CURA partners with five Family Resource Centers located in each supervisorial district to provide comprehensive case management and to provide emergency financial assistance to those required to isolate and/or quarantine.

The first tranche of emergency financial assistance (EFA) came from a partnership with the Community Foundation Sonoma County. CURA began distributing EFA on October 13, 2020, and by November 20, 2020 the funds had been completely expended. DHS was able to re-allocate existing funds from the CURA contract to fund another \$300,000 in EFA, which was also completely expended by December 18th, 2020. DHS launched an income stabilization program, and through a partnership with Child-Parent Institute and CURA, and distributed another \$869,440 to COVID-19 impacted families.

Ensuring that programs are flexible and have minimum restrictions are critical to their success. This ensures access to funds to those members of our community in most need. Working with philanthropic partners like Community Foundation Sonoma County has resulted in addressing critical community needs.

The below table provides information on the numbers of individuals that have benefited from these services as of December 28, 2020.

Table 6: CURA Case Management and Emergency Financial Assistance Project Beneficiaries as of December 28, 2020

	North County (Corazon Healdsburg)	West County (River to Coast Children's Services)	Sonoma Valley (La Luz)	South County (McDowell Family Resource Center)	Santa Rosa (Via Esperanza)	TOTAL
Individuals Referred to Case Management Services	140	28	163	189	710	1,227
People Approved for Emergency Financial Assistance	120	25	76	106	391	718

Emergency Financial Assistance Distributed	\$154,900	\$40,850	\$121,900	\$135,700	\$646,300	\$1,099,650
--	-----------	----------	-----------	-----------	-----------	-------------

Referrals for County-allocated financial assistance (\$1,216) for people with COVID who must isolate and those who must quarantine due to exposures began on November 27, 2020. Similar to the CURA application process, County case investigators and contact tracers perform a preliminary screening for eligibility at the time of initial interview. Those who are provisionally qualified are submitted to On The Move/CURA subcontractor Child Parent Institute's (CPI) team for collection of needed documentation, approval, and issuance of an assistance check. The support has been well-received and is essential for the economic survival of many of the families this program has touched.

Table 7: CURA Emergency Financial Assistance Distributed as of December 28, 2020

	North County	West County	Sonoma Valley	South County	Santa Rosa	Total
Clients Approved for Payment	92	22	82	160	493	849
Amount Distributed	\$111,872	\$26,752	\$99,712	\$194,560	\$599,488	\$1,032,384

Ensuring that programs are unrestricted are critical to their success. This ensures access to funds to those members of our community in most need. Therefore, DHS is proposing to increase the EFA payments provided via OTM/CURA from \$1,216 to up to \$1,700 per individual for the next six months through June 30, 2021. The \$1,700 EFA ceiling payment better reflects the actual financial assistance needed by clients to safely isolate and quarantine and is more aligned with the cost of living of many residents in Sonoma County. The increase in the EFA payment to up to \$1,700 per individual will require the Department to return to detail the funding as the Board deliberates on how to support the community.

Strategy Improvement 4: Partnerships with Business Community

Sonoma County DHS has had discussions with several business groups (agriculture/farm workers, wineries/dairies/breweries, hair salons/barber shops, tourism/hotels/vacation rentals, restaurants, casinos) as well as the Economic Development Board (EDB) to discuss the expanded COVID strategy and how businesses can contribute to the response. A list of California Department of Public Health (CDPH) approved laboratory companies that can assist businesses with surveillance testing of their staff was provided to the EDB for businesses or business groups to reach out to. DHS met with the EDB and the Public Information Office (PIO) team to further answer questions about testing recommendations and expectations. DHS will also provide an introduction for interested businesses to Curative, a local testing company. DHS participates in the weekly EDB meetings to continue fostering the DHS/business community relationship in the COVID response.

The following activities are being led by the County Communications Team to enhance outreach to key businesses in Sonoma County. Developing partnerships with Sonoma County businesses is a critical step toward implementing infection control practices and educating employees about best practices to reduce transmission in the workplace. The details of this partnership program are still in development, but it envisions:

Testing Partnerships:

- Overall sponsorship of enhanced COVID strategies program: Economic Development Board is promoting and publishing key information to business through its website, email communications, social media, and with partner organizations.
- Sponsorship of pop-up testing, particularly at places of employment: options include partnering with third-party contractors to host testing at workplaces and reserving blocks of testing through one of state-run testing sites. Additionally, some businesses may provide paid time for employees to get tested with their primary care provider or other local testing sites.

Creative Partnerships:

- Fostering working relationships with business leaders to engage in COVID-19 outreach programs such as the current partnership between the County of Sonoma Communications unit and The Engine is Red for a digital advertising campaign. The Engine is Red is providing its services for free to the county while the County financing the mobile ad buys.

Encouraging businesses to model best practices in their workplaces to reduce transmission:

- Utilizing best practices in Appendix A/Exposure, which lives on the EDB website and has been shared numerous times through digital communications and word of mouth.
- Make it clear that there will be no retaliation for employees who have COVID-19 - and that they will be allowed to return to their jobs after taking time off to properly isolate.
- Establish testing programs for employees and/or partner with Sonoma County Public Health for onsite testing.
- Enhance worker education and share resources with employees: Provide COVID safety information for employees. Businesses with Latinx and Indigenous community employees are encouraged to partner with the COVID-19 Urgent Response and Aid (CURA) Project to connect their employees to additional community resources.

