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June 16, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District


Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
DISPARITIES ILLUMINATED BY THE COVID-19
PANDEMIC (ITEM #9 JUNE 9, 2020 BOARD
MEETING)**

Christina R. Ghaly, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office, in collaboration with the Advancement Project's Cross-Sector Group, the Department of Public Health (DPH), the Department of Mental Health, and the Department of Health Services (DHS), to review the recommendations in How Race, Class, and Place Fuel a Pandemic and in the DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations and work with relevant stakeholders and Los Angeles County (LA County) Departments.

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This is the first response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles Sheriff Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities. As of today, universal testing of consenting individuals within JCHS youth correctional facilities has been completed. CHS continues to work toward completing universal testing of consenting individuals detained in adult correctional facilities. Both JCHS and CHS also continue their practice of performing universal testing of individuals on intake, for individuals with symptoms of COVID-19, as well as other indications. For the week of May 31st through June 6th, 2020, JCHS administered 51 tests and CHS administered 2,835 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding

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the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for June 23, 2020.

If you have any questions, please let me know. Alternatively, for questions on CHS testing, your staff may contact Jackie Clark-Weismann, CHS Director at jclark@lasd.org, or for questions on JCHS testing, your staff may contact Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network at mpereyda@dhs.lacounty.gov.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Sheriff Department
Probation Department

June 23, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

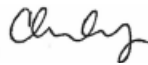
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TO: Supervisor Kathryn Barger, Chair
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This is the second response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles Sheriff Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities. Both continue their practice of performing universal testing of individuals on intake, for individuals with symptoms of COVID-19, as well as other indications. For the week of June 7th through June 13th, 2020, JCHS administered 41 tests and CHS administered 789 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for June 30, 2020.

If you have any questions, please let me know. Alternatively, for questions on CHS testing, your staff may contact Jackie Clark-

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Each Supervisor
June 23, 2020
Page 2

Weismann, CHS Director at jclark@lasd.org, or for questions on JCHS testing, your staff may contact Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network at mpereyda@dhs.lacounty.gov.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Sheriff Department
Probation Department



Health Services
LOS ANGELES COUNTY

June 30, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

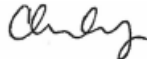
Mark Ridley-Thomas
Second District

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TO: Supervisor Kathryn Barger, Chair
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This is the third response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities. Both continue their practice of performing universal testing of individuals on intake, for individuals with symptoms of COVID-19, as well as other indications. For the week of June 14th through June 20th, 2020, JCHS administered 114 tests and CHS administered 826 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for July 7, 2020.

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If you have any questions, you may contact me or your staff may contact Jackie Clark-Weismann, CHS Director, at (530) 979-6658 or via email at jclark@lasd.org, for questions on CHS testing or Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network JCHS, at (213) 288-9000 or via email at mpereyda@dhs.lacounty.gov, for questions on JCHS testing.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Sheriff's Department
Probation Department

July 7, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

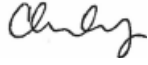
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TO: Supervisor Kathryn Barger, Chair
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DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

Effective this reporting period, CHS has completed universal testing in all consenting individuals detained in LA County correctional facilities; therefore, this confirms universal testing in all consenting individuals detained in JCHS and CHS facilities has been completed.

Additionally, the practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of June 21st through June 28th, 2020, JCHS administered 80 tests and CHS administered 1134 tests.

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Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for July 14, 2020.

If you have any questions, you may contact me or your staff may contact Jackie Clark-Weismann, CHS Director, at (530) 979-6658 or via email at jclark@lasd.org, for questions on CHS testing or Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network JCHS, at (213) 288-9000 or via email at mpereyda@dhs.lacounty.gov, for questions on JCHS testing.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

July 14, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

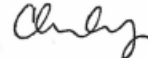
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TO: Supervisor Kathryn Barger, Chair
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Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

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This is the fifth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of June 28th through July 4th, 2020, JCHS administered 83 tests and CHS administered 2307 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for July 21, 2020.

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Each Supervisor
July 14, 2020
Page 2

If you have any questions, you may contact me or your staff may contact Jackie Clark-Weismann, CHS Director, at (530) 979-6658 or via email at jclark@lasd.org, for questions on CHS testing or Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network JCHS, at (213) 288-9000 or via email at mpereyda@dhs.lacounty.gov, for questions on JCHS testing.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

July 21, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

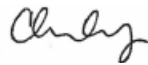
Mark Ridley-Thomas
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Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
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FROM: Christina R. Ghaly, M.D. 
Director

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This is the sixth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of July 5th through July 11th, 2020, JCHS administered 94 tests and CHS administered 1118 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for July 28, 2020.

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Each Supervisor
July 21, 2020
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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

July 28, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

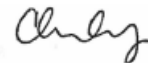
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TO: Supervisor Kathryn Barger, Chair
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Director

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This is the seventh response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of July 12th through July 18th, 2020, JCHS administered 81 tests and CHS administered 880 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for August 4, 2020.

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Each Supervisor
July 28, 2020
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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
<http://ceo.lacounty.gov>

SACHI A. HAMAI
Chief Executive Officer

July 28, 2020

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

From: Sachi A. Hamai
Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group, the Department of Public Health (DPH), the Department of Mental Health (DMH), and the Department of Health Services (DHS), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County departments to:

1. Develop and implement culturally, and linguistically, as well as literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).
2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:

- Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in high-impact communities;
 - Leverage State stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in our vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to supportive services through the engagement of community partners, federally qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
 4. Report back on the indications for testing among staff in the County's adult and youth detention facilities.
 5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
 6. Direct the CEO, in consultation with relevant departments to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of COVID-19 on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and federal COVID-19 sources.

Collaboration with The Advancement Project California's Cross-Sector Group

DPH and DHS have been working closely with the Advancement Project California's Cross-Sector Group, comprised of non-profit organizations, labor groups, community clinics, and funders, among others. The Cross-Sector Group is comprised of three workgroups: clinical game, which focuses on increasing access to COVID-19 testing and linkages to healthcare and supportive resources; air game, which focuses on the

communication strategies used to share information and resources for highly-impacted populations; and ground game, which focuses on the community outreach and education aspects of the motion. These workgroups meet regularly and are developing recommendations to inform implementation of the items described in the Board motion. The recommendations will be finalized by July 31, 2020. The attached monthly report submitted by DPH, DHS, and DMH highlights the status of current efforts and outlines next steps to support implementation of the Board motion directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

Testing of Individuals Who Are Detained in the County's Adult and Youth Detention Facilities

On June 16, 2020, DHS began providing weekly reports on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities. DHS' Juvenile Court Health Services and Correctional Health Services provide healthcare services, including testing, to adults and youth detained in LA County correctional facilities. DHS will continue to report weekly.

Indications for Testing Among Staff in the County's Adult and Youth Detention Facilities

A response to directive #4, indications for testing among staff in the County's adult and youth detention facilities, will be included in the next monthly report on August 10, 2020.

Funding to Support Motion Directives

The pending submission of the Cross-Sector Group's final recommendations will provide a framework upon which to determine the funding needed to support the motion directives. There are multiple funding sources that could support the directives, such as funding the County received for the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which includes line items that would provide funding for these directives. The Board approved a CARES spending plan on July 21, 2020, that includes a comprehensive approach and strategies to address not only testing, tracing and a broad public health response, but also a robust plan to focus on addressing the needs of the County's most vulnerable populations -- particularly communities of color. DPH and DHS also have received other COVID-19 grants to address pandemic response efforts. The CEO intends to leverage available funding sources in a manner that enables the County to maximize funding, to the extent possible, and ensure that any funding recommendation also aligns with the Cross-Sector Group's recommendations. A detailed reporting of all funding sources will be provided in a future Board update.

Each Supervisor
July 28, 2020
Page 4

The CEO will submit the next monthly report to the Board on August 10, 2020. If you have questions or would like additional information, please contact Avianna Uribe at (213) 974-6837 or by email at auribe@ceo.lacounty.gov.

SAH:FAD:TJM
AU:ma

Attachment

c: Executive Office, Board of Supervisors
Health Services
Mental Health
Public Health

Monthly Report: A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
Thursday, July 23, 2020

Public Education Campaigns

Since the beginning of this pandemic, the Departments of Health Services (DHS), Mental Health (DMH), and Public Health (DPH) have worked to communicate key COVID-19 related information and resources that support the well-being of all County residents.

Since March, all three departments have worked closely with the Board of Supervisors and the Los Angeles County (LAC) Joint Information Center (JIC) to provide media briefings. These briefings began reporting COVID-19 cases, deaths, hospitalizations, testing counts, positivity rates, and related mental health impacts among the general LAC population. Over time, and as data improved, the briefings evolved to include the aforementioned information by race, ethnicity, and poverty status. In alignment with the Advancement Project California's recommendation to avoid messaging or framing that suggests highly-impacted communities' lifestyle choices and cultural practices are what lead to disproportionate numbers of cases and deaths among people of color and people living in poverty, the briefings report this data within a context that echoes the Board's recognition of racism as a public health problem and amplifies the need for collaborative, multi-sector solutions to eliminate the gaps.

The departments continue using the media briefings to provide critical information to the public. For example, DPH works closely with DHS, Sheriff, and Fire to report key data for high risk groups including healthcare workers, pregnant women, as well as staff and populations residing in congregate settings such as Skilled Nursing Facilities (SNFs) and both adult and youth detention facilities. Content regularly highlighted during these briefings includes availability of COVID-19 diagnostic testing at no cost to patients and regardless of immigration or insurance status, as well as information and resource hubs including 2-1-1 LA County and One Degree. These briefings are broadcasted on Facebook Live and Twitter, and footage is often used by local and national news channels in English, Spanish, and Armenian. Using the same platform, DPH supports a weekly ethnic media update offered in English, Spanish, Korean, and Chinese. Leaders from DPH, DHS, and DMH also serve as media spokespeople to provide subject matter expertise and in-language content (e.g., soundbites, radio segments) for local and national media channels.

All three departments have also employed various methods to reach highly-impacted communities. For example, in response to increased requests for mental health support from faith-based and community-based organizations (CBOs), DMH launched a Speakers Bureau (SB) in May 2020. The SB provides a sustainable and specialized public communication resource for culturally and linguistically diverse communities in LAC. DMH's SB is fully operable with approximately 100 licensed clinicians who are culturally and linguistically responsive and experienced with broadcast media outlets and public speaking as trainers and presenters inclusive of psychiatrists, psychologists, social workers, and marriage and family therapists. The speaker pool is representative of LAC's 13 threshold languages, plus American Sign Language, Urdu, and Thai. Additionally, the SB includes expert representation of the following cultural

groups: African American, American Indian and Alaska Native, LGBTQIA2s (Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning, Intersex, Asexual, and Two-Spirit), multi-racial, older adults, persons experiencing homelessness, veterans, and persons with physical disabilities. Clinical specialties are also represented in the DMH SB such as co-occurring substance use disorders, eating disorders, personality disorders, developmental disorders, and justice-involved and diversion efforts.

The DMH SB has received requests for mental health support from over 100 faith-based organizations and CBOs. To date, all organizations have been matched with a SB member to receive COVID-19 and social unrest–related supports. SB members assisted in the development and translation of COVID-19 resources in the threshold languages currently available on DPH's and DMH's webpages. DMH has also modified its training contractual agreement with the UCLA Hispanic Neuropsychiatric Center of Excellence to equip the SB membership with a train-the-trainer framework to effectively work with faith-based organizations and CBOs. Specialized trainings have been provided to support community education and facilitate linkage activities conducted by Promotores de Salud. Collaborations have been established between the departmental Faith-Based Liaisons and the Promotores de Salud to augment connections with the community at large.

DHS has used existing communication platforms to reach County residents, such as, text messaging, emails, and automated calls to outline safety messages and offer instructions on how to access social and medical resources. DHS also disseminates information, including how to access testing, medical services and social resources by working through existing community-facing communication infrastructure including the Whole Person Care (WPC) collaboration network, My Health LA (MHLA) community partners, and community clinics that serve COVID-19 highly-impacted communities. Generally, DHS develops messaging and materials (e.g., flyers, videos, Public Service Announcements (PSA), and [webpages](#)) with community partner and patient input, and shares it in English and Spanish at a minimum. These materials are available at DHS' COVID-19 Webpage with a dedicated fully translated Spanish webpage (<http://dhs.lacounty.gov/wps/portal/dhs/covid19>).

DPH also sends weekly emails of shareable content to community-based partners such as schools and WIC offices. These emails include community-specific handouts and branded social media toolkit materials in various languages, such as, Bring Your Own Mask (#BYOM) and #4ForEachOther that depict diverse audiences and can be shared across their own platforms. Given the 40 percent increase in cases and related hospitalizations among 18- to 40-year olds, DPH has conducted virtual focus groups with residents in this age group and has developed targeted social media content (e.g., importance of social distancing and avoiding people who do not live in their household, promoting use of cloth face coverings) for this specific audience. Focus group members have provided ideas for future messaging and campaigns that DPH will work to flesh out in partnership with community members. Additionally, DHS works with the JIC on grass roots flyer distribution to address the digital divide including outreaching at LAC food drives and resource distributions to CBOs.

DPH and DHS have also collaborated with partners to further refine and disseminate messages to address the cultural, linguistic, and other needs expressed by disproportionately impacted communities. For example, the California Endowment (TCE) purchased radio spots on stations that have predominantly African American audiences. DPH's Office of Communications and Public Affairs developed 30-second video spots with several trusted partners, including a local faith-based leader. Audio from the spots was aired on radio stations throughout June, and the videos were posted on the DPH website and on the DPH YouTube channel. DPH recently

finalized similar content in Spanish, and TCE will purchase spots on other preferred media channels for Latino/x and Asian American/Pacific Islander audiences. In addition, DMH has leveraged their existing contract related to media buys and placements to promote their Mental Health Help Line on bus tail ads.

Through the work with the Advancement Project California's Cross-Sector Group, all three departments have noted future areas of collaboration when it comes to public education campaigns. For example, CBOs involved in the Cross-Sector Group have noted the importance of having County partners clearly identify key messages and share actionable steps and resources to help carry out infection control and other directives; work with partners to co-create and tailor content to elevate community stories and meet literacy, language, and geography-based needs; and coordinate communications and resources to make it easy for CBOs to amplify the message in their local neighborhoods.

Additional investments are needed to bolster and improve the effectiveness of public education campaigns to meet the needs of highly-impacted communities, including people of color and people living in poverty. DHS has allocated \$1 million to fund communications-related work. Since DPH does not currently have a funding source specifically dedicated to communications, DPH is depending on the availability of CARES Act dollars to support these efforts.

Partnership with Local Community Clinics and CBOs

Various collaborative efforts are currently underway alongside community partners, with an emphasis on availability of COVID-19 testing, availability of PPE, linkages to healthcare and other supportive services, contact tracing, and community education and engagement.

COVID-19 testing

On April 20, 2020, development and implementation of the countywide community testing strategy transitioned from the Fire Department to DHS. In response to disproportionate COVID-19 health outcomes among people of color and people living in poverty, and in alignment with the Advancement Project California's recommendations, the testing strategy now also focuses on increasing access for highly-impacted communities. DHS developed an approach to identify high-need or gap areas for community testing based on area testing, mortality, and test positivity rates. The first GIS map of this data was issued in the [July 15, 2020 edition of the COVID-19 Community Testing Dashboard](#).

Informed by the data, DHS has partnered with local community clinics and retail pharmacies to expand community testing at mobile and walk-up sites. Significant changes have also been made to the County testing website, <https://covid19.lacounty.gov/testing/>, to make it easier for the public to identify walk-up versus mobile sites, and when possible, provides a phone number in case residents would like to make an appointment for a COVID-19 test. While increasing the number of testing sites across the County, DHS is also facilitating collaboration between community organizations and both existing and proposed testing sites in highly-impacted communities. This work entails providing access to testing resources, including advising health care facilities and providers on options to obtain reimbursement for COVID-19 testing and lab services through available state and federal programs.

To ensure high-value testing, follow-up care, and to support the long-term sustainability of testing services, DHS has begun integrating testing sites into the broader healthcare and public healthcare systems, including DHS' Ambulatory Care Network and local Federally Qualified Health Centers (FQHCs). To further increase testing access at healthcare facilities, on July 8,

2020, DPH issued a [Health Officer Order](#) aimed at increasing access to diagnostic testing for all symptomatic persons and for those who are a close contact of a laboratory-confirmed or probable case of COVID-19 through healthcare facilities, including acute care hospitals, and free-standing clinics, among others.

Availability of PPE

DHS works to identify testing-related capacity and resource needs of community-based clinics and organizations that serve highly-impacted communities to ensure they have an adequate supply of PPE for clinical staff employees. Through its Emergency Management Services (EMS), DHS works closely with the Community Clinic Associations of Los Angeles County to ensure that community clinics that provide COVID-19 testing receive needed PPE and will continue to prioritize these clinics to receive additional PPE over their regular allotment. In addition, this month, DPH and DHS partnered with Advancement Project California to distribute protective supplies to over 120 community-based sites in highly-impacted communities, distributing approximately 1 million masks, 15,000 eight-ounce bottles of hand sanitizer for community members, 10,000 face shields, and 1,000 one-gallon bottles of hand sanitizer to high-risk settings (e.g., salons, churches). In addition, DPH has been working to address gaps in PPE supplies for SNFs.

Linkages to healthcare and other supportive services

Aside from providing PPE, DPH, DHS, and DMH work to ensure community members are linked to the healthcare and supportive resources they need. For those who need referrals to social supports and have limited access to the internet, DHS, DMH, and DPH continue promoting phone-based use of 2-1-1 LA County. Whether over the phone or through the web, 2-1-1's referral resources provide access to primary care services, behavioral health, and other social service supports. DPH works closely with 2-1-1 LA County and provides daily updates on the status of COVID-19 in LA County so that they stay abreast with the latest information to respond to questions from the public. DHS also works closely with One Degree (1degree.org), an online information and referral platform for social services and supports, that allows community members to find resources using an accessible search engine that links to a robust set of COVID-19 specific resources (<https://about.1degree.org/covid-19-la-en>). Additionally, County employees and contractors can set up a "pro-user" account and use it to search, make, and track progress on referrals made for community members. Further, DMH has also worked to address the need for mental health resources by co-developing COVID-19 materials to assist individuals, families, and communities:

- Find relief from pandemic-related fears and stress;
- Get support and guidance for the re-integration of daily structure; and
- Process feelings of distrust and anger, and foster engagement in healthy coping skills.

DMH translated these materials into various languages. These materials are available on DPH's [COVID-19 webpage](#) as well as on DMH's own [Coronavirus/COVID-19 Mental Health Resources webpage](#). DMH also continues promoting use of their Help Line at 800-854-7771 as well as availability to [Headspace for LA County](#) residents and employees through December 2020.

Contact tracing

Through the work with Advancement Project California's Cross-Sector Group, it has become increasingly clear that availability and accessibility of local resources and referrals made by trusted messengers are key to helping people comply with directives aimed at promoting health and safety, including activities related to contact tracing. Clarifying the spectrum of contact tracing activities and where support from partners is needed has been a priority during this reporting period.

Contact tracing is a confidential process led by DPH to monitor patient symptoms and close contacts in order to slow the spread of COVID-19. This process begins when a laboratory or a healthcare provider notifies DPH about a positive test result. DPH then assigns the case to a Public Health specialist who will conduct a confidential follow-up interview with the case (case investigation). Case investigation requires that trained public health specialists interview individuals who have a positive lab result to solicit information about their risks, possible exposures, and their close contacts, answer questions, and ensure that the person who is positive is connected to support while they isolate from others for a minimum of 10 days. The public health specialist notifies the list of potential close contacts of their potential exposure without revealing the identity of the case. Close contacts are provided with information and resources to ensure that they can self-quarantine from others for 14 days. The Health Officer Order mandates that those infected with COVID-19 isolate and all close contacts quarantine; this strategy avoids having people who are positive from spreading the virus to others. It also helps assure that those that are close contacts avoid possibly exposing others during the period when they could become positive. As of July 13th, public health specialists completed interviews with 70 percent of identified close contacts, which is almost 23,000 people. As of July 21, there have been 2,500 contact tracers identified. About 1,600 are currently working as contact tracers and the others are being trained to begin their contact tracing work.

DPH is preparing for a continued rise in the number of confirmed COVID-19 cases that may reach 5,000 new confirmed cases a day. To prepare for potential future waves of new cases, and as the County resumes its in-person day-to-day operations that requires reassigned staff to return to their regular work assignments, DPH efforts may need support from local partners who have trusted relationships in and oftentimes reflect the racial, ethnic, and linguistic diversity of local neighborhoods to augment contact tracing and most importantly, to work with cases and close contacts to determine their needs related to COVID-19 and help them access wrap-around services that promote well-being and facilitate compliance with isolation and quarantine directives (e.g., employment/unemployment benefits, CalFresh, housing, conflict resolution, and domestic/intimate partner violence resources) in their preferred language.

Contracting with CBOs

On Friday, July 10, 2020, DHS issued a Capacity Building Work Order Solicitation (WOS) that was co-written by DHS and DPH and sought to secure a fiscal/programmatic intermediary to work with local community-based entities. As recipients of federal Epidemiology and Laboratory Capacity (ELC) dollars, both DPH and DHS developed this joint WOS to ultimately speed up contracting processes, avoid duplicative services to maximize investments, and directly address the areas outlined in this motion. Specifically, the WOS aimed to identify organizations that could serve as a fiscal and programmatic/coordination intermediary for CBOs that will support COVID-19 diagnostic testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities. Interviews with qualifying entities took place on Thursday, July 16, 2020, and a qualified candidate should be selected before the end of the month. To date, DPH and DHS have allocated a total of more than \$13 million in ELC dollars to testing and contact tracing-related system navigation, outreach and engagement, with DHS allocations totaling \$3.1 million and DPH allocations totaling \$10 million.

Partnering with County Departments

On June 26, 2020, a survey was distributed to all Department Heads to assess their capacity to support health equity efforts related to COVID-19 (e.g., funding, existing activities/resources, partners and spaces that may amplify messaging), and to ensure coordination with any other

complementary Board motions. Twenty-eight County departments responded to the survey, revealing the following:

- 60 percent (15/25) of the departments indicated they serve communities of color;
- 54 percent (15/28) have coalitions, committees, or networks that could share COVID-19 information or upcoming funding opportunities, such as the sector specific collaboratives, email newsletters, and various commissions;
- 21 percent (6/28) indicated they have existing funding or upcoming grants that can support a multi-sector partnership that increases access to resources, in-language, culturally responsive communication and education/outreach; and
- 56 percent (15/27) of the respondents are interested in participating in a workgroup to support the planning and implementation of this Board motion.

A meeting took place on July 24, 2020, with the respondents from County departments who expressed an interest in supporting implementation of this Board motion. This workgroup reviewed the results of the preliminary survey and discussed opportunities to leverage each other's resources and efforts (e.g., efforts to increase completion of the 2020 Census). A follow-up meeting will be scheduled with meeting participants to identify specific action items and next steps in support of the Board motion.

Next Steps

1. Continue collaborating with the Advancement Project California's Cross-Sector Group.

DPH, DHS, and DMH look forward to continued participation in the Advancement Project California's Cross-Sector Group. As noted in the memo, each of the three workgroups is developing recommendations for CEO consideration no later than July 31, 2020. At this time, the Cross-Sector Group is working to leverage existing communication resources including an initial philanthropic investment made to support work alongside the ethnic media.

2. Select a fiscal entity to sub-contract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities.

As previously noted, the process to select a fiscal/programmatic intermediary is currently underway. Once selected, DHS and DPH will have to work with the entities to develop a statement of work that clearly delineates and evaluates the work to be done by sub-contracted CBOs. DPH and DHS will ensure broad dissemination of the sub-contracting opportunity to community-based partners across the County.

3. Identify and execute a contracting mechanism to procure communication-related services.

As previously noted, additional investments are needed to bolster and improve the effectiveness of public education campaigns to meet the needs of highly-impacted communities. DHS has allocated \$1 million to fund communications-related work while DPH is pending allocation of CARES Act dollars to support these efforts. Once allocations of available funding are finalized, DHS and DPH will work to secure a contract mechanism for communication-specific services. Given the range of communications work done by various entities across the County, some of which are temporary entities currently available as part of the County emergency response (e.g., JIC), coordinated efforts and shared outcomes will be key to address needs raised by the

Advancement Project California's Cross-Sector Group and to ensure sustainability of efforts (e.g., media briefings, social media content, written translation) beyond existing contracts and partnerships.

4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this motion.

Opportunities to deepen collaboration with other County departments and external partners, including philanthropic entities and managed care entities, will continue to be a priority in the upcoming reporting period. DPH and DHS are working closely with the County Center for Strategic Partnerships to ensure streamlined and coordinated action with local funders who are interested in supporting COVID-19 response efforts. Currently, DPH and DHS are developing a coordinated plan of action that clearly outlines activities related to testing, contact tracing, system navigation, communication, and education and outreach as well as any potential gaps in funding, especially in light of increasing community spread. This plan will be complete by August 15, 2020.

August 4, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

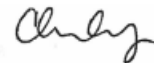
Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
DISPARITIES ILLUMINATED BY THE COVID-19
PANDEMIC (ITEM #9 JUNE 9, 2020 BOARD
MEETING)**

Christina R. Ghaly, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office, in collaboration with the Advancement Project's Cross-Sector Group, the Department of Public Health (DPH), the Department of Mental Health, and the Department of Health Services (DHS), to review the recommendations in the report *How Race, Class, and Place Fuel a Pandemic* and in the DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations and work with relevant stakeholders and Los Angeles County (LA County) Departments.

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Los Angeles, CA 90012

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Fax: (213) 481-0503

www.dhs.lacounty.gov

This is the eighth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of July 19th through July 25th, 2020, JCHS administered 50 tests and CHS administered 1090 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for August 11, 2020.

*"To advance the health of our
patients and our communities by
providing extraordinary care"*



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Each Supervisor
August 4, 2020
Page 2

If you have any questions, you may contact me or your staff may contact Jackie Clark-Weismann, CHS Director, at (530) 979-6658 or via email at jclark@lasd.org, for questions on CHS testing or Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network JCHS, at (213) 288-9000 or via email at mpereyda@dhs.lacounty.gov, for questions on JCHS testing.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

August 11, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

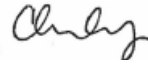
Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
DISPARITIES ILLUMINATED BY THE COVID-19
PANDEMIC (ITEM #9 JUNE 9, 2020 BOARD
MEETING)**

Christina R. Ghaly, M.D.
Director

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DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of July 26th through August 1st, 2020, JCHS administered 62 tests and CHS administered 900 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for August 18, 2020.

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*"To advance the health of our
patients and our communities by
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Each Supervisor
August 11, 2020
Page 2

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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



SACHI A. HAMAI
Chief Executive Officer

County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
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August 17, 2020

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

From: Sachi A. Hamai 
Chief Executive Officer

Board of Supervisors

HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group, the Department of Public Health (DPH), the Department of Mental Health (DMH), and the Department of Health Services (DHS), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County departments to:

1. Develop and implement culturally, and linguistically, as well as literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).

"To Enrich Lives Through Effective And Caring Service"

2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:
 - Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in high-impact communities;
 - Leverage State stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in our vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to supportive services through the engagement of community partners, federally qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
4. Report back on the indications for testing among staff in the County's adult and youth detention facilities.
5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of COVID-19 on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and federal COVID-19 sources.

This is the second monthly report and contains the following updates:

- Status of continued collaborative efforts with the Advancement Project California's Cross Sector Group;
- Status of efforts and additional investments to bolster and improve the effectiveness of public education campaigns;

Each Supervisor
August 17, 2020
Page 3

- Status of efforts to partner with CBO's to support COVID-19 testing and contact tracing efforts; and
- Indications for testing among staff in the County's adult and youth detention facilities.

The attached monthly report submitted by DPH, DHS, and DMH highlights the status of current efforts and outlines next steps to support implementation of the Board motion directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

Funding to Support Motion Directives

On July 21, 2020, the Advancement Project California's Cross-Sector Group issued its *Implementation Recommendations from the Race and COVID-19 Cross-Sector Working Groups*. The Advancement Project California reviewed their recommendations with the CEO, representatives from Board offices that co-authored the motion, and participating County departments on August 6, 2020. Further review will be done to ensure that the Cross-Sector Group's final recommendations serve as a framework to determine how best to allocate available funding.

The CEO will submit the next monthly report to the Board on September 9, 2020. If you have questions or would like additional information, please contact Avianna Uribe at (213) 974-6837 or by email at auribe@ceo.lacounty.gov.

SAH:FAD:TJM
AU:ma

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Monthly Report: A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
Monday, August 17, 2020

The following activities have taken place since the last report was issued on July 28, 2020.

Public Education Campaigns

The Department of Public Health (DPH) Community Field Services (CFS) division and Center for Health Equity (CHE) have worked with local partners to identify and develop audience-specific fact sheets and/or infographics for African American, Latinx, Asian American, Native Hawaiian and Pacific Islanders, and American Indian & Alaska Native communities. The fact sheets and infographics are included on the DPH website and can be found using the following hyperlink ([please see section titled individual, family or specific group](#)). In addition, CFS and CHE staff have linked local community-based organizations (CBOs) with County entities (e.g., Joint Information Center [JIC], Board offices) to capture culturally-appropriate photographs and video footage for campaign materials (e.g., Native Hawaiians and Pacific Islander families for [Bring Your Own Mask \(#BYOM\) campaign](#)) and to explore opportunities to secure translation services for indigenous languages. The Department of Health Services (DHS) also worked with the JIC on the [#TheRiskIsReal campaign](#) featuring two DHS patients impacted by COVID-19.

Leveraging existing communications resources continues to be a top priority. For instance, DPH recently developed a wallet-size brochure on contact tracing and shared printed copies with DHS and the City of Los Angeles for dissemination at COVID-19 testing sites. DHS continues sharing COVID-19 testing-related information through their Whole Person Care (WPC) collaboration network, My Health LA (MHLA) community partners, and community clinics that serve COVID-19 highly-impacted communities. The Department of Mental Health (DMH) continues utilizing its Speakers Bureau (SB) and health promoters to share information and resources with over 100 CBOs and faith-based organizations. By serving as ambassadors and building bridges with Los Angeles County's culturally and linguistically diverse communities, SB members facilitate identification and provision of culturally competent interventions. Collectively, the SB and health promoters assist communities in navigating the complexities often associated with access to competent care and resources, during and beyond the COVID-19 pandemic.

The departments are also implementing innovative approaches, including text-based strategies. For example, DPH recently implemented [Angelenos in Action](#), a voluntary weekly text message survey to track COVID-19 symptoms across LA County. By tracking LA residents' COVID-19 symptoms in real time, DPH better understands the health of LA County residents, including which communities and geographical areas are most impacted by the outbreak. Currently, the survey is available in English and Spanish. Information collected is kept completely private and is only used to prioritize DPH's public health response.

As previously reported, additional investments are needed to bolster and improve the effectiveness of public education campaigns to meet the needs of highly-impacted communities, including people of color and people living in poverty. DHS allocated \$1 million to fund

communications-related work. Based on the availability of Coronavirus Aid, Relief, and Economic Security (CARES) Act dollars, DPH has also allocated \$1 million to fund these efforts.

Partnership with Local Community Clinics and CBOs

Various collaborative efforts are currently underway alongside community partners, with an emphasis on availability of COVID-19 testing, availability of Personal Protective Equipment (PPE), linkages to healthcare and other supportive services, contact tracing, and community education and engagement.

COVID-19 Testing

DHS has focused resources in new testing sites and expanded testing capacity at locations that align with high need or gap areas for community testing based on area testing, mortality, and test positivity rates. This includes new locations in:

- South Gate, Montebello, Panorama City, Rancho Los Amigos–South Campus, Los Angeles–West Lake, Florence-Firestone, Compton, and Azusa;
- DHS health centers (Lake Los Angeles, Wilmington, Mid-Valley, El Monte, Hubert H. Humphrey, and High Desert Regional); and
- DPH public health centers (Pacoima and North Hollywood).

In addition, the County testing website (<https://covid19.lacounty.gov/testing/>) has been updated, to include information on which testing sites have available appointments, test minors, and are walk-up only (by appointment).

Availability of PPE

DHS and DPH continue to deploy PPE into the community. For example, during the month of July, DPH and DHS worked with “pop-up” testing sites, supporting areas with highest test positivity, to distribute face coverings and hand sanitizer to community members.

Linkages to Healthcare and other Supportive Services

Given the fears regarding contact tracing, particularly among undocumented individuals and families, DPH established a dedicated call line for COVID-19 confirmed cases. If someone has tested positive for COVID-19 and has not yet connected with a public health specialist, he/she can call the toll-free number (1-833-540-0473) to get connected to and receive more information on services. Residents who do not have COVID-19 should continue to call 2-1-1 for more information.

DPH, DHS, and DMH work to ensure community members are linked to healthcare and supportive resources through the use of 2-1-1 LA County and One Degree (<https://about.1degree.org/covid-19-la-en>). DMH also continues promoting the use of their Help Line at 800-854-7771 as well as availability to [Headspace for both LA County](#), a meditation resource, to residents and employees through December 2020.

Contact Tracing

Given increases in COVID-19 cases and hospitalizations, DPH continues recruiting and onboarding contact tracers. As of July 21, 2020, 2,800 contact tracers have been identified; approximately 2,500 individuals are currently working as contact tracers and the remaining 300 individuals are being trained to begin their contact tracing work.

CBO support is important to contact tracing efforts. As of July 21, 2020, public health specialists completed interviews with about 65 percent of cases (n = 82,796) and more than 71 percent of identified close contacts (n = 31,650). On average, less than 50 percent of cases provide information about their close contacts, due to fears associated with losing their job, housing, and/or relationships as well as general mistrust of government's use of personal information. DPH is sensitive to these concerns and is limited in its ability to force people to disclose information. As a result, having trusted community-based partners communicate availability of local resources and make needed referrals to impacted individuals are essential components of the work CBOs will be funded to do (see contracting update below).

In addition, on August 3, 2020, DPH implemented a pilot incentive program, which offered \$20 gift cards to encourage people to complete the nearly one-hour interview with the contact tracer. Although offering incentives is not a component of day-to-day contact tracing efforts, DPH was interested in determining whether such a strategy could be helpful during these unprecedented times. Currently, we are seeing that the incentive program works; in the first three days of the pilot, we saw a marked increase in successfully obtaining information about close contacts. Prior to the incentive program, 38 percent of people provided close contacts, compared to 62 percent once the program launched. Since the incentive program started, we have distributed more than 4,600 gift cards.

Contracting with CBOs

On Friday, July 10, 2020, DHS issued a Capacity Building Work Order Solicitation (WOS) that was co-written by DHS and DPH and sought to secure a fiscal and programmatic intermediary to work with local CBOs. Specifically, the WOS aimed to identify organizations that could serve as a fiscal and programmatic coordination intermediary for CBOs that will support COVID-19 diagnostic testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities. A total of four entities responded to the WOS. Letters were sent to the selected and non-selected respondents and interviews were conducted with selected respondents. Interviews with qualifying entities took place on July 16, 2020.

Based on the results of these interviews, a fiscal/programmatic intermediary was selected and final documents (e.g., Statement of Work [SOW]) were sent on July 31, 2020, for the entity to review.

To date, DPH and DHS have allocated more than \$13 million in grant dollars for testing and contact tracing-related system navigation and outreach and engagement, with DPH allocations totaling \$10 million and DHS allocations totaling \$3.1 million. More funds may be allocated based on additional need and available funding.

Partnering with County Departments

The inaugural meeting of departmental representatives took place on July 24, 2020. There were 15 departments with over 30 representatives in attendance, including Alternate Public Defender, Arts and Culture, Chief Executive Office, Child Support Services, Children and Family Services, Consumer and Business Affairs, Internal Services, LA County Library, Military and Veterans Affairs, Office of Education, Public Defender and Public Social Services. During this first meeting, attendees reviewed the Board motion and identified ways they could contribute to its implementation. Further details regarding collaborative efforts will be outlined in the September report back.

Indications for Testing Among Staff in the County's Adult and Youth Detention Facilities

The July 14, 2020 California Department of Public Health (CDPH) Updated COVID-19 Testing Guidance recommends those who work in a correctional facility, among other specific groups, and who are asymptomatic be prioritized second for testing. The California Department of Health Care Services (DHCS) and the California Department of Managed Health Care (DMHC) have both issued guidance or regulation related to COVID-19 diagnostic testing. Detention staff who want to be tested on a routine basis should discuss this with their healthcare provider.

Since testing does not supersede the importance of preventing infections from occurring, DPH does not recommend a universal “testing as prevention” strategy for detention staff. Adherence to universal mask wearing or, if medically exempted, face shields with a drape, frequent hand hygiene, cleaning and disinfection measures, physical distancing, and contact investigations (as noted below) are all required to both prevent and limit the spread of COVID-19 in correctional facilities.

Testing, however, is recommended for those close contacts during contact tracing of positive cases in correctional facilities. DPH provides guidance and recommendations to each separate department (DHS' Correctional Health Services, DHS' Juvenile Court Health Services, Sheriff, and Probation) on contact investigations and protocols for detecting additional cases and for responding to an outbreak, including testing among their staff based on the investigation findings.

Aside from reinforcing strict infection control measures, DPH guidance recommends that correctional facilities screen and separate symptomatic staff for fever and acute respiratory symptoms before entering the facility and maintain social distancing during screening. Staff who are symptomatic are not allowed to enter the facility and are sent home immediately. If these measures are not feasible on entry, staff should complete attestations that they have checked their temperature, do not have a fever, and do not have COVID-19 symptoms. Additionally, they should be reminded to check their temperature and report any COVID-19 symptoms before they leave their home for work and 12 hours after their shift begins. Sick staff must notify their manager if they get tested for COVID-19. Currently, all individuals entering any of the County jail facilities are asked to check their temperature twice a day and self-screen for symptoms of COVID-19; individuals without access to a thermometer at home are provided with one upon entry to work. Juvenile probation does both symptom and temperature checks upon entry for all staff.

Next Steps

1. Continue collaborating with the Advancement Project California's Cross-Sector Group.

On July 21, 2020, the Advancement Project California's Cross-Sector Group issued its *Implementation Recommendations from the Race and COVID-19 Cross-Sector Working Groups*. On August 6, 2020, the Advancement Project California reviewed the recommendations with the CEO, representatives from Board offices that co-authored the motion, and participating County departments. Next steps from that meeting will be included in the September report back.

DPH, DHS, and DMH met with the Advancement Project California's (APC) Cross-Sector Group on July 23, 2020. During this meeting, APC reviewed the recommendations with the entire group, sought input from small groups about the current process, and expressed their commitment

to continue the convenings. In addition, APC described their intent to expand the Cross-Sector Group to include a broader representation of entities based in highly-impacted communities across Los Angeles County, including areas in the Antelope and San Fernando Valleys.

2. Select a fiscal entity to sub-contract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities.

Once the official agreement with the fiscal/programmatic intermediary is in place, we will share the name of the selected entity. DPH and DHS are already working together to draft the SOW that will be used to identify CBOs that will be funded to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); education, outreach, and engagement to highly-impacted communities.

3. Identify and execute a contracting mechanism to procure communication-related services.

Given the recent allocations of CARES Act dollars, DPH and DHS will continue working together to identify a funding mechanism that will facilitate quick procurement of communication services for diverse audiences.

4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this motion.

Opportunities to deepen collaboration with other County departments and external partners, including philanthropic entities and managed-care organizations, will continue to be a priority. DPH and DHS are working closely with the Center for Strategic Partnerships to ensure coordinated action with local funders who are interested in supporting COVID-19 response efforts. A coordinated proposal is still in development and is anticipated to be completed by the end of August 2020.



Health Services
LOS ANGELES COUNTY

August 18, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
DISPARITIES ILLUMINATED BY THE COVID-19
PANDEMIC (ITEM #9 JUNE 9, 2020 BOARD
MEETING)**

Christina R. Ghaly, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office, in collaboration with the Advancement Project's Cross-Sector Group, the Department of Public Health (DPH), the Department of Mental Health, and the Department of Health Services (DHS), to review the recommendations in the report *How Race, Class, and Place Fuel a Pandemic* and in the DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations and work with relevant stakeholders and Los Angeles County (LA County) Departments.

This is the tenth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of August 2nd through August 8th, 2020, JCHS administered 63 tests and CHS administered 1011 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for August 25, 2020.

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Each Supervisor
August 18, 2020
Page 2

If you have any questions, you may contact me or your staff may contact Jackie Clark-Weismann, CHS Director, at (530) 979-6658 or via email at jclark@lasd.org, for questions on CHS testing or Dr. Margarita Pereyda, Chief Medical Officer, Ambulatory Care Network JCHS, at (213) 288-9000 or via email at mpereyda@dhs.lacounty.gov, for questions on JCHS testing.

CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

August 25, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

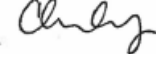
Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
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MEETING)**

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Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

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This is the eleventh response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with LA County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues, for individuals with symptoms of COVID-19, as well as other indications. For the week of August 9th through August 15th, 2020, JCHS administered 139 tests and CHS administered 1041 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for September 1, 2020.

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Each Supervisor
August 25, 2020
Page 2

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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



Health Services
LOS ANGELES COUNTY

September 1, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
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MEETING)**

Christina R. Ghaly, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

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This is the twelfth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues for individuals with symptoms of COVID-19, as well as other indications. For the week of August 16th through August 22nd, 2020, JCHS administered 74 tests and CHS administered 1,292 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will continue to provide weekly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for September 1, 2020.

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Each Supervisor
September 1, 2020
Page 2

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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department

September 9, 2020

**Los Angeles County
Board of Supervisors**

Hilda L. Solis
First District

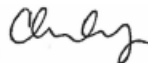
Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Janice Hahn
Fourth District

Kathryn Barger
Fifth District

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **A JUST AND EQUITABLE RESPONSE TO
DISPARITIES ILLUMINATED BY THE COVID-19
PANDEMIC (ITEM #9 JUNE 9, 2020 BOARD
MEETING)**

Christina R. Ghaly, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Deputy Director, Clinical Affairs

Nina J. Park, M.D.
Chief Deputy Director, Population Health

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This is the thirteenth response to directive number three to report back weekly on the current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities; therefore, it is reflective of the testing efforts collaboratively working with Los Angeles County Sheriff's Department (LASD) and Probation.

DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The practice of performing universal testing of individuals on intake continues for individuals with symptoms of COVID-19, as well as other indications. For the week of August 23rd through August 29th, 2020, JCHS administered 54 tests and CHS administered 1,099 tests.

Moving forward, as directed by your Board, DHS, in collaboration with LASD and Probation, will provide monthly reports regarding the number of COVID-19 tests administered in the detention facilities. The next report is scheduled for October 8, 2020.

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Each Supervisor
September 9, 2020
Page 2

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CRG:amg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Los Angeles County Sheriff's Department
Probation Department



County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
<http://ceo.lacounty.gov>

FESIA A. DAVENPORT
Acting Chief Executive Officer

September 22, 2020

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

From: Fesia A. Davenport
Acting Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group (APCCSG), the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County of Los Angeles (County) departments to:

1. Develop and implement culturally, and linguistically, as well as literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).

2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:
 - Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in high-impact communities;
 - Leverage State stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods, to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in its vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to support services through the engagement of community partners, Federally-qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
4. Report back one-time on the indications for testing among staff in the County's adult and youth detention facilities.
5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of COVID-19 on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control [CDC] testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and Federal COVID-19 sources.

This is the third monthly report to the Board, which contains the following updates:

- Status of efforts to bolster and improve the effectiveness of public education campaigns;
- Status of efforts to partner with CBOs to support COVID-19 testing and contact tracing efforts; and
- Status of continued collaborative efforts with the APCCSG.

The attached monthly report submitted by DHS, DMH, and DPH, highlights the status of current efforts and outlines next steps to support implementation of the Board's motion directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

Funding to Support Motion Directives

The Board approved a comprehensive Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds (CRF) spending plan that outlined various strategies to address not only testing, tracing, and a broad public health response, but also a robust plan to focus on addressing the needs of the County's most vulnerable populations—particularly communities of color, which data reveals have been disproportionately impacted. Part of the spending plan included \$2.0 million for DPH to engage in a communications campaign around COVID-19, which will embark on a multi-faceted, multi-media campaign that is not only culturally and linguistically competent, but also includes targeted messaging for communities of color in the County. On September 15, 2020, the Board approved additional CRF spending allocations that will provide \$30 million to support *promotoras* programs to connect immigrant communities with critical health information and services, as well as an additional \$1 million to outreach to communities through hyperlocal and ethnic media. Additionally, DHS was recently awarded a \$4.0 million grant from CDC to support a broadcast media and grassroots in the language and culturally-responsive messaging campaign, including work with CBOs to perform outreach and education to community members and provide linkages to testing, healthcare, and support services, including housing, food, and health insurance.

The CEO will submit the next monthly report to the Board on October 9, 2020.

If you have any questions concerning this matter, please contact me or Harvey Kawasaki at (213) 974-5210 or hkawasaki@ceo.lacounty.gov.

FAD:JMN:TJM
AU:ma

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Monthly Report:

A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
Wednesday, September 09, 2020

The following activities have taken place since the last report, which was issued on August 17, 2020.

Public Education Campaigns

As noted in the August 2020 report-back, in late July 2020 the Advancement Project California's (APC) Cross-Sector Group issued its *Implementation Recommendations from the Race and COVID-19 Cross-Sector Working Groups* to its members. This document included items related to the implementation of public education campaigns that, during this reporting period, the Department of Health Services (DHS) and the Department of Public Health (DPH) have been working in partnership to address. For example, DHS and DPH have prioritized drafting a Statement of Work (SOW) that reflects the sage advice offered by the multi-sector partners to contract a communications firm specialized in culturally, linguistically and literacy-appropriate awareness, and outreach and educational campaigns. Both DHS and DPH have each committed \$1 million for a total of \$2 million in funding to support these efforts. To further inform this work, DHS and DPH have sought counsel from County of Los Angeles (County) entities, including the Department of Consumer and Business Affairs (DCBA) and the Chief Executive Office (CEO), who have both executed similar contracts.

Meanwhile, additional communications-related activities are currently underway that can facilitate efforts once the agreement with the communications firm is in place. For instance, DHS has launched a beta testing educational campaign in partnership with One Los Angeles-Industrial Areas Foundation (LA-IAF), to serve as a model for co-designing educational materials delivered through community education teams. One LA-IAF is an entity made up of member organizations throughout Los Angeles County, including health clinics and non-profits and faith-based groups. One LA-IAF partners work with religious congregations and civic organizations at the local level to build broad-based organizing projects, which create new capacity in a community for leadership development, citizen-led action, and relationships building across communities. One LA-IAF provides education, leadership, and organizing skills to members. DHS co-developed bilingual materials with One LA-IAF. Using the materials, One LA-IAF and DHS held a virtual 'Civic Academy' in early August 2020 to educate One LA-IAF members about topics such as when and how to get tested for COVID-19, and how to isolate or quarantine. The presentation also included messaging about COVID-19 testing regardless of ability to pay, immigration, or insurance status, and provided information about how to access social services, medical care, and mental health care. One LA-IAF members plan to adapt the material and present it to their congregations and communities over the next several weeks.

DHS also partnered with DPH and the CEO Joint Information Center (JIC) to develop a social media resource hub with evergreen messaging on staying safe at home, staying safe in the community, COVID-19 testing, and patient voices. The resources are included in the County's COVID-19 Community Toolkit in various languages

(<https://covid19.lacounty.gov/community-toolkit/>). The COVID-19 Community Toolkit and related educational outreach flyers have been shared with actively engaged community partners in highly impacted communities (e.g., the Advancement Projects' Community Coalition groups, One LA-IAF, Community Clinic Association of Los Angeles County [CCALAC], and L.A. Care Health Plan), for direct dissemination.

The departments also continue leveraging existing partnerships and opportunities to connect directly with community members. The Department of Mental Health's (DMH) Speakers Bureau (SB) members have conducted community-based outreach in all 13 threshold languages in Los Angeles County. SB has delivered multiple mental health presentations and trainings reaching approximately 3,500 community members in a one-month span. Additionally, SB has been collaborating with other County departments to provide trainings regarding the impact of the COVID-19 pandemic and the increased social unrest on mental health community members, organizations, and communities at large. Several media consulting groups reached out to the SB seeking the cultural and linguistic expertise of its members for the development of new public service announcements (PSAs) and other media products. Requests for television, radio, and local media public speaking engagements continue to be addressed by SB members, and many are aired locally, nationally, and internationally.

Additionally, during this reporting period, DPH participated in two roundtable discussions with local community leaders on the topic of health and racial equity in Los Angeles County. One event was hosted in collaboration with City of Inglewood Mayor James T. Butts Jr. and Snoop Dogg on August 7, 2020. The second event was hosted on August 17, 2020, in partnership with LA Sparks Head Coach Derek Fisher and professional basketball players Candace Parker and Nneka Ogwumike. The events were livestreamed on Facebook, Twitter, and YouTube, and viewers had an opportunity to submit questions. These discussions were coordinated to broadcast COVID-19 messages and discuss the disproportionate impact of COVID-19 on communities of color. It was also intended to utilize non-traditional avenues to broaden DPH's reach and partner with trusted and popular leaders. Discussions were centered around face coverings, vaccinations, health equity, and improving health outcomes. DPH discussed expanding testing sites in communities that do not have access to healthcare services and explained the process of contact tracing in more detail. These discussions re-emphasized the general mistrust and hesitancy that communities of color feel towards government and healthcare entities due to institutional racism. Further, they foster transparency, elicit feedback from disproportionately-impacted communities on their concerns, provide insights on what type of messages resonate with these communities, and identify how we can work together to share COVID-19 prevention messaging.

Partnership with Local Community Clinics and Community-Based Organizations (CBOs)

DHS continued to work in close partnership with the CCALAC to support the launch of community testing sites at Federally-qualified health centers. Working with CCALAC, DHS provided technical assistance and resources on billing, designing workflows, obtaining Personal Protective Equipment (PPE), understanding types of tests, and adding lab capacity. DHS also worked with the clinics to connect them to the new COVID-19 County testing map so they can update their availability each day and add specific instructions for people seeking testing. Community testing is now taking place at 22 community clinics, and three more are set to start providing testing in the coming weeks.

DHS is also connecting clinics to community testing sites run by DHS contractor OptumServe. The clinics are providing education, outreach, and navigation to primary care, behavioral health, and dental treatment. The clinics target individuals who do not have a regular source of care or health insurance, and are sharing information on how to access medical and social services. For example, an outreach worker from Clinica Oscar Romero visits the Mexican Consulate testing site three days a week and has brief conversations about COVID-19 prevention and the services available at their nearby clinic sites. The outreach worker also shares written materials and discusses the 2020 Census and voter registration.

In addition, DHS partnered with LA Care, DPH, and CCALAC to engage highly-impacted communities through social media events. The organizations are planning Facebook Live events in English and Spanish to target low-income families throughout Los Angeles County. During the planned September 2020 events, a DHS subject matter expert will share critical information on testing, personal infection control, and how to obtain medical care and social services. The Facebook Live events will also feature actor Juan Pablo di Pace. The organizations are also partnering to enhance social media messaging and spread the word about prevention and testing.

DMH's SB continues to strategically serve communities disproportionately impacted by the pandemic and civil unrest. Every SB member has been paired with over 100 faith-based organizations and other CBOs from all sectors (Service Areas) of Los Angeles County that have requested mental health supports. Through collaborative efforts with SB members, these organizations are benefiting from customized interventions that are culturally relevant, linguistically appropriate, and clinically sound.

COVID-19 Testing

DHS continues to focus resources on supporting the newly-opened testing sites in the areas of highest need. In addition, DHS has expanded testing capacity and supported additional testing partners in locations, including Pico/Westlake, Boyle Heights, Glendale, Monrovia, and Covina.

In addition, the County testing website (<https://covid19.lacounty.gov/testing/>) has been updated to include a link to OneDegree, which facilitates access to information resources related to housing, food, and more, in both English and Spanish.

Availability of PPE

Between March and August 2020, DPH has distributed over 24 million pieces of PPE to assist external organizations, including long-term care facilities, adult residential care centers, assisted-living facilities, and homeless shelters. Of the total distributions, 2.7 million (approximately 10 percent) have been distributed to social service providers, including homeless shelters, domestic violence agencies, gang intervention outreach workers, and other CBOs, comprising of nearly 600 entities. DPH continues to work with key partners to disseminate PPE and other supplies that facilitate infection control practices. For example, on July 17, 2020, DPH assisted the City of Los Angeles' pop-up testing sites by supplying face masks and hand sanitizers for distribution to community members. On August 19, 2020, DPH and DHS worked in partnership on distribution efforts that reached many CBOs, small businesses, County jails, beauty salons and barber shops, food vendors, farmers' markets, community health workers/promotoras, and others serving and/or residing in highly-impacted communities. To date, DPH and DHS have conducted targeted outreach to CBOs through their existing networks. DPH will leverage available Coronavirus Aid, Relief, and Economic Security (CARES) Act funds to extend outreach to CBOs and social service providers beyond its current network.

Hospitals continue to have their PPE orders restricted by their medical supply vendors. The Emergency Medical Services (EMS) agency continues to receive N95 masks and isolation gowns from the State stockpile and pushes these items out to hospitals, EMS provider agencies (public and private), and clinics through the CCALAC. Most recently, some hospitals are reporting not receiving their full orders of medical grade gloves from their vendors; therefore, the EMS agency submitted a resource request to the State for gloves, and we are waiting for the order to be fulfilled.

Total PPE distributed by the EMS agency from February 1, 2020 through August 16, 2020:

Item	Quantity
Coveralls	5,898
Shoe Covers	46,080
Hand Sanitizers	162,997
Goggles / Face Shields	463,146
Gloves	527,040
Gowns	3,515,973
Masks (Procedure)	11,206,350
Masks (N95)	17,668,453
TOTAL NUMBER OF ITEMS	33,595,937

The drive-up community accessible testing sites are receiving PPE through DHS and the EMS agency. Community clinic-based testing sites receive their PPE through CCALAC. CCALAC receives PPE from the EMS agency. If PPE needs are identified by the individual clinic, they contact CCALAC to have their PPE requests fulfilled. For the CBO testing sites, there is an affiliation with DHS and their PPE needs are communicated to DHS. DHS provides the needed PPE either from their supply or by working with the EMS agency to provide the needed PPE that they receive from the State.

Linkages to Healthcare and Other Supportive Services

DPH continues to work closely with 2-1-1 LA County (2-1-1). Between January 23, 2020, through August 25, 2020, 2-1-1 has received a total of 226,646 COVID-19-related calls, more than 21,000 of which came through in the month of August 2020 (data as of 8/20/20). A designated DPH liaison regularly provides 2-1-1 with updated information as it becomes available, and answers any questions and concerns.

DMH has co-located licensed clinical staff to serve as specialized Disaster Service Workers (DSWs) for the "LACDMH Wellbeing Line." DMH's DSWs represent different racial and ethnic groups and have been providing culturally sound and linguistically appropriate services in Spanish, Korean, and Armenian. Persons who call the Wellbeing Line are provided emotional first-aid related to COVID-19 stressors, assistance navigating mental health services, and referrals to grief and bereavement resources. The Wellbeing Line services are available to all County employees and first responders and operates seven days a week from 10 am to 6 pm, and can be accessed at (833) 307-0509.

Contact tracing

The report back in response to the County Board motion titled, "Activating Aid for Residents Who Cannot Isolate Comfortably at Home" (Item No. 20, Board Agenda of August 4, 2020), noted that DPH has been successful in obtaining weekday contact tracing support through County, State,

and Los Angeles City DSWs. Due to these partnerships, as of August 25, 2020, approximately 36 percent (n=960) of the 2,693 individuals who are currently working as contact tracers are DSWs. DMH has partnered with DPH to identify DSWs to support contact tracing efforts. To date, DMH has identified 38 employees who are working as DSWs for the DPH-led contact tracing activities.

As of August 24, 2020, the total number of cases assigned to an interviewer was more than 179,436. Of these assigned cases, about 64 percent (n=114,123) completed the contact tracing interview; more than 65,000 close contacts were identified as a result; and more than 47,000 (73 percent) close contacts completed the contact interview.