Strategy Improvement 5: Isolation / Quarantine Support

Hotel Accommodations and Wrap-around Services

One of the additional barriers to prevent the spread of COVID-19 amongst low-income communities is the capability to safely isolate and quarantine within the household. The hotel accommodation program, and additional wrap around services, will expand upon this work and provide additional lodging options to the most vulnerable populations.

We are currently working with County Counsel and the owner of a hotel in Sonoma on finalizing the development of a new contract to utilize twenty rooms for isolation and quarantine. We anticipate having an agreement and to begin utilizing the facility by January.

The Department is working with the state to provide temporary hotel housing options for essential farm and food processing employees who are either COVID-19 positive or exposed. The county will coordinate with the state to book hotel rooms and provide data so the state seeks FEMA reimbursement.

The Department has begun work on contacting other hotel facilities to see if there is interest in having rooms available for quarantine needs, primarily in central or west Sonoma County.

Strategy Improvement 6: Communication, Promotion Campaign

To promote the County's strategies, the County Communications team has continued with the Health Equity Marketing and Outreach campaign that will continue into early January with targeted messaging focused on:

- Expanded opportunities for testing through both pop-up testing sites and OptumServe sites especially for residents of key Census tracts.
- Financial support available for low-income COVID-19-positive individuals in key census tracts.
- Encouraging residents to avoid large gatherings and to follow safety protocols throughout the holiday season.

Key aspects of campaign that have continued include:

- Working closely with the PIOs of the Association of Bay Area Health Officers to coordinate messaging on COVID-19 safety over the holidays and the rollout of vaccinations. Also working with community partners including cities and health care districts to push out multiple messages on importance to practicing safe social distancing, wearing masks and other COVID mitigations during the holidays.
- Thirty-second public service announcements on Spanish and English radio through December including on KZST, KFGY, KSRO, KXTS, KJOR, KSRT and KBBF.
- Continued partnership with The Engine is Red of Santa Rosa in administration and management of an e-marketing mobile phone-based campaign targeting residents of key census tracts to encourage testing and safety. Metrics continue to show high click-through rates.
- Continued publication of half-page and quarter-page print ads published in The Press Democrat, North Bay Business Journal, Sonoma Index Tribune, Petaluma Argus-Courier, La Prensa and Sonoma County Gazette through Dec. 31, 2020. Campaign also includes digital ads across SMI platforms.
- Distribution of graphics/promotion ads for social media and other platforms featuring local families modeling COVID safety protocols.
- Creation of 30-second Spanish-language TV ads for Univision (30 days/twice daily) for December into early January 2021.
- Screening of new Latinx supermarket videos at rate of 28 spots per day at 18 Latinx markets throughout Sonoma County, for a total of 532 spots per day through November and December.
- Digital billboard placement on northbound and southbound Highway 101 in Rohnert Park through end of December with message "Give the gift of safety - Get a COVID test" (English and Spanish)
- Daily pushes through social media (Facebook and Twitter) throughout the holidays
- Posting of videos and photos featuring local families, modeling COVID safety protocols, in progress.
- Also the posting of videos - in English and Spanish - explaining details of the curfew and how to make an appointment online to get a test.

Ongoing LatinX Outreach:

Into early December, nonprofit organizations continued distribution of COVID-19 door hangers and other materials in targeted neighborhoods. Free materials include facial coverings, information in English and Spanish on COVID-19 safety measures and testing opportunities and contacts for resources as well as

information about the expanded testing opportunities for residents of key census tracts. Community-based organizations also are distributing materials by tabling in locations frequented by members of the LatinX community such as local grocery stores, strip malls, parks etc. The community-based organizations include:

- Hispanic Chamber of Commerce of Sonoma County
- La Luz
- Latinos Unidos
- Windsor Wellness Project

Other Outreach Efforts/Materials:

- Continued development and improvement of SoCoEmergency.org web pages with an emphasis on information concerning COVID-19-related data, testing opportunities, financial resources and other assistance available for residents and vaccinations.
- Creation of flyers/posters for businesses to inform employees about testing options in Sonoma County including popup testing sites.
- Continued outreach to local businesses to streamline messaging over testing and other initiatives.
- Working closely to support, promote and clarify activities of the CURA Project, with local community partners.

IV. COVID-19 Vaccine Distribution Coordination

Planning and preparations for COVID-19 vaccine distribution are ongoing. The first vaccines arrived to Sonoma County Public Health Laboratory, Kaiser Permanente, and Santa Rosa Memorial Hospital on December 17, 2020. In total, Sonoma County has received 5,850 doses of Pfizer/Bio-Tech vaccine and 8,800 doses of Moderna vaccine. The current target populations for vaccine allocations for Phase 1a, Tier 1 as defined by the National Advisory Committee on Immunization Practices and the National Academy of Medicine include healthcare workers and long term care facility staff and residents.

Acute care facilities in Sonoma County have been receiving their own shipments of vaccine directly from the state. All hospitals in Sonoma County -- Kaiser, Sutter, Santa Rosa Memorial, Petaluma Valley, Healdsburg and Sonoma Valley -- have started vaccinating their healthcare workers in the Phase 1a Tier 1 group.

In addition, CVS and Walgreens this week began vaccinating staff and residents of long-term care facilities, a partnership between the pharmacies and the federal government.

Meanwhile, EMS and other first responders began a vaccination drive on December 22, aiming to vaccinate 1,400 first responders in Sonoma County. The clinics are taking place at the County Public Health Lab and will last about 10 days with the capacity to vaccinate 160 individuals per day.

Public Health is preparing to begin distributing vaccine to facilities in the Phase 1a Tier 2 group, which includes Federally Qualified Health Centers, urgent care and other clinics, Public Health field staff and other first responders.