Partnerships continue to be critical to contact tracing efforts. For example, to ensure sufficient coverage for contact tracers over the weekend, DPH and Workforce Development, Aging and Community Services have worked to leverage CARES Act funding to hire at least 100 dislocated workers for four months, from September to the end of December 2020. In addition, consultation with the Office of Immigrant Affairs (OIA) has led to plans to bolster contact tracing services to better serve immigrant communities highly impacted by COVID-19. While the aforementioned Board motion report back offers more detailed information, several opportunities for partnership have been identified between DPH and OIA, ranging from augmenting training for contact tracing staff to working with ethnic media and community-based partners to dispel myths and stigma about COVID-19 contact tracing, and enhancing linkages to wraparound County services available for immigrants and their families.

Contracting with CBOs

As noted in last month's report back, DHS and DPH have identified a fiscal intermediary for COVID-19 CBO-driven community outreach, engagement, and system navigation. The contract is currently pending execution as it is under review by the fiscal intermediary. In preparation for next steps, DHS and DPH are currently drafting the CBO sub-contracting SOW to ensure alignment with the APC Cross-Sector Workgroup recommendations and compliance with funding requirements set forth by the Federal government.

Partnering with County Departments

In addition to the collaborations noted in the previous sections, DHS and DPH have worked to partner with other County departments to perform several key activities, including educating members of the County workforce. Through partnership with the Department of Human Resources (DHR), DHS, and DMH, leaders highlighted the impact of COVID-19 for communities of color at the LA County DHR Dialogue series. Subject matter experts from each of the departments shared information on the current COVID-19 public health crisis, the County's response, and opportunities that lie ahead for the County's continued work to eliminate inequitable health outcomes in Black, Latinx, Indigenous, and other communities of color.

DMH is actively working with the CEO, Los Angeles Housing Services Authority, DPH, DHS, City of Los Angeles Office of Mayor Eric Garcetti, and the City of Los Angeles Department of Parks and Recreation, to identify DSWs and provide specialty mental health services to homeless individuals in Los Angeles County. DMH is an active partner in the following COVID-19 Crisis efforts to shelter-in-place the homeless population:

- Project Room Key
- Quarantine and Isolated Shelters
- City Shelters

Additionally, DMH trained staff deployed as shelter-based DSWs on Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning, Intersex, Asexual, and Two-spirit (LGBTQIA2s) cultural competence guidelines, with the goal of enhancing their effectiveness in working with persons experiencing homelessness who are a part of the LGBTQIA2s community. DMH also created a LGBTQIA2s resource guide, which was made available to all city shelters in response to the COVID-19 pandemic.

Next Steps

1. Continue collaborating with the APC's Cross-Sector Group.

As previously noted, the APC's Cross-Sector Group released its preliminary recommendations in late July 2020 and [posted them on their website](#) in August 2020. Many of the recommendations are already operational and others are guiding our contracting approach with our fiscal intermediary and communications firm.

2. Select a fiscal entity to sub-contract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities.

The contract with the fiscal intermediary is near completion, pending final review by the selected entity. Concurrently, the SOW is being drafted for selected CBOs.

3. Identify and execute a contracting mechanism to procure communication-related services.

DHS and DPH are actively working together to finalize the draft SOW for communication-related services that directly align with and complement the work to be done by the fiscal intermediary and selected sub-contracted entities. The DHS Professional and Technical Master Service Agreement has been identified as a potential contracting mechanism.

4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this Board motion.

As noted in previous report backs, DPH and DHS have been working closely with the County's Center for Strategic Partnerships to ensure coordinated action with local funders who are interested in supporting COVID-19 response efforts. A coordinated proposal was completed on August 26, 2020. Several philanthropic entities are currently reviewing the proposal to identify areas for direct funding. Of note, the proposal directly aligns with recommendations set forth by the APC's Cross-Sector group, as well as with other ideas elevated by additional County partners.



County of Los Angeles CHIEF EXECUTIVE OFFICE

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FESIA A. DAVENPORT
Acting Chief Executive Officer

October 21, 2020

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

From: Fesia A. Davenport
Acting Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group (APCCSG), the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and to report back monthly on work with relevant stakeholders and County of Los Angeles (County) departments to:

1. Develop and implement culturally, and linguistically, as well as literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).

2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:
 - Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in high-impact communities;
 - Leverage State stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods, to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in its vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to support services through the engagement of community partners, Federally-qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
4. Report back one-time on the indications for testing among staff in the County's adult and youth detention facilities.
5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of COVID-19 on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control [CDC] testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and Federal COVID-19 sources.

This is the fourth monthly report to the Board, which contains the following updates:

- Status of efforts to bolster and improve the effectiveness of public education campaigns;
- Status of efforts to partner with CBOs to support COVID-19 testing and contact tracing efforts;
- Status of the beginning efforts to implement the Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds \$33 million spending plan which outlined

various strategies to address not only testing, tracing, and a broad public health response but also a robust plan focusing on addressing the needs of the County's most vulnerable populations, particularly communities of color, which data shows have been disproportionately impacted; and

- Status of implementation and spending efforts from a \$4.0 million grant awarded by Centers for Disease Control and Prevention to DHS to support broadcast media and grassroots through a multi-lingual and culturally-responsive messaging campaign, including work with CBOs to perform outreach and education to community members and provide linkages to testing, healthcare, and support services, including housing, food, and health insurance.

In addition, the attached monthly report (Attachment) submitted by DHS, DMH, and DPH, highlights the status of current efforts and outlines next steps to support implementation of the Board's motion directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

The CEO will submit the next report to the Board on December 9, 2020.

Should you have any questions concerning this matter, please contact me or Harvey Kawasaki at (213) 974-5210 or hkawasaki@ceo.lacounty.gov.

FAD:JMN:TJM
HK:ma

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Monthly Report:

A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
Thursday, October 01, 2020

The following activities have taken place since the last report, which was issued on September 22, 2020.

Public Education Campaigns

As noted in last month's report back, the Department of Health Services (DHS) and the Department of Public Health (DPH) jointly drafted a statement of work related to a public education campaign for highly-impacted communities. During this reporting period, DHS used the materials developed to initiate efforts to contract a communications firm. On September 18, 2020, DHS released a Request for Qualifications, known as the Professional and Technical Services Master Agreement (PAT SMA), to seek communications firms with culturally and linguistically responsive expertise and demonstrated experience working alongside community partners. Interested parties were required to submit their applications no later than September 29, 2020. A selection process will take place in early October with the goal of the selected firm commencing work by early November 2020.

The communications firm will be responsible for delivering a culturally, linguistically, and literacy appropriate COVID-19 community awareness and education campaign through a coordinated network of County entities, community-based partners, ethnic media, and other trusted stakeholders. The campaign's goals will:

- Underscore availability of COVID-19 testing regardless of immigration status and at no cost;
- Leverage the ability of (community-based organizations) CBOs to directly reach out to their constituents and provide accurate health education information;
- Identify, strengthen, and amplify the capacity of available supportive resources; and
- Connect to information hubs (e.g., hotlines, websites).

As this contract is finalized, DPH will initiate communications-related efforts through activities conducted as part of the Community Health Worker (CHW) Outreach Initiative, currently in development. As noted in the cover memo attached to the September edition of this report, the Board of Supervisors (Board) allocated additional Coronavirus Relief Funds (CRF) to support *promotora* programs to connect immigrant communities with critical health information. A component of this work includes streamlined communications, which will be closely aligned with work done by the communications firm contracted through the PAT SMA. DHS and DPH will continue to work together to ensure coordinated messaging and ongoing collaboration.

The Department of Mental Health (DMH) also continues designing and implementing complementary communications efforts that specifically target highly-impacted communities. This reporting period, DMH continued outreaching to Los Angeles County (County) communities to provide support and promote mental health via multiple hyper local/ethnic media outlets. The

messaging is related to coping with COVID-19 challenges and well-being, the 24/7 Help Line, online resources available, and free subscriptions to Headspace. Examples of hyperlocal targeted media products include digital billboards, Metro and bus line advertisements, radio and TV spots, posters at WIC offices, and displays at commonly-frequented community sites. DMH's media outreach campaign data for late August 2020 and September 2020 demonstrates County cultural and linguistically diverse communities responded favorably to these media outreach efforts as measured by the total number of impressions. Specifically, newspapers in English, Spanish, and Chinese collected 4,184,039 impressions; television programming across 13 different stations in English and Spanish (18,173,704); radio programming in English, Spanish, Chinese, Korean, Persian, Armenian, and Vietnamese (107,161,472); WIC offices postings (2,500,000); top outdoor companies across the County (1,485,783,755); and other types of social media (1,617,802,970).

All three departments continue implementing additional communications-related activities that streamline communications across the agencies and can facilitate efforts once the agreement with the communications firm is in place. For instance, as a result of training efforts conducted with One LA-Industrial Areas Foundation (LA-IAF) last month, One LA-IAF now reports that material beta tested and co-developed with DHS is being shared broadly with their network of community and faith-based organizations, and that it has been well-received by constituents.

Further, DHS has used the learnings from the beta educational campaign conducted with One LA-IAF to launch a Community Health Worker/*Promotoras* COVID-19 Training Workshop (https://www.onela-iaf.org/covid19_resources). DHS, DMH, and DPH partnered to present online training workshops in English and Spanish on September 22 and 23, 2020 for more than 400 community health workers, peers and *promotoras*. Attendees included staff across all three departments as well as community health workers from Federally Qualified Health Centers and community organizations, such as Esperanza Community Housing, Vision Y Compromiso and Strategic Actions for a Just Economy. This invitation was also extended to community partners, such as the Advancement Project California (APC). As our Community Health Workers/*Promotoras* across LA County work in the field to support our communities (including Arabic, Armenian, Chinese, Korean, Japanese, Cambodian, Vietnamese, Russian, Farsi, Tagalog, etc.), they are now equipped with informational tools and community resources from DHS, DMH, and DPH. This workshop included information on testing, contact tracing and prevention (including for large families and employees), and provided tips and guidance on getting through the pandemic. Finally, the presentation included messaging about COVID-19 resources (regardless of the ability to pay, or immigration or insurance status) and provided information on how to access social services, medical care, and mental health care.

The partnership between DHS, DPH, and the County Joint Information Center (JIC) continues in efforts to collaboratively develop and maintain a social media resource hub with Evergreen messaging on staying safe at home, staying safe in the community, COVID-19 testing, and patient voices. The resources are included in the County's COVID-19 Community Toolkit and are available in various languages (<https://covid19.lacounty.gov/community-toolkit/>). The COVID-19 Community Toolkit and related educational outreach flyers have been shared with actively-engaged community partners in highly-impacted communities (e.g., the APC's Community Coalition groups, One LA-IAF, Community Clinic Association of Los Angeles County [CCALAC], and L.A. Care Health Plan [L.A. Care]) for direct dissemination.

In addition, DHS partnered with L.A. Care, DPH, and CCALAC to engage highly-impacted communities through social media events. The organizations are planning Facebook Live events in English and Spanish to target low-income families throughout the County. The initial live event

was a conversation between a DHS physician and actor Juan Pablo di Pace. During the conversation, presented in both English and Spanish, the physician shared critical information on testing, personal infection control, and how to obtain medical care and social services. The event, which took place on September 11, 2020, was shared broadly with County and community partners and the Supervisorial Districts. The event was recorded and is continuing to be shared broadly, reaching more than 10,000 people. L.A. Care and DHS are working together on possible future live events, including one on the flu and COVID-19.

Partnership with Local Community Clinics and CBOs

As noted in last month's report back, DHS and DPH identified a contractor for COVID-19 CBO-driven community outreach, engagement, and system navigation. On September 24, 2020, contracts were executed with an entity named Community Partners (CP). In preparation for next steps, DHS and DPH are currently drafting the CBO sub-contracting scope of work to ensure alignment with the APC Cross-Sector Workgroup recommendations and compliance with funding requirements set forth by the federal government. The anticipated timeframe for CBO sub-contractor agreements is approximately one month from the date of this report. DHS and DPH seek sub-contracted CBOs with deep connections within highly-impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations.

As previously noted, DPH received additional funds to support *promotora* programs. DPH is currently working to execute an agreement with a fiscal intermediary to expedite contracts with entities that operate community health worker programs. These efforts will directly align with the DHS partnership on community outreach and education efforts conducted by CP, as well as with the public education campaign that will be developed and implemented by the selected communications firm.

DMH's Speakers Bureau continues to strategically serve communities disproportionately impacted by the pandemic and civil unrest. Every Speakers Bureau member has been paired with over 100 faith-based organizations and other CBOs from all sectors (Service Areas) of the County that have requested mental health supports. Through collaborative efforts with Speakers Bureau members, these organizations are benefiting from customized interventions that are culturally relevant, linguistically appropriate, and clinically sound.

COVID-19 Testing

DHS continues to work in close partnership with the CCALAC to support the launch of community testing sites at Federally Qualified Health Centers. Working with CCALAC, DHS provided technical assistance and resources on billing, designing workflows, obtaining Personal Protective Equipment (PPE), understanding types of tests, and adding lab capacity. DHS also worked with the clinics to connect them to the new COVID-19 County testing map so they can update their availability each day and add specific instructions for people seeking testing. Community testing is now taking place at 26 community clinics.

DHS also continues connecting clinics to community testing sites run by DHS contractor, OptumServe. Four community clinics are sending staff to community testing sites, where they are providing education, outreach and navigation to primary care, behavioral health, and dental treatment. The clinics target individuals who do not have a regular source of care or health insurance and share information on how to access medical and social services. At three other OptumServe sites that did not lend themselves to having a table or staff, nearby community clinics

sent over flyers/brochures for individuals coming in for testing. The flyers/brochures include information on the clinic and how to access care and health coverage. The partnerships between the clinics and the testing sites are going well and are reaching many individuals who may need regular health care and medical homes.

During this past month, there were challenges which impacted some of the community testing sites' operations, including protests, local fires and related poor air quality, and extreme heat weather. These situations were closely monitored on a daily basis to ensure community member and staff safety. As test site operations were modified, Board offices were notified and announcements were added to the County testing website (<https://covid19.lacounty.gov/testing/>). Nonetheless, DHS continued to focus on resources supporting community testing sites in the areas of highest need.

Availability of PPE

Between March and September 2020, DPH has distributed over 30 million pieces of PPE to assist external organizations, including long-term care facilities, adult residential care centers, assisted living facilities, and homeless shelters. Of the total distributions, 3 million (approximately 10 percent) have been distributed to social service providers, including homeless shelters, domestic violence agencies, gang intervention outreach workers, and other CBOs, comprising nearly 600 entities. DPH continues to work with key partners to disseminate PPE and other supplies that facilitate infection control practices.

Hospitals and other healthcare entities are seeing improvement in the availability of N95 masks and gowns from their medical supply vendors; however, the quantities available are still inadequate to address the daily demand for PPE. Additionally, medical grade nitrile gloves are becoming a scarce resource. The Emergency Medical Services (EMS) Agency continues to receive N95 masks and isolation gowns from the State stockpile and pushes these items out to hospitals, EMS Provider Agencies (public and private), and clinics through the CCALAC. From August 16, 2020 through September 24, 2020, the EMS Agency provided 4.15 million isolation gowns, 3.7 million N95 masks, and 260,000 gloves to the above entities.

Total PPE distributed by the EMS Agency from February 1, 2020 through September 24, 2020, is shown below:

Item	Quantity
Coveralls	7,498
Shoe Covers	52,080
Hand Sanitizers	162,997
Goggles/Face Shields	464,946
Gloves	787,040
Gowns	7,667,473
Masks (Procedure)	11,206,350
Masks (N95)	21,364,853
TOTAL NUMBER OF ITEMS	41,713,237

Many drive-up, accessible community testing sites continue receiving PPE through DHS and the EMS Agency. Community clinic-based testing sites receive their PPE through CCALAC, who receives needed supplies from the EMS Agency. If PPE needs are identified by the individual

clinic, they contact CCALAC to have their PPE requests filled. For the CBO testing sites, there is an affiliation with DHS; as such, their PPE needs are communicated to DHS. DHS provides the needed PPE either from their supply or by working with the EMS Agency, who provides the needed PPE from what they receive from the State.

Linkages to Healthcare and Other Supportive Services

In response to the September 1, 2020 call for public comment on the preliminary framework for equitable allocation of a COVID-19 vaccine, DPH submitted a written response with key recommendations to the Vaccine Committee to consider in the final report. The expectation is that such a framework would inform the decisions by health authorities, including the Advisory Committee on Immunization Practices, as they create and implement national and/or local guidelines for COVID-19 vaccine allocation.

DPH continues to work closely with 211 LA County. For the week of September 14-21, 2020, the total number of calls received from inquirers in need of services was 12,932. Of those, 7,086 were COVID-19 related, and 9,556 resulted in COVID-19-related referrals.

Top 5 COVID-19 Service Referrals

COVID-19 Services	Food Services	Housing Support Services	Utility Assistance	Landlord/Tenant
2,529	857	567	482	435

DMH continues to actively work with the Chief Executive Office (CEO), Los Angeles Housing Services Authority, DPH, DHS, City of Los Angeles Office of Mayor Eric Garcetti, and City of Los Angeles Department of Parks and Recreation to provide specialty mental health services to homeless individuals in the County at the following:

- Project Room Key sites;
- Quarantine and isolated shelters; and
- City shelters.

Additionally, DMH continues to train staff deployed as shelter-based Disaster Service Workers (DSWs) on Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning, Intersex, Asexual, and Two-spirit (LGBTQIA2s) cultural competence guidelines with the goal of enhancing their effectiveness in working with persons experiencing homelessness, who are a part of the LGBTQIA2s community. DMH also created a LGBTQIA2s resource guide, which was made available to all City shelters in response to the COVID-19 pandemic.

The last report noted that DMH co-located licensed clinical staff to serve as specialized DSWs for the “LACDMH Wellbeing Line.” DMH’s DSWs represent different racial and ethnic groups and have been providing culturally sound and linguistically appropriate services in Spanish, Korean and Armenian. The Wellbeing Line services are available to all County employees and first responders. It operates seven days a week from 10 am to 6 pm and can be accessed at (833) 307-0509. Persons who call the Wellbeing Line are provided emotional first aid related to COVID-19 stressors, assistance navigating mental health services, and referrals to grief and bereavement resources. Further, DMH developed a Peer-Led Veteran Warmline that is open seven days a week from 9 am to 9 pm. It is staffed with volunteers and DMH employees who have experience serving in the military or have family members who served in the military.

Recently, the Board and the City of Los Angeles dedicated CARES Act funding to provide childcare services (vouchers) for essential workers and low-income working parents during the COVID-19 pandemic. This reporting period marked the start of a program where the Child Care Alliance of Los Angeles and its partner agencies will distribute these funds to eligible essential workers (e.g., parents/guardians working in essential services, such as health care, emergency services, food and agriculture, and other businesses currently open as per the Governor's most recent guidelines). Future reports will provide distribution figures.

Eligible families must live in the County, need childcare to perform their essential work, are not able to work remotely, and meet certain income eligibility. If the family includes a two-parent household, both parents must either be essential workers, or the other parent must be unable to provide care for the child due to incapacitation. Families who meet eligibility guidelines may receive emergency childcare services for their children until December 30, 2020. Eligible families must apply at this site: <https://ccrc.jotform.com/202266408415956>. DPH's Office for the Advancement of Early Care and Education is working closely with partners to communicate this opportunity to families across the County.

Contact Tracing

As of September 28, 2020, the total number of cases assigned to an interviewer was nearly 212,000. Of these assigned cases, about 64 percent (n= 134,656) completed the contact tracing interview; more than 81,000 close contacts were identified as a result; and 58,817 (72.3 percent) close contacts completed the contact interview.

In early September 2020, DPH and the Office of Immigrant Affairs (OIA) finalized an action plan that includes augmenting training for contact tracing staff. The training aims to enhance contact tracers' customer service skills to address cultural/immigration-related sensitivities and to better serve immigrants and their families. Two virtual trainings have taken place: the first on September 28, 2020, and the second on October 1, 2020. In addition to trainings, the action plan outlines outreach and communication activities that aim to dispel myths and stigma about COVID-19 infection and contact tracing, and leverage OIA's ethnic media and other partnerships to disseminate in-language messages and supports, such as the food security resources currently being deployed by County departments.

Contracting with CBOs

As previously noted, on September 24, 2020, contracts were executed with CP to serve as the fiscal intermediary for COVID-19 CBO-driven community outreach, engagement, and system navigation.

Partnering with County Departments

In addition to the collaborations noted in the previous sections, DHS and DPH have partnered with CEO 2020 Census efforts. Leveraging the Census outreach efforts to reach "hard-to-count communities," DHS and CEO have partnered to share information and resources on access to testing and how to be counted in the Census. In most cases, "hard-to-count communities" are also communities that are highly impacted by the COVID-19 pandemic. These efforts include added messaging on how to access testing to the September Census postcard mailing campaign, targeting at least 500,000 households in hard-to-count communities. Messaging for the postcard mailing campaign was translated in Spanish, Cantonese, Korean and Russian. Moreover,

Census “Be Counted” messaging and resources has been posted at select COVID-19 testing sites, as well as included in COVID-19 test registration confirmation emails. DPH has also included messages during biweekly press briefings and other communications.

This reporting period also marked the launch of the much-anticipated COVID-19 Safety Compliance Certificate Program (<http://publichealth.lacounty.gov/eh/covid19cert.htm>) on September 1, 2020. DPH established the program to provide an opportunity for County businesses currently allowed to operate under the Health Officer Order, to voluntarily self-certify that they are fully implementing the required Public Health COVID-19 Protocols (Protocols) (<http://publichealth.lacounty.gov/media/Coronavirus/>). The program includes a training video that provides a general overview of the required Protocols. After watching the training video, participants complete a brief survey to receive an emailed copy of their certificate. Employers or business owners can take this training to receive a COVID-19 Safety Compliance Certificate to be placed at all public entrances to their facility. By posting this certificate, businesses are self-attesting that their facility is following all the required Protocols. Employees can also watch this training to earn a Certificate of Completion after learning more about the Protocols and the steps their employers must take to offer required workplace protections.

The COVID-19 Safety Compliance Certificate is not required, but it is recommended. It can provide customers with more confidence that businesses are following Public Health safety requirements. All businesses must still complete the required Protocols. Businesses that do not have a COVID-19 Safety Compliance Certificate must continue to post the required Protocols for their sector. The program was launched on Public Health’s website on September 1, 2020.

As of September 28, 2020, the program has been completed by a total of 2,753 people, including 1,352 employers and 1,401 employees representing various sectors, such as retail businesses and others that are currently permitted to maintain operations with as much safety as possible. Sectors with the highest level of completion include:

- Office-based worksites (25 percent);
- Restaurants (16 percent); and
- Hotels and short-term rentals (15 percent).

While there is room for improvement, more than two-thirds of training participants (65 percent) report that their employer gave them a copy of the Protocols (n=1,802). Additionally, 84 percent of training participants (n=2,316) report that the Protocols helped them understand COVID-19 safety guidelines at work. The Spanish, Armenian, and Korean versions of the training are now available, and eight additional languages will be made available shortly. This is an important step to ensure that workers and vulnerable communities are provided with workplace protections to help slow the spread of COVID-19.

Various DPH divisions and programs have been instrumental in launching the program (e.g., Environmental Health, Health Education Administration, Public Health Information Systems, and Office of Communications & Public Affairs). Other County departments that have served critical functions, such as fielding questions from the public and communicating the program’s availability to businesses and the general public include: the Department of Consumer and Business Affairs, Office of Emergency Management, the JIC, and Workforce Development, Aging and Community Services.

RELATED EFFORTS PREVIOUSLY REPORTED SEPARATELY

COVID-19 Testing in Correctional Facilities

Directive three, initially assigned as a weekly report to provide COVID-19 testing data from the correctional facilities, has been approved as a monthly report effective October 8, 2020. DHS' Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in County correctional facilities.

The current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities is reflective of the collaborative testing efforts among DHS, the Los Angeles County Sheriff's Department, and the Probation Department.

The practice of performing universal testing of individuals on intake continues for individuals with symptoms of COVID-19, as well as other indications. For the period of August 30, 2020 through September 22, 2020, JCHS administered 197 tests with nine positive results, and CHS administered 2,392 tests with 82 positive results. The reporting period has been modified to cover a period of three weeks in order to meet the review process and submission deadlines.

Boyle Heights Pilot Project

On August 4, 2020, Board motion, Activating Aid for Residents Who Cannot Isolate Comfortably at Home (Item No. 20, Directive No. 3), directs DPH and DHS, with relevant County departments, to work with the Boyle Heights Testing Site partners on the program being implemented and report back in 30 days on the appropriate design of the model to accomplish cross-sectoral collaboration and to assess the feasibility of implementing a similar program Countywide in areas of high disparity.

The statement of work for the Boyle Heights Pilot Project is being adapted from the COVID-19 Equitable Contact Tracing Initiative. DPH is currently in conversations to partner with an agency to support the targeted in-person contact tracing intervention in Boyle Heights. DPH obtained a fiscal sponsor who will deploy the funds for this pilot project, which will include contact interviewing training and system navigation services. Conversations are still underway with the fiscal sponsor and DHS to implement the pilot as soon as possible. Community outreach, education, and communication support will likely be coordinated with and delivered through the COVID-19 CHW Outreach Initiative.

Next Steps

1. Continue collaborating with the APC's Cross-Sector Group.

As previously noted, the APC's Cross-Sector Group released its preliminary recommendations in late July 2020 and posted them on their website (<https://www.racecounts.org/covid/#community-based-rapid-response>) in August 2020. Many of the recommendations are already operational and others are guiding our contracting approach with CP and a communications firm. Updates on contracting timeline and process are shared with our Advancement Project Partners on a regular basis. A follow-up cross-sectoral convening with APC's Cross-Sector Group is pending given the recent confirmation of CP as the contractor for the CBO-driven outreach efforts.

- 2. Select a fiscal entity to sub-contract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities.**

As contracts with CP were executed on September 24, 2020, the anticipated timeframe for CBO sub-contractor agreements to be in place is in early November 2020.

- 3. Identify and execute a contracting mechanism to procure communication-related services.**

On September 18, 2020, DHS released the PATSMA, to seek communications firms with culturally and linguistically responsive expertise and demonstrated experience working alongside local partners. Interested communications firms were required to submit their applications no later than September 29, 2020. A selection process will take place in early October. As this contract is finalized, DPH will initiate communication efforts through related activities conducted as part of the community health worker program, currently in development thanks to an additional allocation of CRF funds to connect immigrant communities with critical health information. A component of this work includes streamlined communications, which will be closely aligned with work done by the communications firm contracted through the PATSMA. DPH and DHS will continue to work together to ensure coordinated messaging and ongoing collaboration.

- 4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this motion.**

As noted in previous report backs, DHS and DPH have been working closely with the County's Center for Strategic Partnerships to ensure coordinated action with local funders who are interested in supporting COVID-19 response efforts. A coordinated proposal was completed on August 26, 2020. Several philanthropic entities are currently reviewing the proposal to identify areas for direct funding. Of note, the proposal directly aligns with recommendations set forth by the APC's Cross-Sector Group, as well as with other ideas elevated by additional County partners.



County of Los Angeles CHIEF EXECUTIVE OFFICE

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FESIA A. DAVENPORT
Acting Chief Executive Officer

December 24, 2020

To: Supervisor Hilda L. Solis, Chair
Supervisor Holly J. Mitchell
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

From: Fesia A. Davenport 
Acting Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

HOLLY J. MITCHELL
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group (APCCSG), the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County of Los Angeles (County) departments to:

1. Develop and implement culturally, linguistically, and literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).

2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:
 - Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in highly-impacted communities;
 - Leverage the State's stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and provide linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods, to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in its vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to support services through the engagement of community partners, Federally-qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
4. Report back, one time, on the indications for testing among staff in the County's adult and youth detention facilities.
5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of COVID-19 on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control [CDC] testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and Federal COVID-19 sources.

This is the fifth report to the Board, which contains the following updates:

- Status of the myriad of ongoing efforts to bolster and improve the effectiveness of public education campaigns;

Each Supervisor
December 24, 2020
Page 3

- Status of ongoing efforts to partner with CBOs to support and expand COVID-19 testing and contact tracing efforts;
- Progress on ongoing efforts to implement the Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds (CRF) \$33 million spending plan which outlined various strategies to address not only testing, tracing, and a broad public health response, but also a robust plan focusing on addressing the needs of the County's most vulnerable populations, particularly communities of color, which data shows have been disproportionately impacted; and
- Progress of ongoing implementation and spending efforts from a \$4.0 million grant awarded by CDC to DHS to support broadcast media and grassroots through a multilingual and culturally responsive messaging campaign, including work with CBOs to perform outreach and education to community members and provide linkages to testing, healthcare, and support services, including housing, food, and health insurance.