Since before the arrival of the first Pfizer vaccines in Sonoma County on Thursday, December 17, the Communications team has been working to promote messaging that 1) underscores the safety and efficacy of the vaccines, 2) makes clear the prioritization and general timeline of the rollout and, 3) begins the process of building community support and confidence in all sectors of the community for taking the vaccine when the

opportunity arises.

Using funding approved by the Board on December 15, the Communications team is continuing with its marketing and outreach, with an emphasis on messaging in early 2021 that will include 1) promotion of safe practices including wearing facial coverings and 2) support for vaccines. Many of the same platforms, resources and partnerships that were utilized for the Health Equity Marketing and Outreach campaign above will be employed as part of this vaccination promotion campaign. The Communications team will provide more details of this campaign as it develops.

In the meantime, the County continues to utilize SoCoEmergency.org as a central platform for COVID-19 information related to vaccinations. Recent updates include:

- Overhaul and reorganization of the Covid homepage
- The rollout of a Vaccine Information Page which includes subpages on the following:
 - o Benefits of Getting the Vaccine
 - o Ensuring Vaccine Safety
 - o Allergic Reactions
 - o Vaccine Myths and Misconceptions
 - o Who will get the vaccine
 - o Vaccine Distribution
- The County's Vaccine Distribution Plan has been made available, as well as a chart of where the County stands within the distribution plan and will be updated weekly.

In addition, message collaboration with partners, stakeholders and neighboring jurisdictions remains a core function and priority of the Communications team. Regular engagement and coordination continues through The Association of Bay Area Health Officials (ABAHO) PIO group, the Sonoma County Regional PIOs and a recently expanded collaboration with a broader Sonoma County health care communications sub-committee that has launched the “I’m in” marketing and outreach campaign. This involves community leaders and residents publicly committing to getting the vaccine, including having their photo taken at the time they are vaccinated, and sharing it on social media.

V. Local Food Distribution Program

To date COVID Emergency Food Task Force has expended \$3.5 million (which includes \$1.5 million CARES and \$2 million FEMA Funding allotment and expended) to nine Sonoma County non-profits to assist in closing the gap created by increased, sustained demand for food since March 2020. This gap is created by a number of conditions created by the COVID crisis including:

- Increased unemployment
- Increased isolation needs for those with underlying conditions
- Fear of exposure among senior population
- Increased needs to isolate and quarantine for those with COVID, their families, and those in contact with COVID positive patients

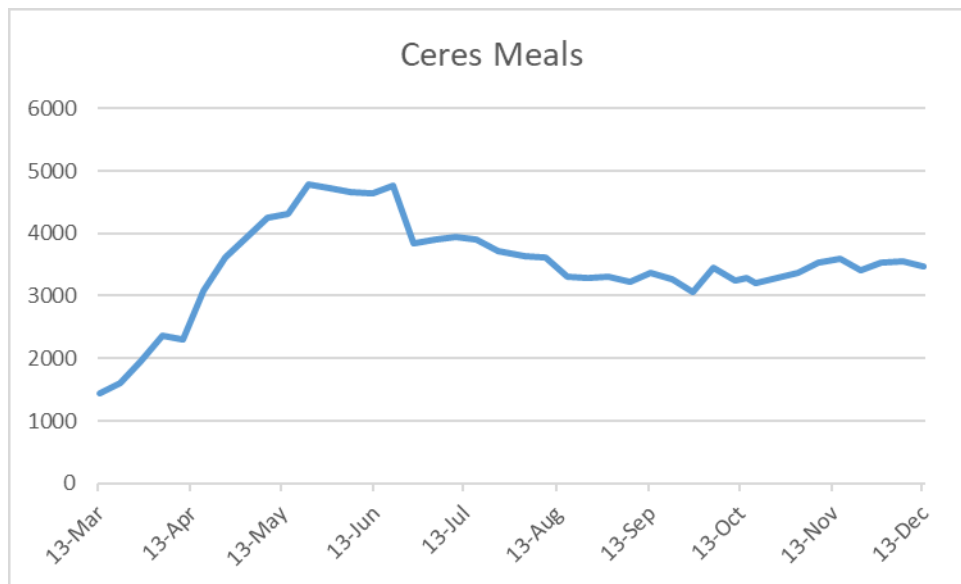
The funding has provided 1,108,857 meals to residents in Sonoma County experiencing food insecurity due to COVID. This includes full prepared meals, groceries, and combinations of both as needed by residents. Funding supported Council on Aging, Coastal Seniors, Petaluma Peoples Service Center, Sonoma Family Meal, Catholic Charities, Ceres Project, Food For Thought, Salvation Army, and Redwood Empire Food Bank. While non-profits

have continued to fund raise, the amount of funds raised cannot keep pace with increasing and sustained demand. Some government allocations have assisted Food Banks and Meals on Wheels programs, but again not to close the gap between needs

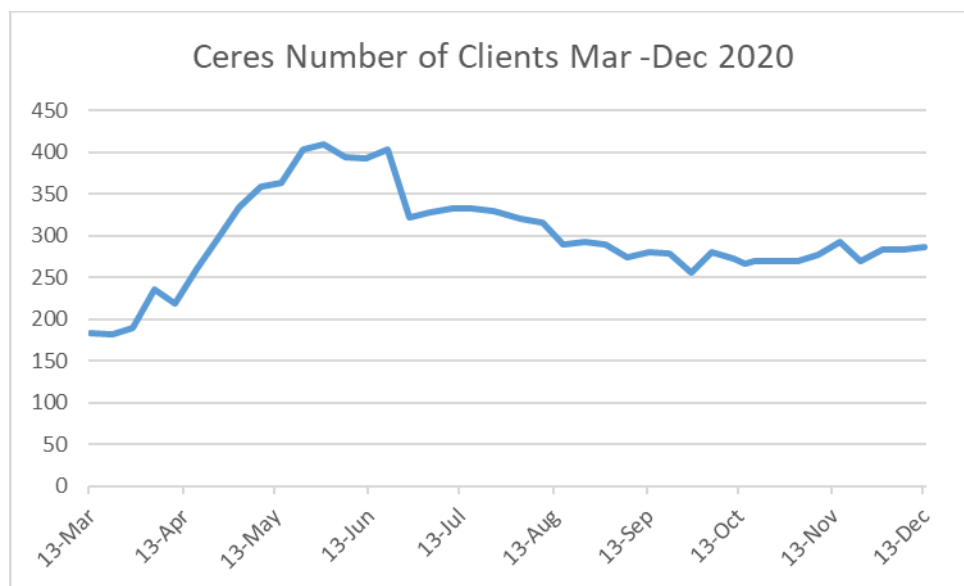
Current reintroduction of business and travel restrictions, as well as increased COVID cases countywide indicate the need for support of our non-profits in this work will continue to be important over the next few months. Other than CARES funding, asks for funds to assist our non-profit partners have been every 30 days, as FEMA Public Assistance has been extended. This was the case March through August. FEMA Public Assistance is currently extended through March 15 which can provide for reimbursement of up to 75% which would make County cost a net of \$75K each month. This funding is to support the gap in need and funding for our non-profits, if we see cases decrease, and business open (less unemployment) the funding gap will diminish. This is a moving target and hard to quantify more than 30-60 days out. Moving forward, we are hopeful that cases decrease, and/or Federal Funds become available (perhaps a CARES Act 2), but without a decrease or Federal support we may need to submit future request should cases continue to soar and businesses continue to be closed and/or restricted. Current FEMA PA is through March 15 so we ask for 2 months. The Emergency Food Task Force asks for \$300K in support for January and \$300K for February (total County cost expected to be \$150,000 after reimbursement from FEMA).

While early summer cases peaked the weekly case load still far exceeds pre-COVID numbers, and with December cases and new business restrictions food insecurity can be expected to rise again.

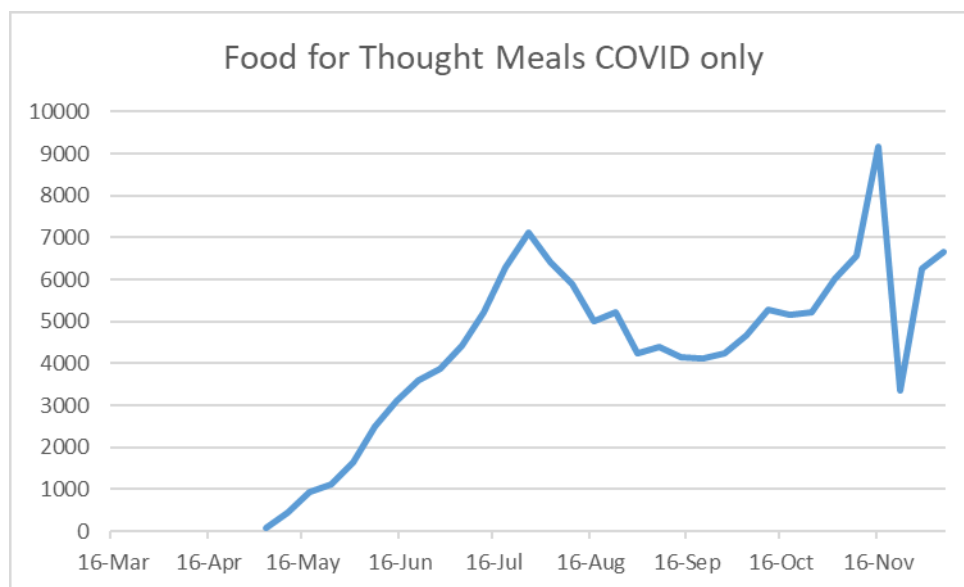
The following charts provide data of number of meals and number of clients for two of our food partners. The graphs begin the first week prior to the Shelter in Place order and illustrate the continued high case load compared to pre-COVID cases and meals.



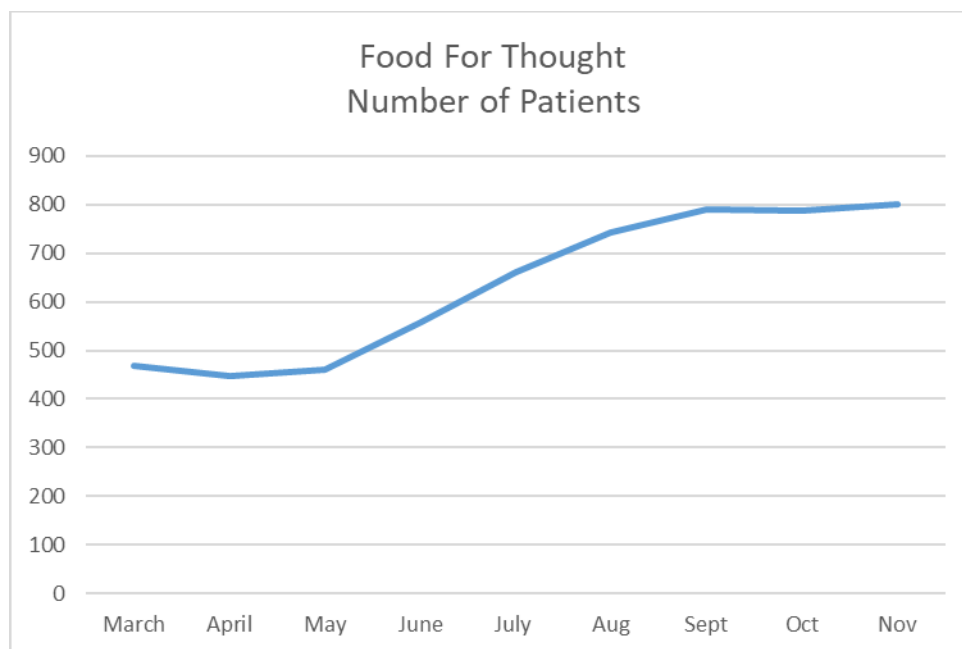
Total number of meals served by Ceres.