In addition, the attached November 19, 2020 report submitted by DHS, DMH, and DPH, highlights the status of current efforts and outlines next steps to fully support implementation of the Board's directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

The CEO will submit the next report, now bi-monthly, to the Board on February 9, 2021.

Should you have any questions concerning this matter, please contact me or Harvey Kawasaki at (213) 974-5210 or hkawasaki@ceo.lacounty.gov.

FAD:JMN:TJM
HK:ma

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Bimonthly Report: A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
Thursday, November 19, 2020

The following activities have taken place since the last report issued on October 1, 2020.

Public Education Campaigns

As noted in the October 1, 2020 report, on September 18, 2020, the Department of Health Services (DHS) released a Request for Qualifications (RFQ), known as the Professional and Technical Services Master Agreement (PAT SMA), to identify communications firms with culturally and linguistically responsive expertise and demonstrated experience working alongside community partners. Interested communications firms submitted applications by September 29, 2020. The initial review found ten qualified communications firms who proceeded to the interview and selection process in early October. A firm has been selected from among the qualified candidates, with the budget and scope of work currently being finalized to execute a contract. The selected firm is targeted to begin work by early December 2020.

As previously reported, the selected firm will be responsible for delivering a culturally, linguistically, and literacy appropriate COVID-19 community awareness and education campaign through a coordinated network of County entities, community-based partners, ethnic media, and other trusted stakeholders. The campaign's goals will:

- Underscore availability of COVID-19 testing regardless of immigration status and at no cost;
- Leverage the ability of community-based organizations (CBOs) to directly reach out to their culturally diverse and multilingual constituents and provide accurate health education information;
- Identify, strengthen, and amplify the capacity of available supportive resources; and
- Connect to Countywide information hubs (e.g., hotlines, websites).

Initial costs incurred through the PAT SMA will be paid for by DHS using a combination of the Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds (CRF) (\$1 million for activities through December 30, 2020) and the Centers for Disease Control and Prevention Epidemiology and Laboratory Capacity (ELC) funds (\$1 million anticipated through December 31, 2021). DHS will continue to explore additional funding streams to support these efforts and will report to the Board of Supervisors (Board) in future bi-monthly reports.

Due to unexpected circumstances, the PAT SMA process has taken longer than expected to finalize. Nonetheless, the Department of Public Health (DPH) initiated communications-related efforts through activities conducted as part of the Community Health Worker (CHW) Outreach Initiative. As detailed in the September 2020 edition of this report, the Board allocated additional CRF funding to support *promotora* programs to outreach and engage immigrant communities with critical health information. A key component of this work is streamlined communications, which will rely heavily on the lessons learned through the Advancement Project California (APC) and its

Cross-Sector Workgroup, and will closely align with work implemented by the communications firm selected and contracted through the PATSMA.

In October 2020, DPH contracted with the California Community Foundation (CCF) to serve as the Fiscal Lead Agency for the multi-pronged CHW Outreach Initiative. The initiative will ensure coordinated strategy and messaging through a network of DPH CHWs and contracted CBOs, which provide outreach and education services through CHWs.

CCF retained the services of a communications firm named Team Friday to coordinate the materials and messaging used by the CHWs network. DPH is leveraging \$500,000 in CRF previously allocated for communications through the PATSMA, and an additional \$200,000 in CRF allocated to the CHW Outreach Initiative for the communications-related activities Team Friday will complete by December 30, 2020. Several priority populations have been identified for these efforts, including young adults ages 18-25, justice-involved individuals in South Los Angeles and the Antelope Valley, and communities residing in Boyle Heights.

To date, Team Friday has completed:

- An assessment of existing research; social listening on online Reddit and Facebook communities focusing on East Los Angeles, Boyle Heights, Huntington Park, South Gate, and Bell;
- Online surveys with participants who reported being Hispanic or Asian, residing in Los Angeles, and earning no more than \$50,000 per year; and
- Establishing office hours with contracted CBOs who have been conducting education and outreach services.

Informed by data regarding recent surges in testing, cases, and hospitalizations, and using this information they have collected firsthand, Team Friday is currently refining key messages and drafting campaign collateral for use by the CHWs. Team Friday is also positioned to work with DPH's Youth Advisory Council and youth from the Department of Parks and Recreation's Our Spot Program to gather additional insights regarding COVID-19 messaging directly from youth and young adults who account for many COVID-19 cases. Funds are on track to be fully expended by the end of the contract period.

DPH and DHS will continue to work together to ensure coordinated messaging, as insights gained and materials developed as part of the CHW Outreach Initiative will be shared to inform the communications activities done through the PATSMA.

On a related note, DPH is currently engaged in planning efforts for distribution of the COVID-19 vaccine(s) once it becomes available. As part of these efforts, DPH aims to leverage existing contracting mechanisms to support communications related to vaccine distribution. Budget allocations and draft scopes of work are being finalized and will be completed before the end of the year.

Finally, the partnership between DPH, DHS, and the Joint Information Center (JIC) continues. Both DPH and DHS share key messages that, in turn, are reused by the JIC to create press releases, social media content and visuals, information for the L.A. County COVID-19 website, and talking points used during the weekly media briefing. To enhance ongoing collaboration, DHS convenes a meeting each week where representatives from DHS, DPH, the County Communications Office, the JIC, the Chief Executive Office's (CEO) Center for Strategic Partnerships (CSP), and the Board offices that co-authored this motion discuss communications-

related needs and activities. Recently, the Office of Immigrant Affairs (OIA) joined these discussions to directly assist in the coordination of OIA-led media-buys and other communications efforts. The collaboration has resulted in evergreen multilingual resources. These resources are included in the County's COVID-19 Community Toolkit, and continue to be updated and shared with community partners (<https://covid19.lacounty.gov/community-toolkit/>).

The Department of Mental Health (DMH) continues to design and implement complementary communications efforts that specifically target highly impacted communities. During this reporting period, DMH continued outreaching to Los Angeles County (LA County) communities to provide support and promote mental health via multiple hyper local/ethnic media outlets. The messaging is related to coping with COVID-19 challenges and well-being, the 24/7 Help Line, available online resources, and free subscriptions to Headspace. Examples of hyperlocal targeted media products include digital billboards, Metro and bus line advertisements, radio and TV spots, posters at Women, Infants, and Children (WIC) offices, and displays at commonly frequented community sites.

DMH's media outreach campaign for the second half of 2020 (July through December) will engage the County's culturally and linguistically diverse communities, as measured by the projected number of impressions (1,617,802,970), as follows:

- Projected impressions in English, Spanish, and Chinese newspapers (4,184,039);
- Television programming across 13 different stations in English and Spanish (18,173,704);
- Radio programming in English, Spanish, Chinese, Korean, Farsi, Armenian, and Vietnamese (107,161,472);
- WIC offices postings (2,500,000); and
- Top Outdoor companies across the County (1,485,783,755).

Additionally, new resources continue to be added on the DMH webpage, including, most recently, for those associated with the need for handling grief and bereavement. COVID-19 health and safety resources continue to be amplified via social media. Sample content includes LA County clinics that provide flu immunizations at no cost, tips on safely celebrating Halloween and Día de los Muertos, encouraging voters to vote early and vote by mail to avoid overcrowding voting facilities.

Partnership with Local Community Clinics and CBOs

In addition to carrying out hyperlocal targeted media strategies, DMH is in the process of using CRF funds to augment its Promotores de Salud Program (Health Promoters) at two levels:

- 1) Strengthening the existing Latino Mental Health Promoters Program by recruiting, hiring, and training new Promotores in Service Planning Areas 1 (Antelope Valley/Lancaster) and 5 (West Los Angeles); and
- 2) Expanding the Health Promoters Program to other highly impacted communities, with priority given to American Indian/Alaska Native, African American, and Asian Pacific Islander populations. To this end, DMH is working closely with its stakeholder groups, which are representative of these and other racial/ethnic, linguistic groups, as well as the Lesbian, Gay, Bisexual, Transgender, Queer and/or Questioning, Intersex, Asexual, Two-Spirit (LGBTQIA2S), and persons with physical disabilities.

Finally, DMH's Speakers Bureau continues to strategically serve communities disproportionately impacted by the pandemic and civil unrest. DMH Speakers Bureau members have been paired with over 100 faith-based organizations and other CBOs, representing various sectors and service

planning areas across the County that have requested mental health supports. Through collaborative efforts with DMH Speakers Bureau members, these organizations are benefiting from customized interventions that are culturally relevant, linguistically appropriate, and clinically sound.

For the month of October 2020 alone, DMH Speakers Bureau members:

- Conducted 40 distinct speaking engagements, the vast majority involving presentations, workshops, and trainings out in the community; and
- Reached a total of 4,426 community members through these efforts.

For the months of November 2020 and December 2020, the Speakers Bureau will ensure a strong presence in culturally and linguistically diverse communities to address mental health needs related to coping with the imminent holiday season, well-being and pandemic fatigue, and the current COVID-19 surge.

COVID-19 Testing

DHS continues to work with the Community Clinic Association of Los Angeles County (CCALAC) on supporting Federally Qualified Health Centers (FQHCs) that are running community testing sites. There remains a total of 26 community clinic agencies, representing a total of 70 sites, currently operating community testing sites. There have been fewer technical assistance questions from the FQHC testing sites in the past two months, with DHS providing assistance to the FQHCs, when requested. Currently, discussions have focused on antigen testing, how to support the fall/winter surge, and plans for future vaccine distribution. All participating FQHCs have created an account with the One Degree platform, which is being used to provide constituents with information on COVID-19 community testing sites on the County's COVID-19 Testing website: <https://covid19.lacounty.gov/testing/>.

FQHCs can customize the description of their facility on this platform and indicate the following attributes:

- If languages are available (including American Sign Language, interpreter access);
- If testing site is handicap accessible;
- If testing site tests children 17 and under;
- If testing site is a health care provider; and
- If testing site is walk-up or drive-up.

As testing site demand decreased during the late summer, some of the community clinics that were partnering with the OptumServe sites decided to make changes to their clinical staffing levels. Four community clinics sent staff to community testing sites to provide education, outreach, and navigation to primary care, behavioral health, and dental treatment. At additional OptumServe sites that did not lend themselves to having a table or staff, nearby community clinics provided flyers/brochures for individuals coming in for testing. The flyers/brochures included information about the clinic and how to access care and health coverage. The partnerships between the clinics and the testing sites are ongoing, with community clinics open to returning to the OptumServe sites if the need arises.

During the month of October 2020, additional challenges caused the following testing sites to close temporarily, as follows:

- Five DHS's Ambulatory Care Network (ACN) testing sites were closed in observance of Día de la Raza (10/22/2020);

- The Forum was closed for the day to reconfigure the testing site in preparation of the election (10/19/2020);
- The DHS ACN testing site (MidValley HC) was closed for the day due to the voting event occurring at the Zev Yaroslavsky Family Support Center building (10/27/2020); and
- The Montebello Civic Center testing site closed for two days due to elections occurring on-site (10/30/2020).

As operations were impacted, Board offices were notified and announcements were added to the County testing website (<https://covid19.lacounty.gov/testing/>). In addition, DHS continued to ensure nearby locations provided access to testing within a 5-mile radius.

Availability of Personal Protective Equipment (PPE)

DPH continues to support over 4,500 community partner agencies with their Personal Protective Equipment (PPE) needs. Currently, there are plans to expand the list of partner CBOs through existing networks established through DPH Area Health Offices.

Also, through the CHW Outreach Initiative, contracted CHWs will provide: 1) direct in-person outreach, including “no-knock” door drop-offs in residential areas, and 2) visits to faith-based organizations, small businesses, or in-community spaces where people may gather or be in close proximity (e.g., parks). While conducting this outreach, CHWs will disseminate print educational materials and supplies that promote infection control, including reusable face masks and hand sanitizers. A total of 216,000 reusable face masks and 260,000 hand sanitizers will be distributed by December 30, 2020.

Since hospitals and other healthcare entities are seeing improvements in the availability of N95 masks and gowns from their medical supply vendors, DHS’s last PPE distribution was done on October 8, 2020. The Emergency Medical Services (EMS) Agency continues to fill individual healthcare facilities’ requests for PPE on a case-by-case basis.

Total PPE distributed by the EMS Agency from February 1, 2020 through October 25, 2020 is shown below:

Item	Quantity
Coveralls	7,498
Shoe Covers	52,080
Hand Sanitizers	162,997
Goggles/Face Shields	477,246
Gloves	838,040
Gowns	8,128,773
Masks (Procedure)	12,120,650
Masks (N95)	29,271,413
TOTAL NUMBER OF ITEMS	51,058,697

Many drive-up community accessible testing sites continue receiving PPE through DHS and the EMS Agency. Community clinic-based testing sites receive their PPE through CCALAC, who receives needed supplies from the EMS Agency. If PPE needs are identified by the individual clinic, they contact CCALAC to have their PPE requests filled. For the CBO testing sites, there is an affiliation agreement with DHS; as such, their PPE needs are communicated to DHS.

DHS provides the needed PPE either from their supply or by working with the EMS Agency who provides the needed PPE from what they receive from the State.

DMH continues to provide the necessary PPE to clinical staff working face-to-face with the public. By assessing and addressing the need for adequate PPE supplies, DMH has distributed in excess of 284,060 surgical masks, 11,600 cotton face coverings, and 395,000 sets of gloves across the DMH-directly-operated sites, legal entity and contracted providers, and the fee-for-service network across LA County.

Linkages to Healthcare and Other Supportive Services

DPH continues to work closely with 211 L.A. County (211). As of November 15, 2020, 211 made 7,559 COVID-19-related contacts and 9,438 COVID-19-related referrals. 211 has also worked to link callers to COVID-19 testing referrals; as of November 15, 2020, 211 made 2,840 COVID-19 testing referrals.

Top 5 COVID-19 Service Referrals

COVID-19 Services	Food Services	Landlord/Tenant	Utility Assistance	Housing Support Services
3,915	725	416	415	347

Nearly 16 percent of callers reported living in zip codes in highly impacted areas of LA County, including, but not limited to:

- Florence-Graham, Lynwood, Huntington Park, Vernon (90001, 90002, 90255);
- Westmont/West Athens (90044);
- Lancaster (93535);
- East Los Angeles (90022); and
- Panorama City (91402).

DMH continues to actively work with the CEO, the Los Angeles Housing Services Authority, DPH, DHS, the City of Los Angeles Office of Mayor Eric Garcetti, and the City of Los Angeles Department of Parks and Recreation to provide specialty mental health services to homeless individuals in LA County at the following locations:

- Project RoomKey sites;
- Quarantine and Isolated Shelters; and
- City Shelters.

The September 2020 report noted that DMH co-located licensed clinical staff to serve as specialized Disaster Service Workers (DSWs) for the "LACDMH Wellbeing Line." DMH's DSWs represent different racial and ethnic groups and have been providing culturally sound and linguistically appropriate services in Spanish, Korean, and Armenian. The Wellbeing Line services are available to all County employees and first responders. It operates seven days a week from 10:00 a.m. to 6:00 p.m., and can be accessed at (833) 307-0509. Persons who call the Wellbeing Line are provided emotional first aid related to COVID-19 stressors, assistance navigating mental health services, and referrals to grief and bereavement resources. Further, DMH developed a Peer-Led Veteran Warmline that is open seven days a week from 9:00 a.m. to 9:00 p.m. It is staffed with volunteers and DMH employees who have experience serving in the military or have family members who served in the military.

The Board and the City of Los Angeles dedicated CRF dollars to provide childcare services (vouchers) for essential workers and low-income working parents during the COVID-19 pandemic. As of November 5, 2020, a total of 8,195 voucher applications have been received; 6,288 are new applications and 1,907 are applications from participants that had State vouchers and are able to continue services through CRF allocations.

Since the State voucher program has ended, the County's support has provided continued care to families in need. Once applications are submitted, they are sent to one of the 11 local agencies for processing. If families reside in L.A. City, they are provided an L.A. City voucher. If they reside in LA County, they are provided an LA County-funded voucher. Currently, a total of 6,073 children have received childcare vouchers—3,783 (62 percent) are from LA County and 2,290 (38 percent) are from L.A. City. Childcare vouchers are still being approved daily. The program estimates \$9,387,113 in expenditures by December 30, 2020, for the LA County childcare vouchers that have been approved to date.

Contact Tracing

As of the latest available analysis report dated November 16, 2020, the total number of cases assigned to an interviewer was nearly 267,390. Of these assigned cases, about 64 percent (n= 170,792) completed the contact tracing interview; more than 101,000 close contacts were identified as a result; and 76,147 (74.7 percent) identified close contacts completed the contact interview.

Contracting with CBOs

In September 2020, DHS and DPH entered into an agreement for Community Partners (CP) to serve as a fiscal intermediary for an initiative now known as the COVID-19 Community Equity Fund. This fund will form partnerships with selected grassroots community-based organizations that possess cultural and linguistic expertise, and community trust within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations. Selected CBOs will receive funding, mentorship, training, and technical assistance to support their internal infrastructure, workforce, and organizational sustainability as they provide prevention services (e.g., contact tracing, education, outreach, and engagement) and linkages to social and medical resources (e.g., test site and system navigation) to their communities.

In its role as fiscal intermediary, CP launched the COVID-19 Community Equity Fund online application on October 16, 2020, and convened two informational sessions for potential applicants. More than 400 participants attended the informational sessions held on October 20-21, 2020. Through a partnership with philanthropy, technical assistance was provided to interested CBOs who needed additional support to complete the application. Applications were due on October 30, 2020, but due to overwhelming feedback from applicants, particularly those engaged in voting-related activities, the due date was extended to November 2, 2020, where CP received a total of 250 applications. CP will contact nearly 50 selected CBOs during the week of November 16, 2020, to begin to finalize sub-contracts with community-based organizations as quickly as possible. Selected CBOs are slotted to begin onboarding later this month. The allocated CRF/ELC funding for DHS is \$6.1 million and \$10 million for DPH.

As noted in the communications section above, the CHW Outreach Initiative launched in October 2020 with a budget of \$18.5 million. This initiative aims to coordinate and mobilize CHWs to conduct grassroots outreach to amplify up-to-date information regarding COVID-19, and tailor

it to those most impacted by the virus. In addition, this initiative provides an opportunity for CHWs to build infrastructure and capacity for a community-based system of response and facilitate collaboration and cross-learning across different peer outreach models, including violence intervention, promotores, parent advocates, youth advocates, and others. The initiative has developed a multi-pronged approach to mobilize nearly 600 CHWs by building an in-house team of CHWs and contracting with a Fiscal Lead Agency, CCF, to coordinate CBO contracts for up to 15 organizations with existing networks of CHWs and other peer providers.

Participating agencies attended a Partner Agency Orientation on November 4, 2020, and received an onboarding checklist to guide them through the project. More than 170 participants have taken part in trainings, including COVID-19 Training, Teams Training Hub and App Tracker training (English and Spanish), and Trauma Informed Resilience Oriented Training. As of November 16, 2020, 520 CHWs and 83 supervisors are onboarded as part of this initiative. Agencies have received initial assignments to work across more than 1,000 high priority block groups across LA County, with DPH providing support. As of November 17, 2020, CHWs have conducted more than 4,068 outreach contacts in the community.

Given the truncated timeline for the CHW Outreach Initiative and to ensure continuity of best practices, the work completed as part of this initiative is being used to heavily inform the portfolio of activities being overseen by CP.

Partnering with County Departments

The COVID-19 Safety Compliance Certificate Program continues to be a vital tool for local businesses and community members to implement safety protocols. DPH established the Certificate Program to provide an opportunity for LA County businesses currently allowed to operate under the County's Health Officer Orders to voluntarily self-certify that they are fully implementing and complying with the required Public Health COVID-19 Protocols (Protocols) (<http://publichealth.lacounty.gov/media/Coronavirus/>).

As of November 16, 2020, the Program has been completed by a total of 10,556 individuals, including 4,877 employers and 5,679 employees representing various sectors, including retail businesses and others that are currently permitted to maintain operations with as much safety as possible. Sectors with the highest level of completion include:

- Office-based worksites: 27 percent (n=2,878);
- Restaurants: 18 percent (n=1,888); and
- Personal Care Establishments: 10 percent (n=1,028).

More than two-thirds of training participants (nearly 68 percent) reported that their employer gave them a copy of the Protocols (n=7,148). Additionally, nearly 86 percent of training participants (n=9,058) reported that the Protocols helped them understand COVID-19 safety guidelines at work. Current languages available for this training include English, Spanish, Arabic, Armenian, Chinese (Traditional and Simplified), Japanese, Khmer (Cambodian), Korean, Farsi, Russian, and Vietnamese, with Tagalog and Thai to be posted by the end of the year. This is an important step to ensure that workers and vulnerable communities are provided with in-language resources regarding workplace protections to help slow the spread of COVID-19.

Other County departments that have also served critical functions, such as fielding questions from the public and communicating the Program's availability to businesses and the general public,

include the Department of Consumer and Business Affairs; Workforce Development, Aging and Community Services; the CEO's Office of Emergency Management; and the JIC.

Related Efforts Previously Reported Separately

COVID-19 Testing in Correctional Facilities

Directive three, initially assigned as a weekly report to provide COVID-19 testing data from the correctional facilities, has been approved as a monthly report effective October 8, 2020. DHS's Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities is reflective of the collaborative testing efforts among DHS, the Los Angeles County Sheriff's Department, and the Probation Department.

The practice of performing universal testing of individuals on intake continues for individuals with symptoms of COVID-19, as well as other indications. From the end of September 2020 through the beginning of November 2020:

- JCHS administered 197 tests with nine positive results; and
- CHS administered 2,392 tests with 82 positive results.

Rapid testing will be made more robust in the coming weeks with the addition of an on-site lab to provide test results within 5 hours from the time of sample acquisition. This addition is expected by November 30, 2020. Individuals found to be positive are isolated in either the Correctional Treatment Center (for those who need higher level of medical attention) or in the 241/242 area where they receive checks from medical staff twice a day. Temperatures and vital signs (including Pulse Oximetry) are taken and the patients are queried for COVID-19 symptoms. Any patient suffering symptoms that need further attention are sent to the LAC+USC hospital or another nearby hospital for evaluation and appropriate treatment.

Boyle Heights Pilot Project

On August 4, 2020, the Board motion, Activating Aid for Residents Who Cannot Isolate Comfortably at Home (Item No. 20, Directive No. 3), directed DPH and DHS, with relevant County departments, to work with the Boyle Heights Testing Site partners and report back in 30 days on the appropriate design of the model to accomplish cross-sectoral collaboration and to assess the feasibility of implementing a similar Countywide program in areas of high disparity.

DPH and DHS are still finalizing the Statement of Work for the Boyle Heights Pilot Project, which is being adapted from relevant portions of the COVID-19 Community Equity Fund. DPH is currently in conversations with an agency to support the targeted in-person contact tracing and rapid COVID-19 testing intervention in Boyle Heights. Conversations are still underway with the fiscal sponsor and DHS to implement the pilot. Community outreach, education, and communication support will be coordinated with and delivered through the COVID-19 CHW Outreach Initiative.

Next Steps

1. Continue collaborating with the APC's Cross-Sector Group.

As previously noted, the APC's Cross-Sector Group posted its recommendations online in August 2020 (<https://www.racecounts.org/covid/#community-based-rapid-response>). Many of the recommendations are already operational and others are guiding our contracting approach with CP and contracted communications firms (Team Friday and the firm selected through the PATSMA).

In addition, APC is transitioning away from convening the workgroup. The final cross-sectoral meeting was held on October 16, 2020, where stakeholders were informed that CP is the fiscal intermediary for the COVID-19 Community Equity Fund, and were provided information about the online application process and the timeline to onboard the communications firm. The APC has been kept abreast of actions related to the COVID-19 Community Equity Fund and related communications efforts. APC has offered to share lessons learned as an ad hoc community advisory group to CP and key stakeholders. They also remain open to sharing health information through their community coalition infrastructure.

2. Select a fiscal entity to sub-contract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly impacted communities.

Contracts with fiscal intermediary CP were executed on September 24, 2020, and applications are currently being reviewed. The anticipated timeframe for finalized CBO sub-contractor agreements to be in place is by the end of November 2020.

3. Identify and execute a contracting mechanism to procure communication-related services.

DHS launched a Request for Qualifications in September 2020 for a communications firm that could support the CBO-driven efforts with culturally and linguistically responsive co-created communications materials. As previously noted, a firm has been selected. To mobilize as quickly as possible, working meetings have commenced in preparation for contract execution and availability of the selected firm.

As this contract is finalized for execution, DPH will continue communications efforts through related activities conducted as part of the CHW Outreach Initiative. A component of this work includes streamlined communications, which will be closely aligned with work done by the communications firm contracted through the PATSMA. DPH and DHS will continue to work collectively to ensure coordinated messaging and ongoing collaboration.

4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this motion.

DPH and DHS continue to work closely with CSP to ensure coordinated action with local funders who are interested in supporting COVID-19 response efforts. Most recently, philanthropy supported provision of technical assistance to small CBOs who wanted help in applying for the joint DPH and DHS COVID-19 Community Equity Fund being administered by CP. Additionally, the Balmer Group is continuing to support the Prevention Institute, which helped to draft the *Integrated Plan*. Of note, the *Integrated Plan* directly aligns with recommendations set forth by the APC's Cross-Sector group, as well as with other ideas elevated by additional County partners. Finally, CSP is working with DPH and DHS to develop specific proposals for a group of funders known as *Together Toward Health* to support our COVID-19 Equity work.



County of Los Angeles CHIEF EXECUTIVE OFFICE

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FESIA A. DAVENPORT
Chief Executive Officer

March 18, 2021

To: Supervisor Hilda L. Solis, Chair
Supervisor Holly J. Mitchell
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

From: Fesia A. Davenport
Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

HOLLY J. MITCHELL
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group (APCCSG), the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County of Los Angeles (County) departments to:

1. Develop and implement culturally, linguistically, and literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).
2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:

- Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in highly-impacted communities;
 - Leverage the State's stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and provide linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods, to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in its vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to support services through the engagement of community partners, Federally-qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
 4. Report back, one time, on the indications for testing among staff in the County's adult and youth detention facilities.
 5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
 6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of the COVID-19 pandemic on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control [CDC] testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and Federal COVID-19 sources.

This is the sixth report to the Board, which contains the following updates in the attached report submitted by DHS, DMH, and DPH:

- Status and results of ongoing efforts to bolster and improve the effectiveness of public education around COVID-19;
- Status of ongoing efforts to partner and coordinate with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and vulnerable groups;
- Progress on ongoing efforts to implement the Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds \$33 million spending plan, which outlined various strategies to address not only testing, tracing, and a broad public health

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response but also a robust plan focusing on addressing the needs of the County's most vulnerable populations, particularly communities of color, which data shows have been disproportionately impacted;

- Update on COVID-19 vaccination efforts, including distribution, demographics, strategies, and communication efforts; and
- Other highlights on the status of current efforts and next steps to fully support implementation of the Board motion's directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic.

The CEO will submit the next report, now bi-monthly, to the Board on May 23, 2021.

Should you have any questions concerning this matter, please contact me or Emy Tzimoulis, Manager, at (213) 974-4603 or etzimoulis@ceo.lacounty.gov.

FAD:JMN:TJM
EDT:JT:km

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Bimonthly Report:

A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

Departments of Health Services, Mental Health, and Public Health
February 18, 2021 (Updated March 16, 2021)

The following activities have taken place since the last report issued on November 19, 2020.

A. Public Education Campaigns

Overarching COVID-19 Community Awareness and Engagement Campaign

As noted in the last report, on September 18, 2020, the Department of Health Services (DHS) released a Request for Qualifications, known as the Professional and Technical Services Master Agreement (PAT SMA), to identify communications firms with culturally and linguistically responsive expertise and demonstrated experience working alongside community partners. A firm, Fenton Communications, was selected from among the qualified candidates. The contract execution was finalized on December 9, 2020, marking the formal initiation of the COVID-19 Community Awareness and Engagement Campaign (Campaign).