Number of clients served by Ceres.



Total number of meals served by Food For Thought



Number of patients served by Food For Thought

VI. Business Community Assistance

The COVID-19 pandemic and necessary health, distancing and mitigation requirements have had a profound impact on local businesses, especially those that rely on congregate settings in their primary business model.

In May of 2020, at the direction of the Board of Supervisors, EDB staff contracted with Dr. Robert Eyler of Economic Forensics and Analytics to develop a greater understanding of these impacts. Dr. Eyler's September 2020 report notes that full economic recovery may stretch through late 2023, with a recovery of 2019 employment levels occurring in 2024.

For 2020, the estimated loss in Gross Regional Product (GRP) is \$2.4 billion or approximately 16.7% of the local economy. Throughout 2020, \$1.4 billion has been deployed in the county through local, state, and federal resources, as detailed below:

Direct County aid for businesses deployed to date:

Sonoma County Business Stabilization Grant - \$2.5 million (full report of the program can be found on Attachment 3 of this Board Item)

- Total applicants - 1305
- Total approved - 542 (42%)
- Total funded - \$2,345,000 (\$155,000 contracted for grant administration)
- Hispanic/Latino grantees - 132 (24%)
- Women grantees - 315 (58%)
- Low-Moderate income grantees - 434 (80%)

California Small Business COVID-19 Relief Grant

On December 30, 2020, the state of California launched a \$500 million fund for eligible California businesses and non-profits. Grants up to \$25,000 will be available, with actual amounts based on revenue. Round 1

grantees will be notified beginning January 13th, according to the program website.

SBA PPP and EIDL deployed locally to date:

Paycheck Protection Program (PPP) - \$1,043,448,107

Economic Injury Disaster Loan (EIDL) - \$370,681,989

While the Paycheck Protection Program was recently extended with the intention to support small businesses with less than 500 employees keep their workforce on payroll, a report from the Select Subcommittee on the Coronavirus Crisis has shown that the program fell short in prioritizing small businesses and underserved markets, including minority and women-owned businesses. This resulted in more obstacles for smaller businesses than well-resourced larger firms. As a result, there is an opportunity for continued use of an equity lens in the implementation of EDB programs. With dedicated outreach and capacity to reach typically underserved and underresourced communities, EDB can replicate earlier positive results in the BIPOC business community.

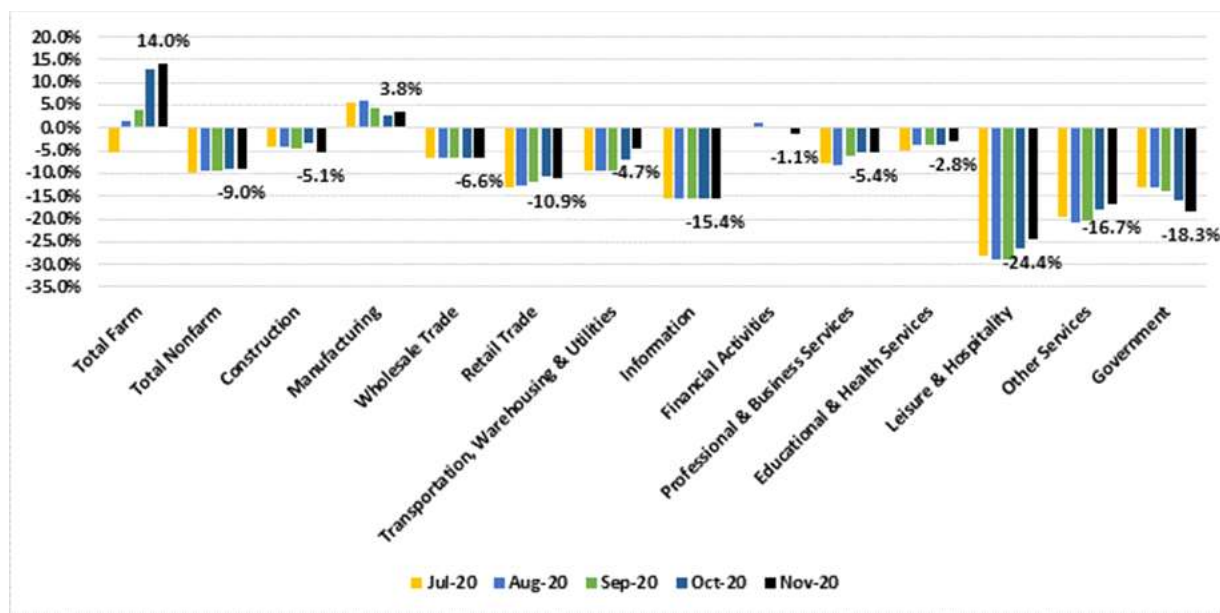
Looking ahead, forecast GRP losses for Sonoma County in 2021, '22 and '23 are \$1.7 billion, \$1.3 billion, and \$679 million respectively. Even with a vaccine actively being distributed at this time, the consequences of Coronavirus (with some safety measures likely to remain) will continue to be felt acutely by local businesses, and demand for financial resources will likely outstrip supply.