The Campaign is a Countywide effort focused on engaging populations highly impacted by the COVID-19 pandemic. As previously reported, the Campaign aims to:

- Underscore availability of COVID-19 testing regardless of immigration status and at no cost;
- Leverage the ability of community-based organizations (CBOs) to directly reach out to their culturally diverse and multilingual constituents and provide accurate health education information;
- Identify, strengthen, and amplify the capacity of available supportive resources; and
- Connect to Countywide information hubs (e.g., hotlines, websites).

DHS is using a combination of the Coronavirus Aid, Relief, and Economic Security Act, Coronavirus Relief Funds (CRF) (\$1.7 million for activities initially thought to expire on December 30, 2020) and Centers for Disease Control and Prevention Epidemiology and Laboratory Capacity funds (\$1 million through December 31, 2021). Since the Federal government and the County of Los Angeles Chief Executive Office (CEO) recently extended use of CRF dollars, DHS and the Department of Public Health (DPH) will continue to explore additional funding streams to support these efforts and will report updates on expenditures and new allocations to the Board of Supervisors (Board) in this and future bimonthly reports.

The Campaign formally launched just ahead of the winter holidays—a time typically marked by celebrations and gatherings—and coincided with a time when Los Angeles County (LA County) was experiencing a dangerous surge in COVID-19 cases, hospitalizations, and deaths. To discourage participation in gatherings that further increased the risk of COVID-19 transmission and surpassed healthcare delivery system capacity, DHS launched “Keeping Safe During the Holidays,” a mini-campaign (available at: <https://toolkit.covidhelpla.org>) focused on how to stay safe and healthy during the holidays. The mini-campaign focused on engaging those greatly impacted by the COVID-19 pandemic, including Black/African American, Latino/x, immigrant and undocumented, limited-English proficiency, low-income, and frontline worker communities. Additionally, the mini-campaign prioritized neighborhoods with higher proportions of highly-impacted residents, including large areas of Central Los Angeles, East Los Angeles, South Los Angeles, and Southeast Los Angeles.

The December 2020 mini-campaign ran from December 14 - December 30, and mobilized a coalition of over 220 CBOs as recommended by local community partners, including participants of the Advancement Project California (APC) Cross-Sector Workgroup. In December 2020, DHS leveraged an additional \$2.3 million in CRF funding to recruit CBOs to engage and disseminate “Keeping Safe for the Holidays” mini-campaign messaging and materials. DHS brought the Los Angeles Regional Reentry Partnership, Christ Centered Ministries, AltaMed Health Services, and Community Partners onboard as partners to serve as trusted messengers. This coalition was composed of faith-based, racially and ethnically diverse, multilingual, health and social services agencies, and regional nonprofit organizations across all Supervisorial Districts in LA County with strong community ties to highly-impacted communities prioritized in the awareness campaign.

Through this extensive partnership, DHS launched an integrated media campaign with Spanish-language media outlet, Univision, and a number of radio and newspaper outlets that have significant reach among LA County’s Black/African American communities. This partnership was critical as it leveraged existing CBOs and media outlet capacity from recent community-driving communication efforts, including the 2020 Census campaigns and voter outreach for the 2020 presidential election.

Partner CBOs and media outlets widely disseminated the messages of the “Keeping Safe During the Holidays” mini-campaign. This collaborative effort has resulted in a broad impact:

- **Reach:** Analysis of the mini-campaign is ongoing, but early data shows CBOs amplified up-to-date information regarding COVID-19 within their communities. In December 2020, the campaign reached approximately 160,000 residents through various channels, including in-person (door-to-door outreach and flyer distribution) and online (texting, email, and social media).
- **Local and Hyperlocal Ethnic Media—Television Spots:** A media partnership with Univision resulted in the production of a series of over 375 television spots that ran from December 15 - December 30, 2020, engaging Spanish-language audiences with culturally tailored messaging on how to celebrate the holidays safely, how to get tested, and where to find COVID-19 resources and information. Preliminary results showed 21,960,000 impressions throughout the media campaign.
- **Local and Hyperlocal Ethnic Media—Radio and Digital Ads:** Media partnerships with radio and print outlets, including KDAY-FM, KTWV-FM, KRRL-FM, KJLH-FM, Los Angeles Times, Our Weekly, Compton Bulletin, Inglewood Today, and Los Angeles Sentinel, had a significant reach among Black and African American communities. Collectively, a total of 463 radio ads and a cohesive suite of creative digital and print ads ran from December 16 - December 30, 2020, in these outlets, engaging readers and listeners with messaging on how to stay safe for the holidays, how to get tested, and where to find COVID-19 resources and information. Preliminary results showed more than 5,600,000 impressions over the duration of the media campaign.
- **Local and Hyperlocal Ethnic Media—Telethon:** To reach those on the non-digital side of the digital divide, on December 22, 2020, DHS partnered with Univision and AltaMed to host a Línea de Ayuda (an event similar to a telethon where callers can get their questions answered in real-time). Over 1,000 residents called the phone line to access credible information on COVID-19. All calls were fielded in Spanish and lasted five minutes on average. The callers expressed gratitude for being able to “speak to a real person” and getting their questions answered. A Spanish community FAQ was developed and reviewed by key County partners, including the Office of Immigrant Affairs (OIA), to ensure the availability of the most up-to-date information, including community resources accessible regardless of immigration status.

This type of impact was made possible through extensive foundational work including:

- **Capacity Building:** Partners from CBOs participated in four, two-hour communications trainings in December 2020. Training topics included best practices for engaging in digital community outreach, “Keeping Safe During the Holiday Season” messaging, and how to utilize the digital toolkit meant to supplement their community outreach engagements (e.g., information on how to access testing, including pop-up sites, at-home testing, and critical up-to-date community resources).
- **Ready Access to Resources:** With feedback from CBOs, Fenton Communications developed a platform to host digital toolkits in English, Spanish, Tagalog, Chinese, Korean, and Armenian. The toolkits included campaign materials (such as flyers, door hangers, and social media posts) for CBOs to easily access and utilize for outreach efforts. In 2021, work will continue with CBOs to co-create cultural and linguistically tailored communication materials. All communication tools, materials, and trainings are shared with partners, including CBOs and the County.
- **Web Portal:** To consolidate accessible COVID-19-related information online in both English and Spanish, Fenton Communications created a web portal, COVIDhelpLA.org, garnering over 46,000 user visits in December 2020. In 2021, the web portal will be made accessible in additional languages, including Chinese, Tagalog, Korean, Armenian, and other threshold languages.

Beyond the “Keeping Safe During the Holidays” mini-campaign, efforts continue to advance the overarching Campaign. To date, Fenton Communications has completed three key activities that improve understanding of community needs and preferences:

1. **Communication Needs and Strengths Assessment** of over 150 CBOs, including agencies contracted to conduct community outreach and engagement, highlighting the unique experiences of CBOs at the frontlines of sharing COVID-19 information and knowledge.
2. **Public Opinion Research** about perceptions of COVID-19, attitudes toward safety measures, and resources.
3. **Ten Focus Groups** with the most impacted communities to gain a better perspective on culturally relevant stigmas and attitudes among various diverse audiences, including:
 - a. Youth (Two groups: one with age ranges 12-14 and one with age ranges 15-17)
 - b. Latinx (Two groups: one with Spanish-language monolingual speakers with undocumented individuals represented and one with English-language speakers from regions most impacted)
 - c. African American/Black
 - d. American Indian/Native Alaskan/Indigenous
 - e. LGBTQ
 - f. Korean (Korean-language monolingual speakers)
 - g. Chinese (Mandarin-language monolingual speakers)
 - h. Antelope Valley Region

Findings from the learning opportunities above are being shared with community partners, other County departments including OIA, CEO, and the Joint Information Center (JIC) to support broad dissemination and amplification of culturally responsive communications.

Communication Related to the Community Health Worker Outreach Initiative (CHWOI)

As previously reported, in October 2020, DPH contracted with the California Community Foundation (CCF) to serve as the Fiscal Lead Agency for the multi-pronged Community Health Worker Outreach Initiative (CHWOI). The initiative has mobilized more than 700 Community Health Workers (CHWs) comprised of DPH CHWs and a network of peer providers contracted by CCF from 17 local CBOs. CHWOI conducted outreach in more than 82 communities across every Supervisorial District in the

County, including unincorporated East Los Angeles, North Hollywood, Pomona, South Gate, Compton, unincorporated Athens-Westmont, Palmdale, unincorporated Florence-Firestone, and Hawthorne.

To coordinate messaging and gather feedback to refine materials, DPH leveraged \$500,000 in CRF previously allocated for communications through the PATSMA, and an additional \$200,000 in CRF dedicated to the CHWOI to fund communications-related activities and materials through December 30, 2020. In response, CCF retained the services of a communications firm named Team Friday. During this reporting period, Team Friday created culturally relevant assets for the CHWOI, relying heavily on critical input and feedback obtained during regular office hours held specifically for participating CHWs.

By the end of 2020, Team Friday had accomplished the following:

- **Formative Research:** Conducted four online surveys focused on LA County residents who identified as Hispanic or Asian and reported earning no more than \$50,000 per year. Survey questions gauged participants' understanding of COVID-19, perceptions regarding risk and trustworthiness of messengers, and their intent to get vaccinated. Responses were evaluated by racial/ethnic group, age, and income, and a thematic analysis was developed and used to create assets, including talking points. Social listening was also conducted online through Reddit and Facebook communities, focusing on East Los Angeles, Boyle Heights, Huntington Park, South Gate, and Bell.
- **Key Messaging:** Developed messaging and talking points that CHWOI partners could tailor for use in their communities. Key themes elevated by the CHWs included COVID-19 myths and truths and vaccine scams. Messages were also used for Instagram Live interviews and content creation.
- **Content Creation and Graphic Design:** Developed approximately 400 graphics across 11 languages specifically designed to reach highly-impacted communities and youth. Two sets of assets were developed. The first focused on current "Safer at Home" messaging to reflect the end-of-year surge in cases/hospitalizations and "Evergreen" messaging for the hopeful future when LA County cases decrease, and communities can begin to safely gather. Most of these assets include both digital and print materials in the form of flyers, postcards, posters, social posts, and accompanying sample messaging. Standardized tools to track social media engagement across various platforms were also developed to facilitate regular reporting. An asset inventory that described all assets available for use was created and disseminated to all CHWs.
- **Outreach Materials:** Developed multilingual supplies (e.g., face coverings and hand sanitizer) for CHWs to distribute while safely conducting community-based outreach. The items produced also facilitated the implementation of health-protective behaviors, including custom masks with hashtag messaging and door hangers with prevention messaging in three languages.
- **Video Production and Photography:** Documented CHWOI partners and their work in the community to uplift stories that are often unheard across larger media outlets. Team Friday developed a robust portfolio of content including photos, six one-minute videos, B roll, extra footage for future use, and raw footage for further amplification.
- **Social Media Engagement:** Worked with eight social media influencers with reach across highly-impacted communities, that resulted in:
 - Three Instagram Live interviews with LA County DPH Officials addressing vaccine and COVID-19-related myths;
 - Five independently produced Instagram videos; and
 - Sharing of videos and material across other platforms, including Twitter, TikTok, and Facebook.

As the COVID-19 pandemic evolves, including increasing availability of COVID-19 vaccines, DPH and DHS will continue working together to review insights gained during formative research and message testing, ensure coordinated messaging and materials, and facilitate access to capacity building opportunities and culturally responsive tools for use during community outreach and engagement.

Department of Mental Health (DMH) Led Communications

In addition to efforts led by DHS and DPH, DMH continues designing and implementing complementary communications efforts that specifically target highly-impacted communities. DMH has continued outreaching to LA County communities to promote mental health via multiple hyper local/ethnic media outlets. The messaging focuses on coping with COVID-19 challenges, promoting resilience and well-being, increasing awareness of resources, including DMH's 24/7 Help Line, online resources offered by DMH and partner organizations, virtual well-being events, and free subscriptions to Headspace. Examples of hyperlocal targeted media products include digital billboards, Metro and bus line advertisements, radio and TV spots, posters at Women, Infants, and Children (WIC) offices, and displays at commonly frequented community sites. DMH's media outreach campaign demonstrates LA County's culturally and linguistically diverse communities responded favorably to these media outreach efforts, including placements in English, Spanish, and Chinese newspapers; television programming in English and Spanish; radio programming in English, Spanish, Chinese, Korean, Persian, Armenian, and Vietnamese; postings in WIC offices; outdoor placements across the County; and other types of social media.

Activities that Strengthen Departments' Sustained Communications Capacity

Each department continues to strengthen its capacity to meet the needs of diverse populations during the ongoing pandemic and beyond the duration of this work. DHS and DPH have enlisted support from communications firms to support critical activities, including developing content for and responding to inquiries resulting from the weekly COVID-19 media briefings, bolstering the use of and engagement with social media channels in various languages, and securing speaking opportunities in English and Spanish for departmental leaders for local and national outlets to broaden reach to highly-impacted communities.

In addition, collaboration between departments continues to meet the ongoing need for streamlined Countywide communications. To enhance ongoing coordination, DHS, DPH, Countywide Communications Office, the JIC, CEO's Center for Strategic Partnerships (CSP), and the Board offices that co-authored this motion, convene bi-weekly to offer communications-related updates and elevate needs. This forum helps identify new avenues for leveraging County resources. The OIA served as an indispensable partner responsible for coordinating the use of DHS and DPH-developed content in OIA-led media-buys and ethnic media briefings. On an ongoing basis, DPH and DHS continue to coordinate in developing culturally relevant content and messaging that the JIC utilizes to inform Countywide messaging.

Overall, communications efforts described in this section are linked directly to on-the-ground education and outreach activities that will be further described in the following section of this report.

B. Contracting with CBOs

Throughout this pandemic, community partners, including participants of the APC Cross-Sector Workgroup, have elevated the importance of ensuring communications-related initiatives are linked to education and outreach that enlist trusted partner organizations localized in communities highly impacted by COVID-19. The initiatives described below highlight current and emerging efforts to invest in a community-based infrastructure to enhance communication effectiveness and implement strategies tailored to the communities disproportionately impacted by COVID-19, by facilitating swift and effective dissemination of in-language information and resources in these areas.

CHWOI Outreach and Education

As previously noted, the CHWOI was launched in October 2020 with a \$18.5 million budget allocation from CRF funds. This initiative was implemented in response to the [May 26, 2020 Board Motion](#) that instructed DPH and DMH to expand their Promotora/es programs, and coordinate and mobilize CHWs to conduct grassroots outreach to amplify up-to-date information regarding COVID-19. This initiative also provided an opportunity to build capacity for a community-based system of response and facilitate collaboration and cross-learning across different peer outreach models, including violence intervention, *promotores*, parent advocates, and youth advocates. Updates regarding DMH-led efforts are included later in this report.

Agencies received assignments to work in more than 1,700 high priority census block groups across LA County, with DPH providing support. CHWs prioritized the top 15 communities based on high or ongoing rates of spread. An interactive map of ongoing outreach can be accessed here: <https://arcg.is/0L1njL0>.

As of December 30, 2020, 1,016 CHWs and 156 supervisors, including part-time staff, were onboarded as part of this initiative. A total of 732 CHWs completed required COVID-19 training and were provided with opportunities to participate in additional training to build supervisory, field safety, privacy of health information, and trauma-informed competencies.

As previously noted, Team Friday also worked closely with CHWOI-funded organizations. Tools used during outreach, such as collateral material and social media posts/graphics in multiple languages for various mini-campaigns like “Safer at Home,” “Whether at Home or in Public, Don’t Let Your Guard Down,” and “Connect to Protect”; social media and engagement trackers; and more evergreen messaging related to safer small group gatherings for future use were developed and shared via a centralized platform that was accessible to all CHWs. Coordinators of the CHWOI also regularly convene the CHWs to maximize the time CHWs spent in the field and to provide a forum for CHWs to ask questions, elevate concerns and recommendations, and receive additional training that advanced the CHWOI work and expanded CBOs’ organizational capacity in areas, including communication.

As of December 30, 2020, CHWs have conducted more than 207,772 outreach contacts and have reached an estimated 369,333 community residents.

Supervisory District	Total
District 1	57,976
District 2	52,331
District 3	11,891
District 4	11,437
District 5	9,538
Unknown (In-person)	19,014
Unknown (Virtual)	45,585
Total Outreaches	207,772

With the CRF funding extension into 2021, the CEO approved an extension of the CHWOI, including the Subrecipient Agreement with CCF. DPH is currently working with CCF to finalize the amendment for the extension of the CHWOI using unspent funds. Originally slated to end December 30, 2020, this extension will provide an estimated \$3 million in unspent funds for partner agencies to continue conducting outreach by deploying CHWs through March 2021.

Work is currently underway to develop a plan and materials for CHWs to disseminate vaccine information during this short-term extension. Most of the originally funded entities are now conducting community outreach again. CHWs recently received COVID-19 vaccine-related training in English (February 9, 2021) and Spanish (February 11, 2021).

To ensure continuity of best practices, the work completed as part of this initiative is being used to heavily inform the portfolio of activities conducted as part of the COVID-19 Community Equity Fund.

COVID-19 Community Equity Fund

On December 2, 2020, DHS and DPH announced the recipients of the County COVID-19 Community Equity Fund to help slow the spread of COVID-19 in highly-impacted communities. Fifty-one CBOs received funding to provide a range of services such as outreach, engagement, and education; system navigation; and case investigation and contact tracing. DHS and DPH are currently finalizing subcontracts with 25 CBOs to work with DHS and 26 CBOs to work with DPH. A total of \$17 million was awarded to select organizations because of their experience in providing culturally and linguistically appropriate services in historically underserved communities, with six of the funded agencies previously funded by the CHWOI. Currently, organizations are in the process of onboarding or are completing budget negotiations. For a full list of funded agencies, reference this [press release](#).

As reported in past editions of this report, in the fall of 2020, DHS and DPH contracted with Community Partners (CP) to serve as the lead fiscal intermediary. Currently, DHS and DPH are working diligently with CP to finalize the onboarding process with all the CBOs, including meeting all the Supportive and/or Housing Services Master Agreement (SHSMA) requirements that will help the CBOs qualify for future funding opportunities through the County. Of note, there has been some delay in fully onboarding the CBOs due to the unanticipated implementation of more stringent SHSMA insurance requirements leading to higher insurance premiums needing to be covered before contractors can deliver services. As of February 10, 2021, contracts have been fully executed (i.e., scopes of work and budgets have been finalized, subcontractor agreements and SHSMA onboarding requirements, including the new insurance requirements, have been met) with 21 DHS-funded CBOs and 11 DPH-funded CBOs. Both departments are continuing to work to resolve any other outstanding contracting issues and support selected CBOs.

Onboarding orientation and training for both DHS and DPH-funded organizations are currently underway. DHS organizations have covered training modules that include the following topics: COVID-19 general information, how to access testing, infection control measures, available social and medical resources, and use of existing digital toolkits. DHS anticipates all CBOs will meet onboarding requirements within the next month. DPH CBOs commenced onboarding and training starting the week of February 8, 2021, which includes additional COVID-19 vaccine-related information.

Additionally, DHS and DPH continue to work with the CEO CSP to leverage philanthropic opportunities to support the CBOs throughout the funding period. Current support includes, but is not limited to, working with the Worker Education and Resource Center (WERC) to provide high quality workforce development. WERC is currently supporting the DPH CHW program, and a similar but tailored program has been designed to support workforce development for the CBO participants in the Community Equity Fund focused on COVID-19 outreach, engagement, and system navigation. To date, WERC has provided trainings on COVID-19 and system navigation to support outreach and engagement efforts.

C. Partnership with Local Community Clinics and CBOs

While this report has primarily focused on contracting efforts completed by DPH and DHS to date, varied and extremely vital and complementary efforts are currently in progress through DMH.

Partnership Efforts Led by DMH

Community Ambassador Network (CAN)

As previously noted, the [Board Motion on May 26, 2020](#) instructed DPH and DMH to expand their Promotora/es programs. Specifically, DMH was instructed to expand on current efforts through its Innovation 2 – Developing Trauma Resilient Communities Contracts (INN2 Providers). In response, DMH used CRF funding to supplement the contracts of INN2 Providers and their community partners to develop the Community Ambassador Network (CAN). The CAN is a community outreach and empowerment effort which serves to both: 1) support and strengthen LA County communities highly impacted by the COVID-19 pandemic, and 2) create a career pathway for Promotora/es and other community members with lived experience interested in building their skills, impact, and income as Community Ambassadors.

In collaboration with the University of California, Los Angeles' (UCLA) Luskin School of Public Affairs under the [DMH + UCLA Public Partnership for Wellbeing](#), an interactive COVID-19 Priority Places map was developed in October 2020 using data from the Advancement Project California. The map illustrates the top 30 communities in LA County experiencing the greatest impact from the COVID-19 pandemic by Supervisorial District in real time. Using this hotspot analysis, additional DMH services and programming were augmented to meet the needs of the affected communities, such as the creation and implementation of the CAN.

The role of the Community Ambassador is to educate, identify, and link individuals to the right care at the right time by the right people. Since community members have more trusted relationships with their peers, they can respond to community members who are suffering from issues like oppression, job loss, and other stressors brought on by systemic inequities and the pandemic. Community Ambassadors help to drive a collective self-help model by using the inherent strengths of the community to promote healing, recovery, and empowerment.

Between October 1, 2020 and December 31, 2020, 179 Community Ambassadors were hired as a part of this initiative. During this period, the network of INN2 Providers and their community partners were able to accomplish the following:

- 895 COVID-19-related activities provided to communities;
- 114,813 people reached through community events, outreach activities, and trainings (number does not represent unduplicated participants);
- 3,435 COVID-19-related referrals;
- 2,997 successful COVID-19-related linkages made; and
- 1,057 participants successfully linked (number does not represent unduplicated participants).

Promotores de Salud Mental/Health Promoters Program

Additionally, DMH Promotores de Salud Mental/Health Promoters actively work with highly-impacted communities to provide mental health presentations and linkages to services. A total of 13 presentations, offered by the Promotores de Salud program, have been updated to integrate COVID-19-specific content. Updates include most recent scientific data and clinical support provided by UCLA's Bilingual and Spanish Interdisciplinary Clinical Training Program, the Center of Excellence, and the Prevention Center of Excellence. The Promotores de Salud Mental Program have demonstrated great ability to adapt to the changing demands and have learned the technology and content necessary to deliver their

workshops virtually, which has increased results. In April 2020, prior to the technology training, Promotores delivered seven workshops, compared to the 590 workshops delivered virtually as of November 2020.

DMH is continuing to expand its Promotores de Salud Mental Program. Despite delays in hiring new Promotores and United Mental Health Promoters, the core curriculum for the Promotores and United Mental Health Promoters has been well defined, encouraging a community empowerment model and a mutual support, Train-the-Trainer approach. This approach identifies seasoned Promotores and assigns them to mentor and train other less experienced promotores and new hires.

Speakers Bureau

DMH's Speakers Bureau also continues to be a source of trusted information from the community. Speakers Bureau members continue to provide community-based mental health education, offering presentations and trainings across LA County. By November 2020, Speakers Bureau members had collectively developed 40 distinct mental health education presentations in English and other threshold languages. The current menu of presentations addresses multiple community education needs with a commitment to cultural and linguistic specificity. The main themes of these presentations include impact of COVID-19 on the individual, family, and society; grief and loss; suicide prevention; trauma; spirituality; mental health well-being; technology-based tools and resources; and specialized content for the Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Asexual, Two-Spirit (LGBTQIA2-S) community; veterans; and children and youth. A new area of focus was on coping with the winter holidays, especially considering COVID-19 fatigue. Feedback received from community members and organizations has been extremely positive.

During this reporting period, DMH's Speakers Bureau also participated in 18 media interviews via radio, television, print, and social media platforms, reaching out to 6,500,000 public consumers locally and nationally. For the months of October and November 2020, DMH Speakers Bureau members delivered 26 different presentations, outreaching to 2,499 community members.

Finally, DMH's Speakers Bureau continues to strategically serve communities disproportionately impacted by the pandemic and civil unrest. Speakers Bureau members have been paired with over 100 faith-based organizations and other CBOs, representing various sectors and Service Planning Areas across the County that have requested mental health supports. Through collaborative efforts with Speakers Bureau members, these organizations are benefiting from customized interventions that are culturally relevant, linguistically appropriate, and clinically sound. For the months of November 2020 and December 2020, the Speakers Bureau ensured a strong presence in culturally and linguistically diverse communities to address mental health needs related to coping with the imminent holiday season, well-being, pandemic fatigue, and the COVID-19 surge.

D. COVID-19 Testing

DHS continues to provide community testing throughout the County in partnership with cities, the State, and other private partners. As of March 11, 2020, 10,278,834 COVID-19 tests have been administered in LA County. Of tests conducted at community testing sites, the largest proportion of tests have been in persons aged 18-49 (67 percent) and among Latinos/x (58 percent). The smallest proportion of tests have been in persons aged 65+ (6 percent) and among Native Hawaiians/Pacific Islanders (1 percent). The latest information regarding availability and utilization of testing sites, patient demographics for those who receive a COVID-19 test at a community site, test positivity rates, and testing among Persons Experiencing Homelessness is available on the Los Angeles County COVID-19 Community Testing Dashboard accessible here: <https://dhs.lacounty.gov/covid-19/>.

DHS has established in-home testing options to serve seniors and persons with disabilities who face barriers to leaving their homes for testing and mobile testing, including having developed a tiered testing approach based on risk factors of residents. DHS encouraged people who suspect they have been exposed to COVID-19 and who do not have issues with mobility, including seniors and persons with disabilities, to seek testing through their primary care providers or at one of the community testing sites operated by County, City, State, or community partners.

Finally, to increase community testing access, DHS added eight mobile/pop-up testing teams to bring testing closer to residents in highly-impacted communities. These mobile teams will move to areas of greatest need, setting up in community centers, schools, parks, or churches. Although staff from outpatient settings were redeployed to assist in the recent hospital surge, the Ambulatory Care Network sites are still providing testing access. In addition to the mobile/pop-up test sites, there are 172 active testing sites (both drive-up and walk-up) throughout LA County: eight City of LA-operated sites, 27 County of LA-operated sites, 10 State-operated sites, and 127 additional sites (CVS, Rite Aid, Federally Qualified Health Centers, and community partners). All COVID-19 community testing sites are listed on this LA County website: <https://covid19.lacounty.gov/testing/>.

E. Availability of Personal Protective Equipment (PPE)

Since hospitals and other healthcare entities are seeing improvements in the availability of N95 masks and gowns from their medical supply vendors, DHS's last PPE distribution was done on October 8, 2020. The Emergency Medical Services (EMS) Agency continues to fill individual healthcare facilities' requests for PPE on a case-by-case basis.

Total PPE distributed by the EMS Agency from February 1, 2020 through December 31, 2020 is shown below:

Item	Quantity
Coveralls	7,498
Shoe Covers	63,080
Hand Sanitizers	162,997
Goggles/Face Shields	477,246
Gloves	5,853,040
Gowns	8,189,973
Masks (Procedure)	12,220,650
Masks (N95)	29,356,908
TOTAL NUMBER OF ITEMS	56,331,392

Many drive-up community accessible testing sites continue receiving PPE through DHS and the EMS Agency. Community clinic-based testing sites receive their PPE through the Community Clinic Association of LA County (CCALAC), who receives needed supplies from the EMS Agency. If PPE needs are identified by the individual clinic, they contact CCALAC to have their PPE requests filled. Meanwhile, CBO testing sites have an affiliation agreement with DHS and, as such, their PPE needs are communicated to DHS who provides the needed PPE from their supply or by working with the EMS Agency.

Given the recent extension of CRF funding, DPH was allowed to complete a massive push to deliver PPE to over 4,000 facilities. DPH completed its final 2020 deliveries, with the warehouse working to obtain the final confirmation of those deliveries.

Between October 26, 2020 and January 19, 2021, DPH has distributed nearly 17.4 million pieces of PPE to assist over 4,500 external organizations, including long-term care facilities, adult residential

care centers, assisted living, and homeless shelters. Of the total distributions, 2.7 million (approximately 10 percent) have been distributed to social service providers, including homeless shelters, domestic violence agencies, gang intervention outreach workers, substance use disorder centers, and other CBOs, comprising over 700 entities. DPH continues to work with key partners to disseminate PPE and other supplies that facilitate infection control practices. For example, in December 2020, as cases of COVID-19 surged throughout the County, and especially at external organizations serving high-risk populations, such as skilled nursing facilities and homeless shelters, DPH provided more than \$10 million worth of PPE packages to all of the external organizations, to help bridge access to the following items:

Item	Quantity
Hand Sanitizers	32,148
Goggles/Face Shields	373,430
Gloves	8,156,000
Gowns	1,427,500
Masks (Procedure)	2,686,400
Masks (Cloth - Reusable)	105,500
Masks (N95)	4,577,640
TOTAL NUMBER OF ITEMS	17,358,618

DPH and DHS have conducted targeted outreach to CBOs through their existing networks and expanded outreach to provide PPE to additional social service providers, such as youth counseling services, African American Infant and Maternal Mortality groups, community health workers/promotores, and others serving and/or residing in highly-impacted communities.

As part of the DPH CHWOI, community health workers/promotores distributed face coverings and hand sanitizer to CBOs who conduct community outreach and disseminate these materials to community members. A total of 267,824 face coverings and 73,148 hand sanitizers have been distributed to the community as part of this initiative.

F. Linkages to Healthcare and Other Supportive Services

211 LA County

DPH continues to work closely with 211 LA County (211). As of December 27, 2020, 211 made 9,884 COVID-19-related contacts and 11,709 COVID-19-related referrals. 211 has also worked to link callers to COVID-19 testing referrals; as of December 27, 2020, 211 made 5,132 COVID-19 testing referrals.

Top 5 COVID-19 Service Referrals

COVID-19 Services	Food Services	Housing Supportive Services	Utility Assistance	Health Support Services
7,605	665	520	306	264

Nearly 16 percent of callers reported living in zip codes in highly-impacted areas of LA County, including, but not limited to:

- Florence-Graham, Lynwood, Huntington Park, Vernon (90001, 90002, 90255);
- Lancaster (93535);
- Bell Gardens (90201);
- Montebello (90640); and
- South Gate (90280).

Mental Health Services

DMH has deployed specialized Disaster Service Workers (DSWs) to provide specialty mental health support to several Countywide initiatives, including Project Room Key, Quarantine and Isolation Housing, City Shelters, and contact tracing. Additionally, specialty mental health nurses are deployed to serve as DSWs at Harbor UCLA. DMH also actively engages the CEO, Los Angeles Homeless Services Authority, DPH, DHS, City of Los Angeles Office of Mayor Eric Garcetti, and City of Los Angeles Department of Parks and Recreation to provide specialty mental health services to homeless individuals in LA County.

Furthermore, DMH's Help Line continues to provide 24/7 services via its general ACCESS functions, Emotional Support Line for COVID-19, Veterans Warm Line, and the Wellbeing Line for healthcare and first responders. For the months of November and December 2020, the Help Line experienced an increase of calls. Specifically, the Emotional Support Line received approximately 4,500 calls, with an estimated five percent of these calls being addressed in a language other than English.

From its inception, the Wellbeing Line has served over 1,500 County employees, first responders, teachers, and school staff by providing emotional support and referrals to a variety of resources. The feedback received from Wellbeing Line callers has been very positive. Some examples include:

- "Grateful for the space to be able to express thoughts and feelings";
- "Appreciated support in thinking about the meaning and purpose of life";
- "Felt heard and supported while navigating how to return to work safely";
- "More confident in managing self-care while caring for others"; and
- "Thankful for the help requesting mental health services through providers."

Childcare Voucher Program

The Board and the City of Los Angeles dedicated CRF dollars to provide childcare services (vouchers) for essential workers and low-income working parents during the COVID-19 pandemic. As of December 30, 2020, a total of 10,513 applications have been received; 8,014 are new applications and 2,499 are participants that had State vouchers and can continue services through the CARES Act.

Since the State voucher program has ended, CRF funding has allowed LA County to continue providing care to families in need. Once applications are submitted, they are sent to one of the 11 local agencies for processing. The LA County Alternative Payment agencies include: Care Resource Center; Children's Home Society; City of Norwalk; Connections for Children; Crystal Stairs, Inc.; Drew Child Development Corporation; International Institute of Los Angeles; Mexican-American Opportunity Foundation; Options for Learning; Pathways LA; and Pomona Unified School District. Families residing in LA City are provided an LA City voucher, and families residing in LA County are provided an LA County-funded voucher. As of January 13, 2021, a total of 9,459 children have received childcare vouchers, of which 6,017 are from LA County and 3,442 are from LA City. LA County childcare vouchers are serving 823 infants, 896 toddlers, 1,867 preschool age children, and 2,431 school age children. The LA County program estimates \$13,522,6598 in expenditures as of December 30, 2020, for approved childcare vouchers.

G. Contact Tracing

As of the latest available analysis report dated February 8, 2021, the total number of cases assigned to an interviewer was 984,238. Of these assigned cases, about 44.4 percent (n= 436,734) completed the contact tracing interview; more than 219,367 close contacts were identified as a result; and 139,927 (63.8 percent) of the identified close contacts completed the contact interview.

H. Partnering with County Departments

COVID-19 Safety Compliance Certificate Program

The COVID-19 Safety Compliance Certificate Program continues to be a vital tool for local businesses and community members to implement safety protocols. DPH established the Certificate Program to support LA County businesses currently allowed to operate under the County's Health Officer Orders to voluntarily self-certify and promote their compliance with the required Public Health COVID-19 Protocols (Protocols) (<http://publichealth.lacounty.gov/media/Coronavirus/>). Other County departments that have also served critical functions, such as fielding questions from the public and communicating the program's availability to businesses and the general public, include the Department of Consumer and Business Affairs (DCBA); Workforce Development, Aging and Community Services; the CEO's Office of Emergency Management; and the JIC. CHWOI health promoters and local elected officials who want to support local businesses and worksites to ensure safer environments for their workers and clients have also promoted the program. DCBA also follows up with business owners and employees who request more information about supportive resources (e.g., financial assistance such as grants, loans, and capital) currently available to small businesses.

Between October 3, 2020 and December 31, 2020, DPH received a total of 18,452 program surveys. Nearly 95 percent (94.5 percent) of these surveys reflected that the respondent owned or was employed by a business located in a city within Los Angeles County (n=17,463). While most surveys were linked to businesses in LA County, several entries were linked to other jurisdictions, including a total of 34 states/territories and eight foreign countries.

15 Cities/Communities with the Most COVID-19 Safety Compliance Certificate Program Surveys Completed

City/Community	# of Surveys
City of Los Angeles	4970
Torrance	503
Pasadena	384
Beverly Hills	366
Santa Monica	356
El Monte	339
Glendale	323
Santa Fe Springs	317
Sherman Oaks (City of LA)	290
Burbank	283
North Hollywood (City of LA)	267
Long Beach	259
Van Nuys (City of LA)	236
Pomona	234
Lancaster	219

15 Zip Codes with the Most COVID-19 Safety Compliance Certificate Program Surveys Completed

Zip	# of Surveys	SD	Area Name
90670	317	4	Santa Fe Springs
91733	266	1	South El Monte
90012	214	1	Civic Center/Chinatown
90045	213	2,4	LAX Area (City of LA)
90015	212	1,2	Downtown LA (City of LA)
90210	202	3	Beverly Hills
90057	199	1,2	Westlake (City of LA)
91401	185	3	Van Nuys (City of LA)
90503	179	4	Torrance
91355	175	3	Reseda (City of LA)
90028	167	3	Hollywood (City of LA)
90731	157	4	San Pedro (City of LA)
91505	144	3,5	Burbank
90010	139	2,3	Wilshire (City of LA)
90255	136	1,2	Huntington Park/Walnut Park

Some of the areas with the highest rates of survey completion mirror some of the highly-impacted communities prioritized for COVID-19 outreach and education services through the CHWOI and the COVID-19 Community Equity Fund.

The languages available for this training include English, Spanish, Arabic, Armenian, Chinese (Traditional and Simplified), Japanese, Khmer (Cambodian), Korean, Farsi, Russian, Vietnamese, Tagalog, and Thai. This is an important step to ensure that workers and vulnerable communities are provided with in-language resources regarding workplace protections to help slow the spread of COVID-19. As of December 31, 2020, completion rates by language are as follows:

Surveys by Language

Language	# of Surveys
English	16,318
Spanish	876
Korean	122
Simplified Chinese	65
Japanese	34
Thai	16
Vietnamese	13
Traditional Chinese	7
Russian	6
Farsi	2
Tagalog	2
Armenian	1
Cambodian	1
Grand Total	17,463

COVID-19 Community Ambassador Program

On January 12, 2021, DPH launched the new voluntary COVID-19 Community Ambassador Program, followed by a broader rollout to all County employees on January 27, 2021. The COVID-19 Community Ambassador Program was created with the support of the Board and aimed to engage all County staff to become active partners in implementing infection control best practices. To become a COVID-19 Community Ambassador, County employees must view a 30-minute training video, which provides helpful insights on COVID-19 prevention and infection control. Once the training is complete, participants are emailed a Certificate of Completion and may visit one of the eight Service Planning Area locations to pick up a specially branded COVID-19 Ambassador face covering, Ambassador pin, and COVID-19 Directory Card. Participants are also provided an activity log to report back on efforts completed in the community. More information about the program is available here: <http://publichealth.lacounty.gov/CommunityAmbassadorProgram/>.

As of February 3, 2021, 2,355 County employees have completed the online training and received their certificates. County departments with the highest number of employees who completed the program include the Departments of Public Health (n=378, 16 percent); Health Services (n=353, 15 percent); Public Social Services (n=322, 14 percent); Probation (n=211, 9 percent); and Children and Family Services (n=147, 6 percent). County employees participating in the program most commonly self-reported the following demographic information:

- 19 percent reported living in the City of Los Angeles;
- Median age of participants is 45 years old;
- Most participants (39.79 percent) reported being Hispanic or Latino; followed by Asian or Pacific Islander (21.40 percent), Black or African American (15.80 percent); and White or Caucasian (15.24 percent); and
- Most participants (22.97 percent) reported living with four or more people in their household.

Since most participants (83.61 percent) reported being interested in receiving additional updates about the COVID-19 response, ongoing improvements will be made to the program to ensure the County workforce remains abreast of ongoing developments, including vaccine-related information. Plans are currently underway to expand the COVID-19 Community Ambassador Program to community residents.

I. COVID-19 Vaccination

While availability of a COVID-19 vaccine seemed far from reach in June 2020, when the motion that initiated these report backs was passed, it is significant to note that vaccination against COVID-19 began in mid-December 2020. While vaccination updates were not initially included in this report back, future editions of this document will include this information as many communication and community engagement-related efforts have now shifted toward increasing awareness, availability, accessibility, and uptake of the COVID-19 vaccine.

Vaccine Priority Groups

Prioritization of groups to be vaccinated happens at the Federal level. States review and finalize these recommendations, and counties are asked to implement the state's prioritized tiering. In December 2020, vaccination appointments were first opened to Phase 1A, Tier 1 healthcare workers, then opened to staff and residents at skilled nursing and long-term care facilities and people ages 65 and older.

On January 25, 2021, Governor Newsom announced three additional groups of frontline workers should be vaccinated as part of Phase 1B, Tier 1: Education and Childcare workers, Food and Agriculture workers, and Emergency Services workers. With very limited vaccine supply and uncertainty on timing and sustainability of increased production, a plan for expanding vaccination availability to these additional sectors was finalized alongside community partners, including CBOs; elected officials and city managers;

other government agencies; school districts; childcare providers; health care and vaccination partners; labor unions; faith-based organizations; representatives of grocery stores and agriculture communities; law enforcement; and the courts. The DPH COVID-19 Vaccination Strategy Phase 1B, Tier 1 is available here:

http://www.publichealth.lacounty.gov/media/coronavirus/docs/Vaccine_Phase1B_Distribution_Plan.pdf

DPH started vaccinations for these additional frontline workers on March 1, 2021.

Recently, the State announced that after completion of Phase 1B, Tier 1 (Education and Childcare, Emergency Services, Food and Agriculture), they would change the vaccine rollout strategy in California, noting Statewide vaccine allocation and distribution efforts would be coordinated by a third-party administrator, Blue Shield of California. Currently, public health agencies across the State, including DPH, continue working with the State to determine how to maintain and continue to grow the robust local network of vaccine administrators and have an efficient vaccine distribution system that meets the diverse needs of all LA County communities, especially in our most vulnerable neighborhoods.

Effective March 15, 2021, County residents with one or more eligible high-risk medical conditions or disabilities, as well as those who live or work in congregate living spaces, are now eligible for COVID-19 vaccination.

DPH makes the latest vaccine-related information available on the web, including vaccine priority groups, links to vaccination appointments through the Statewide appointment registration system, and other critical educational materials at: www.VaccinateLACounty.com and www.VacunateLosAngeles.com.

Vaccine Distribution and Administration

On December 18, 2020, DHS began vaccinating its workforce members at three of the four DHS hospitals. Efforts began with high-risk workforce members, including those who worked in emergency departments and intensive care units, before moving onto lower risk healthcare workers. As of January 26, 2021, DHS has provided 17,335 first doses to health care workers. Of those, more than 13,121 workers have received second doses. DHS is continuing to schedule both first and second doses and has expanded the number of sites where workforce vaccinations are taking place.

During this reporting period, five large capacity COVID-19 vaccination sites were created (Downey, Inglewood, Pomona, Northridge, and Valencia) and two walk-up vaccination sites (Balboa and El Sereno), all of which were managed by the County of LA (i.e., DPH, Fire, Office of Emergency Management). While these large-scale sites are an important mechanism to quickly administer large quantities of vaccine, the success of the overarching vaccination strategy lies in coordinated vaccine distribution through a very extensive and capable network of trusted pharmacies, hospitals, Federally Qualified Health Centers (FQHCs), and other health clinics. During the week of February 14, 2021, there were 391 sites offering vaccinations, including: 139 FQHCs, 224 retail pharmacies, 16 hospitals, and 12 points of dispensing run by the City and County. Ten additional vaccination sites were added in East Los Angeles and South Los Angeles, bringing the total number of vaccination sites in these two communities to 49, including 35 sites in South Central Los Angeles and 14 in East Los Angeles.

As of March 10, 2021, DPH has administered more vaccines than any other California county, and even more than some other large cities nationwide, with 2,741,577 vaccine doses, including 899,527 second doses.

The latest information regarding vaccine doses arriving and being administered in LA County is available on the COVID-19 Vaccine Distribution Dashboard: <http://publichealth.lacounty.gov/media/Coronavirus/vaccine/vaccine-dashboard.htm>.

Vaccine Availability

Weekly shipments from the State have fluctuated and continue to be limited in supply. During the week of March 8, 2021, DPH received over 312,000 doses, 54,000 of which were doses of the newly federally approved Johnson & Johnson vaccine. DPH's allocation for the week of March 15, 2021, is lower than the previous week, as we did not receive any Johnson & Johnson doses; DPH anticipates this may be true again for the week of March 22, 2021. During the week of March 15, 2021, DPH received 259,660 doses, 70 percent (181,560 doses) that are for first doses, and 30 percent (78,100 doses) that are allocated for second doses that are due this week.

About 17 percent of the first dose supply is for the education sector, 2.6 percent for the emergency response sector, 16 percent for the food and agriculture sector, 18 percent for people who are ages 65 and older, almost 19 percent for people in the newly eligible group of people with certain comorbidities and disabilities, and 27.5 percent is allocated for anyone that is currently eligible to be vaccinated.

DPH hopes to see an upward trend in the weekly shipment of vaccine doses as we work towards getting vaccines into the arms of eligible and vulnerable populations. Scheduling an appointment right now continues to be challenging for many people within LA County and beyond because of the limited supply of vaccines received from the State. Across vaccination providers, there continues to be much more capacity to vaccinate than supply. During the week of March 15, 2021, there were over 627,000 appointment slots available, but only about 259,000 doses. Our large capacity vaccination sites alone could be providing 210,000 additional doses this week if there was sufficient supply.

Demographics of Residents Who Have Received the Vaccine

DPH is now receiving demographic data from the State vaccination registry to help analyze who is getting vaccinated and where gaps are occurring. This data is very useful to help reallocate supplies, including additional outreach and education resources, to ensure there is an equitable distribution of the vaccine.

As of March 8, 2021, among people for whom race/ethnicity data are available from the State, the percentage of people who have received at least one dose of vaccine, by race ethnicity, is as follows:

Race/Ethnicity	Number of People Who Have Received at Least One Dose of Vaccine
American Indian/Alaska Native	4,316 (0.3%)
Asian	307,691 (17.9%)
Black/African American	94,220 (5.5%)
Latinx	427,019 (24.9%)
Native Hawaiian/Pacific Islander	9,591 (0.6%)
White	560,556 (32.7%)
Other	225,895 (13.2%)
Multi-Race	25,255 (1.5%)
Unknown	61,550 (3.6%)
Total	1,716,093 (100%)

As of the week of March 8, 2021, 59.3 percent of LA County residents 65 and older have received at least one dose of the vaccine, and 33.7 percent have received both doses. The estimated percentage of older adults who have received at least one dose of vaccine, by race ethnicity, is as follows:

Race/Ethnicity	Number of People 65+ Who Have Received at Least One Dose of Vaccine	Estimated Total Population 65+ in County+	Estimated Percentage of Population 65+ Who Have Received at Least One Dose of Vaccine
American Indian/Alaska Native	1,804 *	3,759	48.0% *
Asian	140,531	263,775	53.3%
Black/African American	49,041	126,732	38.7%
Latinx	176,862	406,155	43.5%
White	320,705	570,351	56.2%
Multi-Race	10,776	--	--
Other	91,645	--	--
Unknown	20,639	--	--
Total	815,271	1,373,617	59.3%

NOTE: Estimates not available for the Native Hawaiian/Pacific Islander group, Multi-Race, and Other/Unknown.
 * AI/AN number and percentage vaccinated may be overestimated due to inclusion of some multi-race individuals counted in the number vaccinated and a likely undercount in the estimated total population.

DPH continues to implement strategies to see continued improvements in vaccination rates among highly impacted communities. For example, we are continuing to increase allocations to community sites serving our hardest hit communities so that providers can vaccinate more people. During the week of March 15, 2021, Federally Qualified Health Centers, often elevated as trusted healthcare providers that are embedded in the fabric of local communities, are administering almost 68,000 doses, the most doses of any single sector. Additionally, during the week of March 15th, 79 mobile vaccination sites will be operating across LA County to vaccinate people living in senior centers and residential communities, and in hard-hit areas of the County.

Evolving Vaccination Strategy

As the vaccination program continues, DPH is looking at strategies that improve access to vaccine and assistance in securing appointments. Some of the strategies that DPH is currently organizing to bolster these efforts include:

- **Activating mobile teams** to bring vaccinations directly to seniors living in housing developments or accessing senior centers in the County's hardest-hit communities;
- **Mobilizing community health workers** in highly-impacted communities to provide information to residents about how to get vaccinated and dispelling myths and misinformation about the vaccine;
- **Increasing staff capacity** for the phone line that residents with disabilities or without computer access can call for assistance with appointments (833-540-0473 between 8:00 am and 8:30 pm, 7 days a week);
- **Offering more support to neighborhood vaccination sites.** As of February 8, 2021, DPH placed 60 volunteers from various universities at sites to provide assistance with data entry and cold-chain support, and to assist licensed clinical vaccinators. DPH also continues offering weekly office hours for vaccination sites to assist with emerging challenges and to communicate changes in State data reporting requirements; and

- **Continuing collaborations with community and labor partners** to plan for the upcoming rollout of vaccinations to workers in education and childcare, food and agriculture, and emergency services and law enforcement. From our outreach sessions with stakeholders, we understand that, for this varied group, there is a need to have vaccines given as close to the worksite as possible. This can be done with support from labor and healthcare partners through community-based and employer-held dedicated worksite clinics, mobile clinics, and at existing vaccination sites.

Communicating About the Vaccine

As the lead for COVID-19 vaccination efforts and related messaging, DPH is working to communicate broadly and in a more tailored manner to communities disproportionately impacted by the virus.

- **Online Resources:** Launching and maintaining vaccine-specific websites, including www.VaccinateLACounty.com and www.VacunateLosAngeles.com; and bimonthly newsletter in English and Spanish that now has more than 300,000 subscribers.
- **Standard Messaging and Materials:** Developing and updating vaccine-related materials for use by DPH-regionally based staff and staff contracted through the CHWOI and COVID-19 Community Equity Fund, among others.
- **Earned Media Outreach:** Conducting community-specific media outreach, including ethnic media briefings with in-language spokespersons and proactively pitching to community-preferred media outlets.
- **Paid Media:** Placing DPH messaging in paid media outlets (e.g., radio, digital billboards, and digital and streaming services) that reach populations in highly-impacted groups or locations in LA County.
- **Targeted Social Media:** Conducting geotargeted social media promotion to garner interest in DPH messaging/programming and developing easily shareable content in multiple languages.
- **Amplifying Existing Programming:** Conducting regularly scheduled COVID-19 vaccine-related information sessions focused on safety, distribution, support, etc.

DHS is following [LA County Department of Public Health](#) guidance and timeline on COVID-19 vaccine allocation. DHS is starting with patients ages 65 and older, though all of our empaneled patients will be eligible for the vaccine in coming months. The department is reaching out to patients by email, phone, and text to schedule them for their vaccine when they become eligible. DHS will be tracking data on patient vaccinations, including race/ethnicity and language, to support planning for targeted outreach.

Currently, DHS is actively raising awareness and engaging patient populations around vaccination availability. The department sent an email on January 22, 2021, to the empaneled patient population, explaining who was eligible for the vaccine, how to get an appointment, how to find out when it was their turn and what they should know about the vaccine. The email also addressed concerns about historical racism in healthcare and the disproportionate impact of COVID-19 on communities of color. The department plans to send weekly emails about the vaccine with information that is expected to address vaccine hesitancy.

DHS added COVID-19 vaccine information to the DHS [website](#) and to the patient portal, and is sending texts, robocalls, and postcards. All of the outreach and education materials have been translated into Spanish. More than 70 percent of the DHS patient population self-identifies as being from communities of color. Hence, these efforts are reaching communities that are most impacted by COVID-19.

DHS has worked hard to ensure all staff was made aware of the vaccine. The DHS communications team worked with the vaccine steering committee to send out e-mail announcements, design and place screen savers on computers, and create an internal Sharepoint page with fact sheets, FAQs, videos, and more. The Sharepoint page also includes clinic schedules and maps, and guidance on what to do after

receiving the vaccine. The department also held a Town Hall session for all staff and sent managers and supervisors talking points with key messages about the vaccine being safe and effective. There have been other efforts to reach specific populations, including a training and Q&A session for community health workers. In response to the executive order by LA County Board of Supervisors Chair Hilda L. Solis and DPH opening up vaccines to those ages 65 and older, DHS began vaccinating patients on January 21, 2021. As of March 15, 2021, DHS has vaccinated 24,947 patients.

DHS is also sharing information about vaccinating workforce members and patients on Twitter and through media interviews. The doctors and nurses will serve as ambassadors to the patients, sharing the benefits of getting a vaccine and reinforcing that it is safe and effective in preventing serious illness, and even death, from COVID-19.

DHS continues to work closely with DPH and the JIC, given their lead role in vaccine messaging. DHS is working with LA 36 to get photos and videos of patients getting vaccinated, and is collaborating with a broad range of community partners, including CBOs, universities, and health plans, to better understand and address vaccine hesitancy.

J. Related Efforts Previously Reported Separately

COVID-19 Testing in Correctional Facilities

Directive three in the motion that initiated this report back, initially required a weekly report to provide COVID-19 testing data from the correctional facilities; effective October 8, 2020, this has been approved to be issued as a monthly report. DHS's Juvenile Court Health Services (JCHS) and Correctional Health Services (CHS) provide health care services, including testing, to adults and youth detained in LA County correctional facilities.

The current status of COVID-19 testing of individuals who are detained in LA County's adult and youth detention facilities is reflective of the collaborative testing efforts among DHS, the Los Angeles County Sheriff's Department, and the Probation Department.

The practice of performing universal testing of individuals on intake continues for individuals with symptoms of COVID-19, as well as other indications. From mid-November 2020 through the end of December 2020:

- JCHS administered 794 tests with 41 positive results; and
- CHS administered 7,823 tests with 466 positive results.

In December 2020, Worksite Labs began rapid turnaround testing through an on-site lab to provide test results within a targeted five hours from the time of sample acquisition. Individuals found to be positive are isolated in either the Correctional Treatment Center (for those who need higher level of medical attention) or in the 241/242 area where they receive checks from medical staff twice a day. Temperatures and vital signs (including Pulse Oximetry) are taken, and the patients are queried for COVID-19 symptoms. Any patient suffering symptoms that need further attention are sent to the LAC+USC hospital or another nearby hospital for evaluation and appropriate treatment.

Boyle Heights Pilot Project

On August 4, 2020, the Board motion, *Activating Aid for Residents Who Cannot Isolate Comfortably at Home* (Item No. 20, Directive No. 3), directed DPH and DHS, with relevant County departments, to work with the Boyle Heights Testing Site partners and report back in 30 days on the appropriate design of the model to accomplish cross-sectoral collaboration, and to assess the feasibility of implementing a similar Countywide program in areas of high disparity.

Initial efforts have begun towards designing an appropriate collaborative model; however, the approach to community-based testing has shifted towards providing testing via mobile and pop-up sites in areas of high disparity, as described in the testing portion of this report.

K. Next Steps

The following items reflect next steps as they have been reported in past editions of this report back. Future editions of this report will update this section to reflect completion of some of these items and the next phases of ongoing activity.

- 1. Continue collaborating with the Advancement Project California (APC) Cross-Sector Group.**
The APC Cross-Sector Group is no longer convening. However, in December 2020, APC updated their report and issued revised recommendations (<https://www.racecounts.org/covid-statewide/>). The update reflects the impact of the devastating surge on communities of color and recommends Statewide approaches for reopening and the need for deep investments in the public health workforce (e.g., community health promoters, compliance enforcement staff) and related infrastructure (e.g., unemployment insurance for all workers, government support for impacted communities, and financial support for small businesses). Additional recommendations regarding embedding equity in vaccine distribution have been addressed in various sections of this report.
- 2. Select a fiscal entity to subcontract CBOs to support COVID-19 testing and contact tracing efforts; system navigation (e.g., linkage to care and other resources); and education, outreach, and engagement to highly-impacted communities.**
Contracts with fiscal intermediary Community Partners (CP) were executed on September 24, 2020, and 51 CBOs have been identified by DHS and DPH (25 CBOs to work with DHS and 26 CBOs to work with DPH). As of February 10, 2021, contracts have been fully executed (i.e., scopes of work and budgets have been finalized, subcontractor agreements and SHSMA onboarding requirements, including the new insurance requirements, have been met) with some of the CBOs. DHS has finalized contracts with 21 CBOs, and DPH has finalized contracts with 11 CBOs.
- 3. Identify and execute a contracting mechanism to procure communication-related services.**
DHS has executed a contract with Fenton Communications to support the CBO-driven efforts with culturally and linguistically responsive co-created communications materials. DHS, in partnership with Fenton, executed a mini-holiday campaign focused on staying safe during the holidays, testing access, and community resources that engaged, funded, and supported capacity building around communications for over 220 CBOs. These efforts were coupled with leveraging hyperlocal and local ethnic media to reach communities most impacted by COVID-19. DPH will continue communications efforts through related activities conducted as part of the CHW Outreach Initiative. DPH and DHS will continue to work collectively to ensure coordinated messaging and ongoing collaboration.
- 4. Identify and leverage other resources, County or otherwise, to support implementation and communication of elements in this motion.**
DPH and DHS continue to work closely with the CSP to ensure coordinated action with local funders who are interested in supporting COVID-19 response efforts. There is ongoing exploration by CSP to support CBOs funded through the COVID-19 Equity Fund and others to do outreach and engagement to mitigate COVID-19 impact, including increasing vaccine uptake. To date, CSP provided technical assistance to small CBOs to apply for the Equity Fund; the Ballmer Group supported the Prevention Institute to draft and help implement the *Integrated Plan*, which directly aligns with recommendations set forth by the APC's Cross-Sector Group, as well as with other ideas elevated by additional County partners; and *Together Toward Health* has provided start-up funds for small CBOs in the COVID-19 Equity Fund, and has also funded the Worker Education and Resource Center (WERC) to provide training for CBOs in the COVID-19 Equity Fund.