In determining target areas for additional resources, should they be made available, EDB staff again looked to Dr. Eyler to drill deeper into the relevant areas of his economic impact report to identify specific pockets of need among local industries.

No “real time” data is made available for actual revenue losses and business closures from federal sources, thus year over year employment data by major industry sector has been used to here identify those experiencing a slower return to pre-recession levels.

With total nonfarm employment down 9% overall in November 2020 from the same month in 2019, the following industries are still seeing higher than average job losses, and may represent the greatest need for local stimulus:

- Leisure and Hospitality (-24.4%)
- Other services, ie: personal care, cleaning services, etc. (-16.7%)
- Information, ie: publishing, broadcasting, recording (-15.4%)
- Retail Trade (-10.9%)



Estimating ongoing needs:

As previously mentioned, “real time” data for the purpose of estimating the comprehensive financial needs of Sonoma County’s business community is not available. As a simple measure of need, staff suggests looking at the above Gross Regional Product loss estimates as one way to gain insight on lost revenue and productivity. For 2021, that figure is \$1.7 billion. Using the Census estimates of 14,304 establishments in Sonoma County, the average loss is \$118,847 (\$9,900 per month) per business. *Based on these assumptions, 30 days of aid for 1,000 local businesses would be \$10 million.*

Proposed criteria:

Based on his research, Dr. Eyler identified the following eligibility criteria among those that should be considered in the design of a new financial aid program:

- Businesses with 50 or less employees
- Businesses in sectors with employment figures that trail the overall non-farm average
- Businesses from industries subject to higher rates of closure/loss since January 2020

In addition, and based on experience with the previous Business Stabilization Grant fund, staff suggests the following considerations:

- Consider lower amounts or a sliding scale for non-employer firms and sole proprietors
- Consider scaling grant amounts based on demonstrated losses/needs (though labor intensive to verify)
- Use of an equity lens to develop application and grant process

VII. Equity and Community Discussion

Local low-income communities of color, who experienced marginalization prior to the COVID-19 pandemic, continue to face the brunt of the COVID-19 cases as well as indirect economic and other health consequences of this widespread virus.

People of color make up 43% of essential workers in Sonoma County, who keep our community fed and running while putting themselves at risk when showing up to work every day. Particularly, Latinx workers

account for 33% of essential workers in Sonoma County, while representing about 26% of the total county population. According to the Bay Area Equity Atlas (<https://bayareaequityatlas.org/FrontlineWorkerSonoma>), “Latinx workers are disproportionately concentrated in frontline occupations where workers are more likely to live in or near poverty, lack U.S. citizenship and health insurance, and have limited English proficiency.” About 29% of essential workers in Sonoma County are immigrants.

At the highest point of the racialized spike of COVID-19 in Sonoma County, Latinx and indigenous language-speaking communities accounted for slightly over 90% of the positive cases of COVID-19. Latinx and indigenous language-speaking residents continue to be the communities made the most vulnerable by the pandemic in Sonoma County. They are not only most at risk of contracting COVID-19, due to the nature of their essential jobs, but also face significant restrictions to getting the economic support and food and health resources compared to other Sonoma County residents.

The Latinx Health Work Group continues to inform Department of Health Services enhanced COVID-19 strategies, and brings the following recommendations for consideration by the Board:

- 1) There is a need to expand support for individuals impacted by the pandemic, who are not COVID-19 positive or under an isolation order but, for example, have been impacted by the loss of a job. Addressing job loss, housing and food insecurity, and mental health impacts also form part of the COVID-19 response effort. This virus has deeply impacted our community’s overall health and safety, especially those who are made more vulnerable by exclusive and restrictive systems. All residents should have dignified access to financial and other support in the middle of a pandemic.
- 2) There is a need for financial assistance for undocumented residents of Sonoma County. This population is prevented from receiving federal stimulus checks and other assistance.
- 3) There is a need to centralize COVID funding streams so the money can be directed strategically to close outstanding gaps in service, without creating blockages to service for those most in need. We should ensure that funds available to families are not encumbered by complex criteria nor that they are restricted to only certain referral sources.
- 4) There is a need for expanded eviction protections. From April 6, 2020 to September 1, 2020 (when California’s Judicial Council’s Emergency Rule 1 prohibiting the filing of all evictions except where necessary for public health and safety was in effect), a Public Records Act (PRA) response from the Sonoma County Superior Court shows that only 53 residential eviction cases were filed in Sonoma County. After Judicial Council Emergency Rule 1 was lifted on September 1, 2020, the PRA response shows that 50 residential eviction cases were filed in Sonoma County in September, 36 residential eviction cases were filed in Sonoma County in October, and 31 residential eviction cases were filed in Sonoma County in November. In summary, reported eviction cases more than doubled in almost half the time between September 1, 2020 and December 3, 2020.

Recent data from the Bay Area Equity Atlas (located at <https://bayareaequityatlas.org/research/analyses/COVID-19-evictions-sonoma-county>) shows that 7,000 households are at imminent risk of eviction (including 5,100 children). This data also shows that renters are facing increased economic and housing insecurity, especially during this time of record unemployment. Over half (54%) of all Sonoma County renters are already burdened by rising rents, and rent-burdened households have an average of just \$10 in savings. Latinx renters, especially women, are more likely to be at risk of eviction and homelessness.