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FESIA A. DAVENPORT
Chief Executive Officer

July 21, 2021

To: Supervisor Hilda L. Solis, Chair
Supervisor Holly J. Mitchell
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

From: Fesia A. Davenport
Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

HOLLY J. MITCHELL
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

REPORT BACK ON A JUST AND EQUITABLE RESPONSE TO DISPARITIES ILLUMINATED BY THE COVID-19 PANDEMIC (ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)

On June 9, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), in collaboration with the Advancement Project California's Cross-Sector Group (APCCSG), the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH), to review the recommendations in *How Race, Class, and Place Fuel a Pandemic* and in the *DPH Strategies for Addressing COVID-19 Disparities in Health Outcomes Among Highly Impacted Populations* and report back monthly on work with relevant stakeholders and County of Los Angeles (County) departments to:

1. Develop and implement culturally, linguistically, and literacy appropriate public education campaigns by contracting with outside entities with deep connections within highly impacted communities, including Black, Latinx, Asian, Native Hawaiian/Pacific Islander, Indigenous, American Indian and Alaskan Native, low-income, and justice-involved populations, such as local ethnic media partners and local community-based organizations (CBOs), and in partnership with local community leaders that:
 - Underscore availability of free COVID-19 testing;
 - Leverage the ability of CBOs to directly reach out to their constituents and form "neighborhood education teams";
 - Identify, strengthen, and amplify the capacity of supportive resources; and
 - Connect to information hubs (e.g., hotlines, websites).
2. Partner with local community clinics and CBOs that serve the most COVID-19-impacted neighborhoods and non-geographic, identity-based vulnerable groups to:

- Provide technical assistance to help community organizations collaborate with and support existing and proposed testing sites in highly-impacted communities;
 - Leverage the State's stockpile and Personal Protective Equipment (PPE) resources to support distribution to community-accessible testing sites;
 - Conduct outreach to the community about COVID-19 testing and provide linkages to healthcare and other supportive services;
 - Identify the capacity and resource needs of community-based clinics and CBOs that serve our most impacted neighborhoods, to offer testing and have an adequate supply of PPE for clinical staff employees;
 - Leverage the cultural and linguistic competency of community partners to support and enhance the County's contact tracing efforts in its vulnerable and at-risk communities; and
 - Ensure testing and contact tracing efforts are integrated with care delivery and linkages to support services through the engagement of community partners, federally-qualified health centers, and County clinics.
3. Report back weekly on the current status of COVID-19 testing of individuals who are detained in the County's adult and youth detention facilities.
 4. Report back, one time, on the indications for testing among staff in the County's adult and youth detention facilities.
 5. Report back monthly regarding the Countywide efforts to address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic.
 6. Direct the CEO, in consultation with relevant departments, to identify and allocate the funding necessary to support the above directives and the County's efforts to reduce the disparate impact of the COVID-19 pandemic on communities of color, including detailing where involved departments have access to external funding sources (e.g., Centers for Disease Control [CDC] testing grant, contact tracing, and related activities) and exploring whether these efforts can be reimbursed through the Federal Emergency Management Agency and federal COVID-19 sources.

This is the seventh and final report to the Board, compiled by DHS, DMH, and DPH, which contains the following updates, lessons learned, and recommendations:

- Updates and results of the comprehensive, evolving efforts to bolster and improve the public education around COVID-19;
- Updates and results of ongoing efforts to partner and contract with trusted messengers, including CBOs, faith-based organizations, and local community clinics that serve the most COVID-19-impacted neighborhoods and vulnerable groups;

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- Updates on COVID-19 testing, contact tracing, and vaccination efforts, including distribution, demographics, strategies, and communication efforts;
- Updates and results of partnerships among County departments and with philanthropic entities to fully support implementation of the Board motion's directives to address racial, ethnic, and income disparities magnified during the COVID-19 pandemic; and
- A summary of lessons learned, best practices, and recommendations to guide the response and coordinate services needed to address and reduce the impact of racial, ethnic, and income disparities magnified both during the COVID-19 pandemic and as the County moves forward in its recovery.

Should you have any questions concerning this matter, please contact me or Emy Tzimoulis, Manager, at (213) 974-4603 or etzimoulis@ceo.lacounty.gov.

FAD:JMN:TJM
EDT:JT:kdm

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Mental Health
Public Health

Final Report:

**A Just and Equitable Response to Disparities Illuminated by the COVID-19 Pandemic
(ITEM NO. 9, SUPPLEMENTAL AGENDA OF JUNE 9, 2020)**

Departments of Health Services (DHS), Mental Health (DMH), and Public Health (DPH)

This is the final report in response to the [Board of Supervisors' \(Board\) motion issued on June 9, 2020](#), that charged DHS, DMH, and DPH, among other directives, to: 1) develop culturally, linguistically, and literacy appropriate public education campaigns by contracting with outside entities with deep connections to highly impacted communities; and 2) partner with local community clinics and community-based organizations (CBOs) that serve the most COVID-19-impacted neighborhoods.

This report summarizes activities that have taken place since the last report issued on March 18, 2021, and reflects on lessons learned since the inception of these reports.

A. Public Education Campaigns

Since March 2020, the Los Angeles County (County) has experienced varying phases of the pandemic, including challenges related to: limited COVID-19 testing supplies and capacity; shortages of Personal Protective Equipment (PPE); ongoing developments in and understanding of COVID-19 transmission, prevention, mitigation, and treatment; reopening and closure of various sectors based on County community transmission levels; surges of COVID-19 cases, hospitalizations, and deaths; ongoing demand for mental health resources and supports; ongoing need for resources that facilitate adherence to public health measures and support daily living; and limited availability of vaccine supply and related equipment (e.g., specialized refrigeration units) to the eventual expansion of COVID-19 vaccine availability and vaccine-eligible community members. Each phase and challenge required public education campaign(s) consisting of timely communications that center the unique experiences and concerns of highly impacted communities and deploy a combination of traditional media services (e.g., paid and earned media opportunities in both mainstream and hyperlocal ethnic media) and complementary “on the ground” education and outreach activities conducted through a network of trusted community-based partners. Examples of public education campaigns developed by DPH, DHS, and/or DMH, often in collaboration with the Countywide Joint Information Center (JIC) and other County and external partners, including the Office of Immigrant Affairs (OIA), are listed in **Appendix I**.

By working with one another, these various entities have been able to share resources, including using the County Channel LA 36 video and photography resources to capture images and videos for use in these campaigns. Images and videos of patients getting vaccinated while visiting DHS hospitals or DPH-run vaccination sites to highlight real experiences that foster vaccine confidence, or peer providers offering education and resources in the community to highlight community-centered strategies and availability of services, have all been made possible by working with the JIC in partnership with contracted communications firms. Also, broader dissemination of key messaging to diverse populations has also been a result of these collaborative efforts. At different points in time throughout the pandemic, OIA and the JIC have worked with contracted communications firms to convene forums specifically for ethnic media partners who develop content preferred by communities of color. Both OIA and the JIC have made their resources available and have actively engaged DPH, DHS, and DMH in activities,

including briefings specifically for ethnic media channels or specific community groups (e.g., immigrant, sector specific), media buys (e.g., television and radio spots) to place department-specific content, and partnerships by leveraging relationships with community leaders to directly reach specific segments of the community. For example, OIA linked departments to the Archdiocese of Los Angeles to share vaccine-related information with their Spanish-speaking faith community through the Archdiocese's radio and TV channels. By fostering this relationship, departments were then able to work more closely with the Archdiocese, as well as other faith-based organizations (FBOs) and CBOs, to help facilitate Q&A sessions for community members and access church facilities to host community testing and vaccination sites in geographic locations facing higher rates of COVID-19 infection and lower vaccination rates.

DMH, DHS, and DPH have all deployed a variety of in-language strategies to communicate and engage with diverse communities across the County, including:

- **Standard Messaging and Printed Materials:** Developing and updating materials for use by staff contracted to conduct community education and engagement as part of initiatives described later in this report.
- **Online Resources:** Sharing materials and messaging to launch and maintain audience or topic-specific websites, including <https://dmh.lacounty.gov/resources/> (DMH), <https://covidhelppla.org/> (DHS), and <http://VaccinateLACounty.com> and <http://VacunateLosAngeles.com> (DPH); as well as listservs and newsletters that now reach hundreds of thousands of subscribers across the County.
- **Paid Media:** Placing community-specific messaging in paid media outlets (e.g., television, radio, digital billboards, and digital and streaming services) and community preferred locations (e.g., Women, Infant, and Children [WIC] offices, corner stores, transportation hubs) targeted to reach populations in highly impacted groups or locations in the County.
- **Earned Media:** Leveraging opportunities to work with in-language or trusted community-specific spokespersons (e.g., faith leaders, celebrities, athletes, social media influencers) and other entities who donate their time or resources (e.g., paid media placements) in support of the COVID-19 response.
- **Targeted Social Media:** Developing easily shareable content in multiple languages; conducting geotargeted social media promotion to share news about the status of COVID-19 in the County and garner interest in DMH, DHS, and DPH messaging/programming; and amplifying complementary messaging/programming offered by Community Partners (CP).
- **Phone Lines and Other Phone-Based Strategies:** Providing access to services and supports, particularly for community members with less access to or comfort with technology and the internet (e.g., DMH 24/7 Helpline; DPH Vaccine Call Center for older adults and people with disabilities); contacting community residents through the use of robocalls with in-language COVID-19-related messages and text-based phone campaigns.
- **Promotion of New and Existing Programs and Services:** Sharing news about available services, virtual events, and COVID-19 safe in-person events.

Beyond the aforementioned strategies, ever-changing COVID-19 communications needs have also required a nimble, coordinated approach, particularly between DPH and DHS, to contract, onboard, and mobilize communications firms and community-based partners. As noted in past editions of this report, in the fall of 2020, DHS and DPH contracted with the nonprofit organization CP to serve as the Fiscal Lead Agency for the COVID-19 Community Equity Fund (Equity Fund), the primary mechanism for facilitating completion of directives included in this Board motion. In late 2020, DHS and DPH announced the 51 CBOs funded through the COVID-19 Equity Fund

(25 CBOs to work with DHS and 26 CBOs to work with DPH) to provide a range of COVID-19-related services. With support from the Chief Executive Office (CEO) Center for Strategic Partnerships (CEO CSP), an additional eight agencies (four working with DHS and four working with DPH) were added to the cohort of contracted CBO partners, in collaboration with partner agency Public Health Institute (PHI) through their Statewide initiative, *Together Towards Health*. All 58 CBOs (see **Appendix II**, listing of contracted CBO partners) were contracted to conduct one or more of the following COVID-19-related activities: outreach, engagement, and education; system navigation (i.e., linking people to testing and vaccination sites, isolation and quarantine housing, medical care, and other community and social resources); assistance with testing; case investigation; and contact tracing. As COVID-19 vaccines have become widely available, CBO partners have demonstrated great flexibility, pivoting alongside departments to facilitate access to vaccination for highly impacted populations. In total, more than \$17 million has been awarded to contracted CBOs who have demonstrated experience serving as trusted messengers and providing culturally and linguistically appropriate services in historically underserved communities.

In addition to contracting with dozens of CBOs to conduct the “on the ground” education and outreach components of the public education campaigns, both DPH and DHS procured services from communications firms that have directly supported activities conducted as part of the Equity Fund and other community-based initiatives, including the Community Health Worker Outreach Initiative (CHWOI). Since December 2020, DHS has worked with Fenton Communications while DPH has leveraged its work with Fraser Communications and Team Friday. These firms have met regularly to coordinate the development and dissemination of key messaging for current and upcoming phases of the pandemic (e.g., updates regarding community testing strategy, shifts to new tiers in the State’s Blueprint for a Safer Economy, updates on groups newly eligible for vaccination); review results of shared office hours with CBOs (described below) to refine messaging and materials so they address insights raised by contracted CBOs and other local partners (e.g., FBOs who facilitate access to COVID-19 testing or vaccination); and coordinate key messages and materials disseminated weekly to contracted partners.

As a result of these coordinated communications efforts, Equity Fund CBOs have been able to:

- **Access Culturally Responsive and Linguistically Appropriate Content:** Centrally locating community-focused information and materials (e.g., handouts, social media materials, toolkits) that equip CBOs/FBOs to serve as ambassadors to address misinformation and myths circulating among specific racial/ethnic groups, promote availability of services and supports, and share critical health messages that are based on research and community feedback.
- **Participate in Community Feedback Loops:** Developing processes to secure insights and guidance from CBOs on an ongoing basis. This work included:
 - Convening working group meetings with funded CBOs to gain community-level expertise into campaign direction, messaging, and tactics.
 - Participating in weekly open office hour meetings with CBOs for real-time feedback; since February 2021, COVID-19 Equity Fund CBOs have had the opportunity to participate in 20 optional group office hours; separate biweekly office hours are offered for CBOs funded to provide system navigation services.
 - Conducting surveys to gauge effectiveness and utility of support activities.
 - Participating in convenings to gather insights on the challenges and opportunities of serving as a County contractor.

- **Participate in Capacity Building Opportunities:** Providing group learning sessions and support for contracted partners to acquire, build upon, and apply skills that ensure their success during the pandemic and beyond. From December 2020 through May 2021, COVID-19 Equity Fund partners have participated in 33 trainings. Trainings have not only included a mandatory orientation, but also included sessions that directly responded to topics CBOs identified as part of a CBO Needs Assessment survey conducted in December 2020. Sessions have included the basics of COVID-19, system navigation (use of One Degree in Spanish), computer literacy, social media communications, leadership principles and practices, delegating and supporting staff during a crisis, self-care for leaders, and worker wellness. Some of these trainings have been provided by departmental subject matter experts, CP, and with CEO CSP support, through the Worker Education and Resource Center (WERC), a nonprofit organization that offers workforce development programs.

In addition, departments have also individually expanded upon these communications efforts to achieve department-specific priorities directly aimed at supporting communities disproportionately impacted by COVID-19, including communities of color and lower wage earners.

DMH – Mental Health Related Media Buys

As the pandemic's challenges persist into 2021, DMH's current media buy (January 2021 to June 2021) targets the ongoing and anticipated mental health and wellbeing needs across diverse communities. The buy is used to communicate DMH's mental health resources and messages of resilience, recovery, and hope during the pandemic and subsequent vaccination rollout period. Using hyperlocal and ethnic media opportunities, this responsive campaign is designed to reach all County residents, with an emphasis on the most vulnerable populations across all five Supervisorial Districts. These populations include adults 18+ and caregivers within the County; general, Hispanic, African American, and Asian markets; parents, family, and caretakers of children 0-15; transition-age youth 16-25, older adults 60+, including veterans; and the LGBTQ+ community.

Campaign collateral includes posters in WIC offices, displays and signage at supermarkets, digital billboards, Metro and bus lines (inside and outside), and radio and TV spots (with additional placements on web and/or social media), all of which are listed in **Appendix III**.

DHS – Communicating about Vaccines to Health Care Workers and Existing Patients at Higher Risk of Severe COVID-19 Outcomes

The County workforce mirrors the racial and ethnic diversity across the County. As a result, efforts to address COVID-19-related concerns and misinformation among County workforce members is a fruitful endeavor. DHS has worked hard to ensure staff awareness about the vaccine. Specifically, the DHS Vaccine Steering Committee has sent out e-mail announcements, designed and placed screensavers on employee computers, and created an internally facing SharePoint page with fact sheets, FAQs, videos, and more. The SharePoint page also includes clinic schedules and maps, and guidance on what to do after receiving the vaccine. DHS also held a Town Hall session for all staff and sent managers and supervisors talking points with key messages about vaccine safety and effectiveness. There have also been additional activities to reach segments of the workforce that interact with the public, including a training and Q&A session specifically for community health workers and COVID-19 vaccine education sessions for facility staff with lower rates of vaccine uptake. Staff participated from units throughout DHS, including environmental services, patient financial services, health information management, nursing, facilities management, and others. DHS has also made a concerted effort to vaccinate eligible patient populations.

More than 70 percent of the DHS patient population self-identifies as a people of color. Additionally, many patients live or work in lower income communities and/or also prefer communications in a language other than English. This demographic information highlighted the need for targeted messaging and approaches that leverage familiar sources of health care information (e.g., display boards at health care facilities, DHS website, patient portal, email, reminder postcards via mail, and SMS messages to their cell phone) to address population-specific needs and concerns regarding vaccination and related appointments. Tactics deployed to date include:

- Patients were reached through weekly emails, alerting them when it is their turn to sign up for the vaccine, answering their questions, and providing them with the resources they need to make an informed decision about the vaccine;
- 10,000+ postcards sent to patients 65 years and older, who may be less receptive to digital communications, informing them that it is their turn to get the vaccine. Postcards were printed in Spanish and English;
- 60 clinics displaying culturally responsive and linguistically appropriate digital slide boards in patient waiting rooms, with messaging on vaccine safety, efficacy, and how to keep themselves and their families safe. Messages are in Spanish, Chinese (Simplified), and Armenian;
- 300,000 patients reached through SMS messages and robocalls, alerting them to their turn to get the vaccine and how to make an appointment; and
- 225 posters printed for patient waiting rooms with information on how to sign up for the vaccine.

DHS is also sharing information about vaccinating workforce members and patients on Twitter and through media interviews. Future efforts will include DHS doctors and nurses serving as ambassadors to communicate the benefits of getting vaccinated and reinforcing vaccine safety and effectiveness in preventing serious illness, and even death, from COVID-19.

DPH – Availability of Vaccination Services

In a similar fashion, DPH has held bimonthly, remote all-staff meetings to communicate COVID-19 updates and initiatives. In addition, a weekly email communication known as the Director's Briefing, which includes the latest data, key messages, COVID-19 safety requirements, and other updates, is sent to all staff at the beginning of each week.

DPH has also held Virtual COVID-19 Vaccine Town Halls for the public on all social media platforms (Facebook, Instagram, Twitter, and YouTube). Each Town Hall provided simultaneous interpretation services, as well as opportunities for the public to ask questions before and during the event. Thousands of questions have been submitted, which in turn, have informed messaging used in materials and media briefings. Thousands of County residents participated in these Vaccine Town Halls that have covered topics related to COVID-19 vaccines, such as the Johnson & Johnson vaccine pause and vaccination among newly vaccine-eligible pre-teens and adolescents. All Town Halls are archived and available to watch on the DPH Twitter ([www.twitter.com/lapublichealth](https://twitter.com/lapublichealth)) and YouTube (<https://www.youtube.com/c/lapublichealth/videos>) accounts. Additional Town Halls were hosted by FBOs for their congregations and the communities they served. DPH has also hosted Instagram Live interviews with DPH subject matter experts, and participated in some hosted by social media influencers with connections to specific communities and sectors, including Latinx, restaurant, food, and agriculture audiences.

The breadth and deep impact of the pandemic has also garnered broad support for vaccination campaigns from local public figures from various industries (i.e., 20 leaders from different faith

groups, sports teams [Chargers, Dodgers, Lakers, Kings, LA Galaxy, and LA Football Club], music, acting, and more). These types of events and responsive content have appealed to various age groups and have helped make DPH the most followed health department in the country.

B. Partnership/Contracting with CBOs and Local Community Clinics

COVID-19 Community Equity Fund (Equity Fund)

As previously mentioned, the primary mechanism for ensuring completion of directives included in this Board motion is the COVID-19 Equity Fund. Contracts were fully executed (i.e., scopes of work and budgets have been finalized, subcontractor agreements and contract onboarding requirements, including insurance requirements, have been met) with 25 DHS-funded CBOs and 26 DPH-funded CBOs. Six of the eight CBOs funded through the partnership with the PHI have been executed and were fully completed by the end of May 2021. The fiscal intermediary, CP, has started the contract monitoring process with CBO partners.

CBO partners have been connecting with hard-to-reach populations regarding COVID-19 in a trusted, culturally responsive and linguistically appropriate manner through individual and group engagements in highly impacted communities/regions/neighborhoods across all Supervisorial Districts. Some preliminary results include the following:

Top Outreach Message and Social Service Connections Delivered:

- General COVID-19 information;
- Vaccination information;
- Testing navigation;
- Information about other social services;
- Other example categories: Info for free PPE for small businesses, mental health services, transportation information to and from vaccination sites, referrals to rental eviction support, Volunteer Income Tax Assistance program information, scheduling vaccination appointments, 2-1-1 LA County services; and
- Messaging and social service connections that were provided in over 13 languages.

Supplies Distributed During Individual Engagements:

- Masks: 40.1 percent of engagements
- Hand Sanitizer: 32.6 percent of engagements
- Food: 18.2 percent of engagements
- Essential Items (Food, toothbrushes, and feminine products): 12.5 percent of engagements
- Other items distributed at vaccine events included: Gift cards for food, face shields, disinfecting wipes, gloves, and water.

Between March 1, 2021 - April 30, 2021, DPH-funded organizations reached an estimated 125,008 people through in-person (n=464) and virtual (n=550) outreach events.

Type of In-Person Outreach	# of Outreach Events	Estimated # of People Reached
Event/Meeting	54	7890
Other	13	1833
Residential Door Drops	60	1220
Street Outreach	134	3644
Vaccine Outreach	20	876

Type of In-Person Outreach	# of Outreach Events	Estimated # of People Reached
Venue Visits (Business, Faith, Community)	183	4157
TOTAL	464	19,620

Type of Virtual Outreach	# of Outreach Events	Estimated # of People Reached
Email	30	53
Other	25	7571
Social Media	51	94,015
Phone	422	3198
Virtual Meeting/Presentation	22	514
Not Specified		37
TOTAL	550	105,388

Additionally, DHS and DPH continue to work with the CEO CSP to leverage philanthropic opportunities to support the CBOs throughout the funding period. Detailed funding streams from PHI, and the CEO CSP can be found later in this report.

In addition to Equity Fund activities, DHS and DPH have also implemented complementary activities that have worked to address the needs of highly impacted communities across the County.

Partnering with Faith-Based Organizations

In addition to working with the CBOs contracted as part of the COVID-19 Equity Fund, DHS and DPH have also partnered with FBOs who have deeply rooted, trusted relationships with many communities of color, including Black/African American, Latinx, and Asian American/Pacific Islander (AAPI) populations.

FBO partners, including, but not limited to, the African American Community Empowerment Council and LA VOICE, have worked closely with DHS to expand access to COVID-19 testing in their local communities. FBOs have served as testing sites, and promoted the availability, accessibility (i.e., kiosks, pop-up sites, at-home testing kits), and continued importance of COVID-19 testing. The partnership has mobilized and conducted outreach, and provided linkages to care and resources in 10 prioritized regions (Antelope Valley, Central Los Angeles, East Los Angeles, Harbor, Pomona Valley, San Fernando Valley, San Gabriel Valley, South Bay, South Los Angeles, and Southeast Los Angeles) in over 13 languages, including Indigenous dialects across every Supervisorial District.

DPH is also actively engaged with various FBOs to support local vaccination efforts concentrated in areas highly impacted by COVID-19, including South Los Angeles, East Los Angeles, and the Antelope Valley, where case rates are high and COVID-19 vaccination rates are relatively low. In South Los Angeles alone, over 140 churches have volunteered to participate in vaccination efforts. Other partners, including Charles R. Drew University of Medicine and Science (CDU), have directly supported DPH's collaboration with FBOs by coordinating their participation in DPH-led vaccination sites. Hundreds of FBOs have organized, oftentimes regionally, to support vaccine registration for their congregations and local community members, and sponsored educational events to address myths around COVID-19 and the vaccine. The love, care, and volunteer hours that partners have put into ensuring vaccine equity are substantial. They have worked tirelessly to organize lists of eligible congregants, train volunteers to make and receive

calls, particularly for those without access to technology, schedule vaccination appointments, and address transportation needs to and from appointments in some of the County's most impacted zip codes. With increased vaccine availability, DPH has also partnered with over 125 FBOs to bring mobile clinics to their sites. Since March 2021, 23,808 vaccine doses have been administered as a result of these efforts. These activities were the impetus behind the Grassroots Grants (micro-grants) to CBOs and FBOs described in the philanthropy/CEO CSP-related section below.

Community Health Worker Outreach Initiative (CHWOI) Outreach and Education

This initiative was implemented in response to the [May 26, 2020 Board motion](#) that instructed DPH and DMH to expand their Promotora/es programs, and coordinate and mobilize CHWs to conduct grassroots outreach to amplify up-to-date information regarding COVID-19.

As noted in previous reports, in October 2020, DPH contracted with the California Community Foundation (CCF) to serve as the Fiscal Lead Agency for the CHWOI, a program that mobilized a network of peer providers from within and outside of DPH, to provide education and outreach in communities greatly impacted by COVID-19. Agencies received assignments to work in more than 1,700 high priority census block groups across the County. CHWs prioritized the top 15 communities based on high or ongoing rates of COVID-19 spread. An interactive map of ongoing outreach can be accessed online here: <https://arcg.is/0L1njL0>.

Since the Coronavirus Aid, Relief, and Economic Security (CARES) Act's Coronavirus Relief Funding (CRF) for the CHWOI ended on March 31, 2021, DPH has been able to leverage federal Epidemiology and Laboratory Capacity (ELC) funds starting April 1, 2021, to continue outreach efforts through the end of the calendar year.

As of May 2021, CCF is no longer the CHWOI Fiscal Lead Agency; Community Health Councils now plays this pivotal role within the CHWOI. At least 10 of the 16 originally funded CHWOI CBOs will continue their work through ELC funds. Additionally, DPH is currently pursuing federal grant opportunities to supplement and expand the scope and reach of current CHW activities.

Promotores de Salud Mental/Health Promoters Program

Additionally, DMH Promoters have provided critical support for those being vaccinated at several community sites, including City of Bell, Maywood, Carson, and Huntington Park. By providing factual information and emotional support, DMH Promoters have reduced the anxiety and the myths surrounding the vaccine, which often act as barriers to successful vaccination. At these sites, Promoters have interacted with an average of 500-1,000 community members each day, depending on the vaccine capacity. The Promoters have canvassed the vaccine site neighborhoods to ensure maximum information, emotional support, and usage of available vaccines. With the emotional support provided in real time, the Promoters have gained the trust of the community, provided anxiety reduction support, and provided factual information and linkage to DMH and County resources.

Promotores de Salud Mental Program has also successfully provided over 700 workshops per month and had been expanding capacity to deliver services in other languages by hiring culturally and linguistically certified United Mental Health Promoters. The expanded program now has the capacity to deliver services not only in English and Spanish, but also in Korean and Chinese (Mandarin and Cantonese). This increased capacity comes at a critical time when the AAPI communities face an unprecedented rise in hate crimes and violent attacks. DMH's newly hired AAPI Promoters are trained and ready to provide linkages, education, and services to those affected by these attacks.

Speakers Bureau

April 2021 marks the first-year anniversary of DMH's Speakers Bureau (SB). This initiative was implemented in response to the COVID-19 pandemic and beyond. The SB functions as a specialized public communication, clinical, and community intervention resource comprised of approximately 75 highly skilled, licensed mental health clinicians with extensive media and public-speaking experience. The SB members are highly committed to serve the County communities during these challenging times and do so above and beyond the demands of their usual work responsibilities. The SB members have generously shared their cultural and linguistic expertise in creating content that meets community needs, such as COVID-19 and mental health concerns, public service announcements, presentations, trainings, and translated materials as tools to address stress, depression, grief and loss, and the uncertainties experienced by underserved communities.

A snapshot of SB accomplishments during its first year of operations include:

1. Provision of services to County Board offices; educational organizations; CBOs, FBOs, and nonprofit organizations; professional associations; private businesses; County DMH programs; and other governmental agencies;
2. SB services totaling 647 distinct activities, outreaching to 48,906 County residents across all Service Areas;
3. Ongoing mental health outreach and support to 33 FBOs, engaging 2,170 community members via 91 distinct activities;
4. Mental health support to 27 CBOs, serving 1,339 community members through 55 distinct activities;
5. Collaboration with 13 government agencies via 61 activities, outreaching to 3,389 individuals; and
6. Cultural and linguistic expertise for the development of several County DMH media campaign products, including billboards, Metro and bus line advertisements, and radio and TV spots.

Additionally, the SB's cultural and linguistic AAPI expertise has been a departmental asset to respond to requests related to the increased violence against AAPI communities. During this reporting period, the SB members have been collaborating closely with CBOs and AAPI community leaders to address mental health needs of AAPI communities directly impacted by violent attacks and hate crimes.