Eviction protections support the protection of public health during a pandemic. Recent studies (located at https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3739576 and https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3736457) find a clear association between evictions and COVID-19 incidence and mortality, as well as an explanation as to why we would expect the link between eviction and transmission of COVID-19, analyzing the public health and social science research on infectious disease and eviction outcomes. Eviction is likely to increase COVID-19 infection rates because it results in overcrowded living environments, doubling up, limited access to healthcare, and a decreased ability to comply with pandemic mitigation strategies like social distancing.

Anecdotal information tells us that while many renters and landlords are working together to find solutions to the shared challenges that COVID-19 under- and unemployment has caused for renters, Policy Link finds that the problem of rent arrears will persist and likely worsen in subsequent months. Their recent report (attached hereto) states that “[w]hile there is a clear imperative for policymakers to protect vulnerable renters (and homeowners) from being displaced from their homes in the middle of a global pandemic, it is difficult to gauge the scale of this problem. In particular, it is unclear precisely how much rent debt will be owed in arrears.” Conservative estimates place the numbers of low-income Sonoma County renters who are experiencing rent arrears at approximately 6,175 with a total monthly debt of \$8.3 million.

The recent stimulus package signed by president Trump on December 27, 2020 includes renewed unemployment benefits, revives the Paycheck Protection Program, continues the eviction moratorium, expands nutrition benefits, and provides a new round of direct payments of \$600 to most Americans.

In Sonoma County, we have an estimated 38,000 undocumented residents who have been prevented from accessing these federal benefits, despite facing job, housing, and food insecurity. During the first round of stimulus checks, the federal government only sent checks to U.S. Citizens, leaving U.S. born children of immigrants, and families with mixed immigrations statuses without aid at a time when many were struggling to respond to the economic fallout of the pandemic.

While California created a \$75 million fund to support undocumented workers, the Northern California region received only \$5 million to be distributed among 23 counties, including the County of Sonoma. The program was administered by California Human Development who distributed a one-time cash benefit of \$500 per adult with a cap of \$1,000 per household to deal with the specific needs arising from the COVID-19 pandemic. In Sonoma County approximately 500 of the estimated 38,000 undocumented individuals received the benefit.

Although the new stimulus checks will be accessible to mixed status families this time, mixed status families continue to be among the most impacted in our communities. As a result, 39 local governments, including the County of Sonoma, joined an amicus brief arguing that the denial of CARES ACT aid to U.S. Citizen children will cause long term harm to their jurisdictions’ residents and communities. The brief states that “exclusion of U.S. citizen children from the Coronavirus Aid, Relief, and Economic Security (CARES) Act’s economic impact payments puts those [U.S Citizen] children at an increased risk for hunger, educational setbacks, and homelessness.”

Even when financial assistance may be available for undocumented members of our community, immigrant families also have to weigh the possibility of receiving government aid and later being considered a “public charge”, which could negatively impact their possible future adjustment of status in the United States. Thus, direct allocation of financial aid to trusted non-profit organizations to ensure undocumented community members are served is a preferred path forward, rather than County-led programs.

VIII. Fiscal Options for Local Assistance

In order to fund ongoing COVID-19 response costs for the second half of Fiscal Year 2020-21, the Board set aside \$20 million during Budget Hearings in September 2020. This funding has already been committed to the ongoing response costs, as have CARES dollars received. The new Federal COVID Response bill that was signed in December does extend the period in which state and local jurisdictions can expend CARES funding, but does not allocate any additional resources to local governments. The total need of County discretionary funding for the COVID Response and On The Move costs are \$21.8 million. The \$20 million Set Aside from the September Budget Hearings will be applied to the COVID Response and On The Move costs leaving a gap of \$1.8 million. The gap of \$1.8 million needs to be filled to continue COVID-19 response through June 30, 2021. The funding gap is expected to decrease if the COVID Relief Bill includes funding for programs and activities in the COVID Response Plan. Currently no funding has been identified for response beyond June 30. It is possible that there will be additional local aid in a future Federal relief bill or from the state. President-Elect Biden has made it clear that additional pandemic relief is a priority, although with the makeup of the Senate unknown it is unclear if this will pass Congress. Greater clarity may come on this funding in the coming month, at which point we will have better understanding of the ability to meet County response needs with state or federal support.

Should the Board desire to explore the implementation of additional local aid, the Board has three primary sources of available resources: Board Contingencies, General Fund Reserves, and remaining funds from the PG&E settlement.

Currently, Board Contingencies stand at \$2,816,889. In addition, \$666,676 allocated to the Permit Sonoma Reconfiguration capital project in FY 2019-20 was restored to the General Fund during first quarter Consolidated Budget Adjustments, which has not been programmed. If this is used to restore contingencies, a total of \$3,483,565 will be available.

Following allocations of PG&E settlement funds for infrastructure projects and fire prevention/vegetation management projects on December 15th, the Board has \$26.76 million in settlement funds that have not yet been allocated, although \$13 million of this will be needed as the local cost share of the \$50 million BRIC grant, should it be received leaving \$13.76 million fully unaccounted for. A portion of these funds could be used to finance COVID response.

Finally, the Board could tap into General Fund Reserves in order to finance these emergency appropriations. Unassigned Reserves currently sit at \$52.75 million, or 9.9% of operating revenues. This is \$8.15 million above the minimum Reserve level of 8.3%, or one month's operating revenues, but \$36.45 million below the target reserve level of two months operating revenues. The County Administrator recommends against using reserves for local aid.

Given the potential additional aid that may be allocated by the Biden Administration and the State Legislature in the coming weeks, the Board should also consider waiting to establish any additional local aid program to ensure that the County's program addresses the most critical gaps.

Prior Board Actions:

12/15/2020 - Department of Health Services COVID-19 Emergency Response

10/20/2020 - Enhanced COVID-19 Response Strategy

9/1/2020 - Coronavirus Relief Fund Community Needs Funding Plan

FISCAL SUMMARY

Expenditures	FY 20-21 Adopted	FY 21-22 Projected	FY 22-23 Projected
Budgeted Expenses			
Additional Appropriation Requested			
Total Expenditures			
Funding Sources			
General Fund/WA GF			
State/Federal			
Fees/Other			
Use of Fund Balance			
Contingencies			
Total Sources			

Narrative Explanation of Fiscal Impacts:

The Department of Health Services will be returning to the Board to request additional revenue and expenditures appropriations to continue the COVID-19 Response through June 30, 2021.

The Department continues to monitor the level of response needed to address the COVID-19 pandemic and will request additional appropriations as part of the FY 21-22 Recommended Budget that will be commensurate with the level of response needed based on pandemic conditions existing at that time. The Department will continue to refine its COVID-19 Response plan and Enhanced COVID-19 Strategies based on efficacy and finite resources.

Overall, the costs of the COVID-19 Response for fiscal year 2020-2021 are estimated at \$76.5 million funding approved based on current known conditions as of the date of this Report. The \$76.5 million excludes the additional \$1,647,378 in funding for the On-the-Move contract approved by your Board on December 15, 2020, in a separate Board agenda item. The County continues to leverage funding and department staff anticipates receiving reimbursement of approximately \$48.6 million from various Federal and State sources during fiscal year 2020-2021.

The COVID Economic Relief HR 133 Appropriations Bill signed into Law on December 27, 2020, extends the CARES Act funding through December 31, 2021, but uncertainty remains as to whether the State will grant the same extension to counties that have not fully spent their allocation as of December 31, 2020. State law still requires these funds to be spent consistent with the original federal deadline. When the State Legislature reconvenes in January, Legislators will evaluate how HR 133 changes the framework and deadlines in State law. The Department will be requesting County discretionary funding pending additional information on the status of the CARES Act extension from the State that will be released during the first quarter of 2021.

We anticipate that most of the \$20.2 million of estimated remaining costs will require County discretionary funds if additional federal/state aid is not available to the level needed.

The COVID Economic Relief HR 133 Appropriations Bill also includes funding in the Public Health and Social Services Emergency Fund for testing, contact tracing and other activities necessary to effectively monitor and suppress COVID-19. The level of additional federal funding is unknown as of the date of this report. The

Agenda Date: 1/5/2021

Department will continue to monitor funding sources that may become available for the COVID-19 Response to offset the projected use of County funds for this emergency response.

April 1, 2021 through June 30, 2021 Period

The costs are estimated for the COVID-19 Response (\$15,712,287), Enhanced COVID-19 Strategies (\$5,454,498) and Vaccination Coordination (\$359,933) at \$21,526,718 from April 1, 2021 through June 30, 2021.

The sources of funding for the Alternate Care Sites and Non-congregate Sites from April 1, 2021 through June 30, 2021 is FEMA reimbursement estimated at \$5,647,962 (75%) with County match of \$1,882,654 (25%). The County match will most likely be funded with CARES Act from the \$25 million of CARES Act funding approved on September 1, 2020, by your Board, assuming that the State extends the CARES Act funding through December 31, 2021.

The COVID-19 Section and other necessary equipment from April 1, 2021 through June 30, 2021 are partially funded with the Paycheck Protection (PPP) Epidemiology and Laboratory Capacity (ELC) grant funding of \$2,512,591. The total award of the PPP ELC grant was \$4,996,352 and we anticipate that the remaining balance of \$2,483,761 (\$4,996,352 less \$2,512,591) in appropriations approved by your Board the December 15, 2020 will be expended during the January 1, 2021 through March 31, 2021 period.

During FY 20-21, we anticipate needing \$20.2 million and \$1.6 million for the On-the-Move contract in county discretionary funding. Your Board set aside \$20 million of one-time discretionary General Fund to address the anticipated overall countywide ongoing funding needs during the September 2020-21 Budget Hearings. \$1.8 million of county funds remain to be identified to fund the COVID Response through June 30, 2020. The COVID Relief Bill funding could also reduce the amount needed of County discretionary General Fund but that funding amount is unknown at this time.

The Department has updated the cost estimates and funding sources for the July 1, 2020, through December 30, 2020, period for the COVID-19 Emergency Response plan and the Enhanced COVID-19 Strategies plan approved by your Board on September 1, 2020, and October 20, 2020, respectively. The cost estimates included in Attachment 1 of the December 15, 2020 Board item were changed to include a resource for policy coordination effort in the County Administrator's Office.

Detailed expenditures and funding sources are included in Attachment 1.

Staffing Impacts:			
Position Title (Payroll Classification)	Monthly Salary Range (A-I Step)	Additions (Number)	Deletions (Number)

Narrative Explanation of Staffing Impacts (If Required):

N/A

Attachments:

Attachment 1 - Description of COVID-19 Response Activities and Cost Estimates; Allocation of Funding Sources by Activities and Periods

Agenda Date: 1/5/2021

Attachment 2 - COVID-19 Section, Enhanced COVID-19 Strategies and Vaccination Coordination

Attachment 3 - Sonoma Small Business Stabilization Grant Program

Related Items “On File” with the Clerk of the Board:

None