C. COVID-19 Testing

DHS continues to provide community testing throughout the County in partnership with cities, the State, and other private partners. As of June 13, 2021, a total of 6,900,714 COVID-19 tests were administered at State, County, and city-supported COVID-19 fixed community testing sites. Additionally, COVID-19 tests have been administered at State, County, and city-supported COVID-19 pop-up testing sites. More data on testing can be found at https://file.lacounty.gov/SDSInter/dhs/1077051_LACountyCOVID-19CommunityTestingDashboard.pdf. As of the end of May 2021, DHS and County testing partners operate 181 COVID-19 fixed and pop-up testing sites across the County, with capacity to perform more than 200,000 tests per week. All COVID-19 community testing sites are listed on the County website: <https://covid19.lacounty.gov/testing/>. Currently, testing demand is low, and as of May 23, 2021, only 12 percent of capacity is in use. Of tests administered at community testing sites, the largest proportion of tests have been in persons aged 18-49 (67 percent) and among Latinos/x (57 percent). The latest information regarding availability and use of testing sites, patient demographics for those who receive a COVID-19 test at a community site, test positivity rates, and testing among Persons Experiencing Homelessness is available on the

County COVID-19 Community Testing Dashboard, accessible here: <https://dhs.lacounty.gov/covid-19/>.

DHS is also currently operating 12 COVID-19 testing sites in some of the County's most impacted communities through an important partnership with the State, the African American Community Empowerment Council, LA VOICE, Color Genomics, and Black, Latinx, and Hawaiian Native/Pacific Islander churches.

With demand for COVID-19 testing continuing to decline, DHS will begin to reduce community testing capacity in the coming months. DHS will reduce capacity in a way that ensures most impacted communities continue to have ready access to COVID-19 testing. Individuals will also continue to have access to testing through their healthcare providers and select retail pharmacies. DHS will inform the public, local testing providers, and other key stakeholders of any site closures or reductions in hours of operation, prior to making any changes.

D. Availability of Personal Protective Equipment (PPE)

Since hospitals and other healthcare entities have seen marked improvements in the availability of N95 and procedural masks and gowns from their medical supply vendors, DHS's last PPE distribution was done on October 8, 2020. The Emergency Medical Services (EMS) Agency continues to fill individual healthcare facilities' requests for PPE on a case-by-case basis. The last available data on total PPE distributed by the EMS Agency from February 1, 2020 through April 25, 2021 is shown below:

Item	Quantity
Coveralls	7,498
Shoe Covers	63,080
Hand Sanitizers	162,997
Goggles/Face Shields	477,246
Gloves	5,853,040
Gowns	8,208,773
Masks (Procedure)	12,220,650
Masks (N95)	29,387,068
TOTAL NUMBER OF ITEMS	56,380,352

Between March 17, 2020 and April 30, 2021, DPH has distributed nearly 77.4 million pieces of PPE to assist over 4,500 external organizations, including long-term care facilities, adult residential care centers, assisted living, and homeless shelters. Of the total distributions, 7.7 million (approximately 10 percent) have been distributed to social service providers, including homeless shelters, domestic violence agencies, gang intervention outreach workers, substance use disorder centers, and other CBOs, comprising over 700 entities. Total PPE distribution by DPH from March 2020 through April 2021 is shown below:

Item	Quantity
Hand Sanitizers	720,000
Goggles/Face Shields	2,500,000
Gloves	32,000,000
Gowns	7,000,000
Masks (Procedure)	19,000,000
Masks (Cloth—Reusable)	180,000

Item	Quantity
Masks (N95)	16,000,000
TOTAL	77,400,000

DPH, DHS, and DMH also continue to work with key community-based partners to disseminate PPE and other supplies that facilitate infection control practices. In one month alone (March to April 2021), DMH's PPE distribution included over 1 million items to the community.

Item	Quantity
Surgical Masks	428,260
Cotton Face Coverings	1,955
Gloves	578,450
TOTAL	1,008,665

DPH and DHS have also conducted targeted outreach to CBOs through their existing networks and expanded outreach to provide PPE to additional social service providers, such as youth counseling services, African American Infant and Maternal Mortality groups, community health workers/promoters, and others serving and/or residing in highly impacted communities.

E. Linkages to Healthcare and Other Supportive Services

2-1-1 LA County

2-1-1 LA County (2-1-1) is a 24/7 multilingual resource that provides linkages to social services both over the phone and online. DPH continues to work closely with 2-1-1 to ensure callers receive the latest COVID-19-related information and resources in their preferred language.

During this reporting period, DPH worked with the Office of Emergency Management (OEM) to contract with 2-1-1 to help staff the DPH Vaccine Call Center. Staff were quickly hired and onboarded, and on January 20, 2021, 2-1-1 operators began answering calls received by the DPH Vaccine Call Center and helping callers make vaccine appointments. According to the latest available data, in April 2021, 2-1-1 hotline staff answered over 21,193 vaccine overflow calls and scheduled 9,562 vaccine appointments.

2-1-1 Vaccine Call Center Data:

Time Period	Contacts Handled	Vaccine Appointments Made
January 20-31, 2021	25,739	<i>Data unavailable</i>
February 1-28, 2021	73,717	6,742
March 1-28, 2021	65,185	15,137
April 1-28, 2021	21,193	9,562
TOTAL	185,834	31,441

Top 5 Languages for April 2021:

Language	Monthly Total
English	12,659
Spanish	7,479
Arabic	10
Mandarin	6
Korean	3

Top 5 Zip Codes for April 2021:

Zip Code	Total Calls
90000 (Los Angeles)	1,821
91331 (Pacoima)	397
90044 (Westmont, West Athens)	305
91342 (Sylmar)	299
91335 (Reseda)	266

Overall, 2-1-1 has been a reliable, agile partner in the pandemic response since early 2020. 2-1-1 has been critical in communicating information about COVID-19 testing, treatment, isolation and quarantine, and other mitigation strategies, including proper use of masks and effective social distancing.

Childcare Voucher Program

The Board and the City of Los Angeles (LA City) dedicated CRF dollars to provide childcare services (vouchers) for essential workers and low-income working parents during the COVID-19 pandemic. DPH's Office for the Advancement of Early Care and Education contracted with the Child Care Alliance of Los Angeles to coordinate the distribution of \$15 million for childcare vouchers. This allocation was estimated to serve approximately 5,000 low-income families and essential workers with three to four months of childcare for children birth through 12 years old, and up to age 18 for children with special needs. The County's robust system of 11 Alternative Payment agencies processed applications for vouchers, connected families to childcare, and distributed funding to childcare providers. The funding for childcare vouchers is currently exhausted, and services for families ended on February 28, 2021.

A total of 10,513 applications were received for the program; 8,014 were new applications and 2,499 were participants that had State vouchers. Through this program, a total of 9,459 children received childcare vouchers, of which 6,017 are from the County and 3,442 are from LA City. The County childcare vouchers served 823 infants, 896 toddlers, 1,867 preschool age children, and 2,431 school age children.

F. Contact Tracing

As of the latest available report analysis dated June 14, 2021, the total number of cases assigned to a case interviewer was 1,062,322. Of these assigned cases, 44.9 percent (n= 476,470) completed the case investigation interview; 234,183 close contacts were identified as a result; and 151,152 (64.5 percent) of the identified close contacts completed the contact interview.

The DPH Contact Tracing Dashboard will continue to be updated weekly and is available here: <http://publichealth.lacounty.gov/media/Coronavirus/data/contact-tracing.htm>.

G. Partnering with County Departments

Mental Health Services

DMH has been an active community partner during the COVID-19 pandemic. Since the beginning of the pandemic, DMH has collaborated with many County departments, such as the CEO, Department of Human Resources (DHR), DPH, DHS, Registrar-Recorder/County Clerk Office, and Parks and Recreation, by deploying staff to 17 efforts. The majority of these efforts were developed to assist cultural communities highly impacted by disparities in COVID-19-related health outcomes.

From March 2020 through April 2021, DMH deployed over 1,217 staff to assist with the COVID-19 pandemic. Below is a summary of DMH's COVID-19 Deployment Disaster Service Worker count from March 2020 and April 2021 (n=166).

Area of Deployment	Key Activities of Deployment Efforts and Number of Staff Deployed
Administration	<ul style="list-style-type: none">• Serve as part of the DMH administrative COVID-19 Disaster Team, designed to address the needs of vulnerable populations and coordinate all COVID-19-related administrative and deployment efforts.• Provide administrative support services at:<ul style="list-style-type: none">○ County-run vaccine Points of Distribution (48 staff)○ ~26 Project Roomkey sites (29 staff; admin and clinical)○ CEO Administrative office
Clinical Services (19 staff)	<ul style="list-style-type: none">• Serve as nurses at Harbor/UCLA Medical Center during the winter COVID-19 surge• Provide mental health services at:<ul style="list-style-type: none">○ ~26 Project Roomkey sites○ 28+ City shelters○ 5 Isolation and quarantine shelters
Disaster Service Workers	<ul style="list-style-type: none">• Support the DPH Incident Command Structure (2 staff)• Serve as Contact Tracers for DPH (3 staff)• Support Registrar-Recording/County Clerk Office at the November 2020 Election poll sites in underrepresented communities of color
Education and Outreach	<ul style="list-style-type: none">• Serve as Promotores de Salud (Health Promoters) at City shelter sites to provide mental health education to people experiencing homelessness and monolingual Spanish speakers
Language Services	<ul style="list-style-type: none">• Provide bilingual services to augment the language capacity and accessibility of DMH's directly operated programs• Provide bilingual services to expand the staffing for the Homeless Outreach Mobile Engagement Teams (10 staff)
Phone-Based Services	<ul style="list-style-type: none">• Provide bilingual services to expand the language capacity of the DMH Access Line• Staff DPH's Vaccine Call Center (1 staff)• Staff DMH's Emotional Warm Line (37 staff)• Staff DMH's Veteran Support Line (17 staff)

DMH's Help Line continues to provide 24/7 services via its general ACCESS functions, Emotional Support Line for COVID-19, Veterans Warm Line, and the Wellbeing Line for healthcare and first responders. During this reporting period, the Help Line call volume remained steady from previous months. For the entire Help Line, roughly 25 percent of the calls are in a language other

than English. The Veterans Support Line has continued to receive a greater number of calls each month as awareness of the line grows.

COVID-19 Safety Compliance Certificate Program

The COVID-19 Safety Compliance Certificate Program continues to be a vital tool for local businesses and community members to implement required Public Health COVID-19 Protocols (Protocols) (<http://publichealth.lacounty.gov/media/Coronavirus/>). Other County departments that have served critical functions as part of this program, such as mandating completion of the program for their office-based worksites, fielding questions from the public and communicating the program's availability to businesses and the general public, include DHR; Consumer and Business Affairs (DCBA); Workforce Development, Aging and Community Services; the CEO's OEM; and the JIC. CHWOI health promoters and local elected officials who want to support local businesses and worksites to ensure safer environments for their workers and clients have also promoted the program. The certification requires completing an online training that is available in English, Spanish, Arabic, Armenian, Chinese (Traditional and Simplified), Japanese, Khmer (Cambodian), Korean, Farsi, Russian, Vietnamese, Tagalog, and Thai, facilitating completion from diverse stakeholder groups. The breadth of languages is particularly beneficial to ensure that workers and vulnerable communities are provided with in-language resources regarding workplace protections that help slow the spread of COVID-19 and promote COVID-19 vaccination. DCBA also follows up with business owners and employees who request more information about supportive resources (e.g., financial assistance such as grants, loans, and capital) currently available to small businesses.

As of June 7, 2021, a total of 28,415 individuals have completed the program, including 13,303 employers (46.8 percent of participants) and 15,112 employees (53.2 percent of participants) representing various sectors that are now permitted to maintain operations with safety modifications to reduce the risk of COVID-19 spread. Sectors with the highest level of completion include:

- Office-Based Worksites: 23.7 percent (n=6,743)
- Restaurants, Breweries, and Wineries: 20 percent (n=5,283)
- Retail Businesses: 10.2 percent (n=2,924)
- Warehousing, Manufacturing, and Logistic Establishments: 8 percent (n=2,292)
- Music, Television and Film Production: 7.5 percent (n=2,130)
- Personal Care Establishments: 7 percent (n=2,064)

Nearly 70 percent of training participants reported that their employer gave them a copy of the Protocols (n=19,597). Additionally, nearly 87 percent of training participants (n=24,619) reported that the Protocols helped them understand COVID-19 safety guidelines at work.

COVID-19 Community Ambassador Program

DPH launched a voluntary COVID-19 Community Ambassador Program on January 12, 2021. While initially aimed at engaging all County staff to become active partners in implementing infection control practices, the program is now widely available to all who live and work in the County. To become a COVID-19 Community Ambassador, participants must view a 30-minute training video about COVID-19 prevention and infection control. Once the training is complete, participants are emailed a Certificate of Completion and may visit one of the designated DPH locations to pick up a branded COVID-19 Ambassador face covering, Ambassador pin, and COVID-19 Directory Card. Participants are also asked to complete an online activity log to report back on outreach efforts completed in the community. More information about the program is available here: <http://publichealth.lacounty.gov/CommunityAmbassadorProgram/>.

In addition to County employees, external stakeholders who have completed the training represent various entities, including Los Angeles Unified School District, Long Beach Unified School District, City of Pasadena, and El Camino College. County departments with the highest number of employees who completed the program include DPH (15 percent); DHS (14 percent); Public Social Services (13 percent); Probation (8.5 percent); and Children and Family Services (6 percent). County employees participating in the program most commonly self-reported the following demographic information:

- *Residence:* 19 percent reported living in the LA City;
- *Age:* Median age of participants is 45 years old;
- *Race/Ethnicity:* 39.3 percent reported being Hispanic or Latino; followed by Asian or Pacific Islander (21.7 percent), Black or African American (15.8 percent); and White or Caucasian (15.4 percent); and
- *Household size:* 23.1 percent of participants reported living with four or more people in their household.

As a result of most participants (83 percent) reporting interest in receiving additional updates about the COVID-19 response, COVID-19 Ambassadors now receive weekly emails that include key messages and materials. In addition, COVID-19 Ambassadors can now access monthly informational sessions with DPH subject matter experts to stay abreast of the latest COVID-19 developments. In the last two months, Ambassadors participated in sessions regarding COVID-19 vaccination and variants of the COVID-19 virus.

Coordinating Philanthropic Relationships with CEO CSP

DPH and DHS worked closely with CEO CSP to ensure coordination with local funders and a Statewide pooled fund (*Together Towards Health*) managed by the PHI. In response to the *Integrated Plan* that DHS and DPH completed in August 2020, with support from the Ballmer Group, the following funds were awarded to a variety of County-based CBOs, FBOs, and Federally Qualified Health Centers (FQHCs):

- **\$150,000** awarded for start-up funds to six CBOs who were the successful recipients of the LA COVID-19 Equity Fund: Asian Pacific Policy and Planning Council (A3PCON), Comunidades Indegenas en Liderazgo, Esperanza Community Housing Corporation, InnerCity Struggle, Southern California Pacific Islander COVID-19 Response Team, and Southern California Rehabilitation Services.
- **\$120,000** awarded to Worker Education and Resource Center (WERC) to develop training to support the onboarding of community workers by the CBOs awarded the LA COVID-19 Equity grants.
- **\$2,000,000** awarded to nine CBOs identified by DPH and DHS as critical to covering gaps in geography and/or special groups as the pandemic affected areas/groups that were not initially prioritized for the LA COVID-19 Equity Fund: A3PCON, Pilipino Workers Center of Los Angeles, Disability Community Resource Center, Tierra del Sol Foundation, Team Friday, Pukuu Cultural Community Services, Our Saviour Center, Foothill Unity Center, Inc, and the Community Action League.
- **\$600,000** awarded to FQHCs to support outreach and engagement of marginalized communities in accessing the COVID-19 vaccine, especially the community members that encountered barriers in making appointments via the internet due to language or technical issues: East Valley Community Health Center, John Wesley County Hospital Institute, Kedren Community Health Center, St. Johns, Northeast Valley Health Clinic, White Memorial Community Health Center, and Clinica Monsenor A. Romero.
- **\$300,000** awarded to Liberty Hill to re-grant Pilipino Workers Center and Los Angeles Alliance for New Economy to supplement the Los Angeles County Public Health Council's

project that serves low-wage workers disproportionately impacted by the COVID-19 pandemic.

- **\$157,000** awarded to CBOs and FBOs for assisting the California Office of Emergency Services with vaccine uptake: Alma Family Services, Centro de Vida Victoriosa, CDU, University of Medicine and Science, City of Bell, City of Paramount, Clinica Monsenor Romero, Community Coalition, Disability Community Resource Center, Faithful Central Bible Church, Los Angeles Urban League, New Hope Community Church, Our Lady of Talpa Church, Paradise Baptist Church, Restauracion Los Angeles/RLA Church, SEIU USWW, SELA Collaborative, Service Center for Independent Life, Southeast Rio Vista YMCA at Maywood, Via Care.
- **\$250,000** to be distributed through Grassroots Grants (micro-grants) to CBOs and FBOs working with DPH to facilitate COVID-19 vaccine uptake micro-targeted efforts in marginalized communities/groups who have barriers to vaccine access or low vaccine rates. In addition to funding from *Together Towards Health*, this program includes funding from the Annenberg Foundation and Specialty Family Foundation. Additional funding for this program may become available.

CEO CSP is continuing to work with DPH, DHS, and private philanthropy to support ongoing needs for vaccine equity.

H. COVID-19 Vaccination

As of June 17, 2021, more than 9,957,048 doses of COVID-19 vaccine have been administered to people across the County; of these, 4,336,893 were second doses. Since the last report, vaccine eligibility has expanded significantly and has become much more widely available. As of May 13, 2021, individuals age 12 and older are now eligible to receive a COVID-19 vaccine.

**Proportion of County Residents Who Have Received
At Least 1 Dose of COVID-19 Vaccine, by Age, as of June 13, 2021**

Age Group	# With At Least 1 Dose Vaccine	# of Residents In Age Group	% With At Least 1 Dose Vaccine
12-15 years old	154,835	502,674	30.8%
16-17 years old	123,098	253,131	48.6%
18-29 years old	950,767	1,786,223	53.2%
30-49 years old	1,815,372	2,910,509	62.4%
50-64 years old	1,423,685	2,002,016	71.1%
65-79 years old	914,823	1,017,286	89.9%
80+ years old	271,232	356,331	76.1%
Not Available	665	----	----
Total	5,654,477	8,828,170	64.1%

**Proportion of County Residents Who Have Received
At Least 1 Dose of COVID-19 Vaccine, by Race/Ethnicity,
as of June 13, 2021**

Race/Ethnicity	Age 16+ with 1+ Dose	% of 16+ Population Vaccinated	Age 65+ with 1+ Dose	% of 65+ Population Vaccinated
American Indian/Alaska Native	12,150	59.8%	2,498	66.8%
Asian	909,781	73.6%	205,276	79.2%
Black/African American	294,542	42.8%	80,757	65.4%
Latinx	1,961,008	51.3%	303,268	74.7%
White	1,508,953	63.9%	437,286	78.6%

And while huge strides have been made in closing the gaps in vaccination rates among racial/ethnic groups, vaccine uptake has started to wane.

**Cumulative Percent of Population 16-64 Years Old Who Have Received
At Least 1 Dose of Vaccine, by Week and by Race/Ethnicity**

Race/Ethnicity	2/9/21	5/2/21	Relative % Increase	5/16/21	Relative % Increase
American Indian/Alaska Native	28%	70%	153%	57%	22%
Asian	37%	76%	108%	67%	21%
Black/African American	20%	61%	206%	34%	26%
Latinx	26%	63%	160%	42%	34%
White	38%	78%	94%	57%	18%

DPH has worked arduously to eliminate the barriers that make it difficult for people who want to get vaccinated to access the vaccine. As an example, DPH has worked to enroll trusted vaccination partners (e.g., FQHCs and community clinics) into the State's vaccination program in order to increase availability of local community vaccination sites, particularly those that could offer evening and weekend hours. As of the last data available (May 22, 2021), there were 755 vaccination sites throughout the County. Sites ranged from County and city-administered sites, to retail pharmacies and hospital vaccination sites. Additional sites are also being added to better meet the unique needs of specific populations. DPH continues to support mobile vaccination units that take vaccines into neighborhoods to reach people who may have limited mobility or time to get to one of the established vaccination sites. As of the last data available (May 21, 2021), there were 188 mobile sites scheduled throughout the County. The mobile vaccine team continues working with partners, such as FBOs and CBOs, markets, stores, and Metro partners, to establish standing mobile vaccine sites at places that are central to disproportionately impacted communities. Further, there are a total of 62 school-based clinics across 43 school districts serving as vaccination sites where teens and their families can go and get vaccinated. Efforts are underway to work closely with other institutions that serve teens and their families during the summer, including parks, Boys and Girls Clubs, and the YMCA. Being able to vaccinate students,

their families, and community residents at schools is a very important strategy for reaching teens and for closing gaps in COVID-19 vaccination rates. Schools and health centers continue to work together to make this possible.

DPH makes the latest vaccine-related information available on the web, including vaccine priority groups, links to vaccination appointments, the latest vaccination rates by race/ethnicity and city/community, and other critical educational materials at: www.VaccinateLACounty.com and www.VacunateLosAngeles.com.

DHS Workforce

On December 18, 2020, DHS began vaccinating its workforce members at three of the four DHS hospitals. Efforts began with high-risk workforce members, including those who worked in emergency departments and intensive care units, before moving onto lower risk healthcare workers. DHS continues to schedule both first and second doses and has expanded the number of sites where workforce vaccinations are taking place. Information on DHS vaccination efforts can be found here: <http://file.lacounty.gov/SDSInter/bos/supdocs/158993.pdf>.

DHS Empaneled Patients

In response to the executive order by the County's Board Chair Hilda L. Solis and DPH opening up vaccines to those ages 65 and older, DHS began vaccinating its empaneled patients, patients in custody, and patients experiencing homelessness. Information on DHS vaccination efforts for empaneled patients can be found here: <http://file.lacounty.gov/SDSInter/bos/supdocs/158993.pdf>.

To continue these efforts, DHS Ambulatory Care Network (ACN) continues to support enhanced community access to COVID-19 vaccinations in balance with the ongoing responsibility to address the delayed care needs of DHS empaneled patients through the reactivation of outpatient care in a sustained and safe environment. Through 23 health centers, serving the most vulnerable populations in the County, ACN is already actively engaging and outreaching to over 300,000 DHS-empaneled patients. The ACN is now planning to expand vaccine access and support community vaccine events in their respective service areas. The ACN is pursuing three community vaccine strategies aimed to increase access to patients in underserved areas, leverage existing resources, and support local efforts:

- 1) **Expand vaccine access to the community**—Participating Health Center Groups (HCGs) will provide walk-in visits during currently available vaccine clinic sessions. This effort will primarily target family, friends, and neighbors that accompany DHS patients for their vaccine appointments. No person will be turned away.
- 2) **Staff support**—In partnership with local CBOs and sister departments, HCG clinical staff will vaccinate at local community events.
- 3) **Stand-alone MyTurn events**—Based on local and specific needs, some HCG sites will host MyTurn community events with community partners.

The County has far exceeded Statewide and Countywide averages in vaccinating communities of color and those in the geographic areas most impacted by the pandemic.

I. Lessons Learned/Recommendations

Responding to a global pandemic resulted in many challenges, as well as innovative successes in partnership with the community. The County, once the epicenter of COVID-19 for the nation during winter 2020, has experienced a remarkable turnaround. Our rates remain relatively low, among the lowest in the State, and we are currently holding steady in our progress through our recovery journey. The gap in between the overall COVID-19 test positivity rate for the County

and the one for the neighborhoods in the County with the fewest health affirming resources (known as the [Health Equity Quartile of the Healthy Places Index](#)) has closed. This success is due to the hard work of our dedicated County workforce and to the powerful work of our community-based partners.

The original intent of this report back was to coordinate and address the racial, ethnic, and income disparities magnified during the COVID-19 pandemic, as well as reduce the disparate impact of COVID-19 on communities of color. As we move forward together on our recovery journey, powerful lessons emerge. The lessons outlined below are already proving useful as they are informing work plans outlined in upcoming grant proposals and proposed philanthropic investments.

1) Partnership and trusting relationships with local organizations and community residents.

- Sustained Efforts: There is extreme value in having a longstanding presence in highly impacted communities. Efforts to sustain the gains made during this pandemic are critical to demonstrate the County's ongoing commitment to hardest hit community members. Trusting relationships with local partners and community residents have directly contributed to the County's success in vaccinating and testing high percentages of community members residing and working in areas most impacted by the pandemic. Only continuous engagement and investments in these communities will demonstrate the County's ongoing commitment to equity and eliminating health disparities.
- Site Selection for Community Testing Sites: Identifying hot spot communities and focusing expansion of community testing sites in highly impacted communities required partnership with clinics and other testing entities. This was key to making testing more accessible. In conducting site selection for some areas, it was imperative to know which areas were considered "safe" zones, free of gang activity, in order to encourage residents to participate in COVID-19 testing. For example, it took a couple of weeks to figure out why testing numbers were low at some locations, until residents provided feedback that some of the sites selected were not in the "safe" zones. In response, the DHS Community Testing Team worked with external LA City law enforcement, specifically the Gang Unit, to assist in identifying which areas were considered "safe" zones to set up sites. Additionally, having the Board offices involved in recommending potential sites, as well as assisting in marketing the sites to the residents, was extremely helpful. Finally, it was also critical that the team considered and provided various methodologies for testing that were tailored to neighborhoods and beneficial to communities, such as drive-throughs, walk-ups, and testing buses, kiosks, and vans.

2) Contracting with Community-Based Organizations (CBOs)

- Use of Existing Contracting Mechanisms
 - DPH and DHS leveraged DHS's Professional and Technical Services Master Agreement to contract with communications firms, and the DHS Supportive and/or Housing Services Master Agreement (SHSMA) to contract with CBOs, as directed in this Board motion. Using existing contracting infrastructure to develop the solicitation materials; communicate the funding opportunities; receive and rate applications; respond to appeals; and grant awards, all helped to expedite the process. In addition, both departments were able to learn from one another – as the subject matter experts – through these contracting mechanisms, and worked closely with each other to ensure all relevant requirements were being met. In addition, DPH was also able to recommend process improvements to these DHS

contracting mechanisms, and both departments worked together to troubleshoot issues and find innovative solutions alongside philanthropic and other partners.

- While the infrastructure related to existing contracting mechanisms facilitated some steps in the process to onboard partner CBOs, some other requirements linked to these mechanisms were rigid and very troublesome, particularly for smaller CBOs that had the local presence and expertise needed for this work.
 - SHSMA-related insurance requirements were very challenging to navigate for many CBOs. CBOs noted that the hardships they experienced included the expensive upfront cost for liability insurance. The SHSMA required higher liability coverage limits and, more notably, Unique Insurance Coverage for Sexual Misconduct at \$2 million. Since the liability insurance coverage is required prior to any service delivery, contracts and community-based work through the COVID-19 Equity Fund were delayed since some CBOs brought on by both DHS and DPH were unable to initially meet the high insurance liability coverage requirement.
 - Most CBOs were faced with paying for insurance costs over providing direct services to meet the contract requirements. Further aggravating the problem, CBOs' existing insurance providers would not provide additional coverage and CBOs were forced to find alternative options that took almost two weeks for some organizations to find. Some organizations had to pay an additional \$15,000-\$35,000 upfront to meet the County insurance requirements, making it difficult to identify a way to cover the costs before any funds were distributed to the organization. This additional investment disadvantaged smaller organizations in particular, since they ended up with higher upfront costs for a smaller contract amount.
 - Transparency in the estimated cost to implement the additional insurance requirements would be helpful to organizations who may decide not to pursue the funding opportunity based on their existing capacity.
 - CBO contractors were also limited in their ability to work in a coalition-based model because sub-subcontractors were also required to meet the same insurance requirements. Innovative partnerships with philanthropy through the CEO CSP helped address some of the challenges faced by funded CBOs.
 - Due to constraints meeting insurance requirements, service delivery was delayed by one to three months for some CBOs. To support CBOs in meeting the liability coverage requirements, CP worked one-on-one with CBOs. Challenges were addressed in two ways: 1) making amendments to the CBO subcontractor scope of work; and 2) partnering with philanthropy to assist with the upfront cost of additional insurance coverage required by contracted CBOs.
 - The challenges faced by participating CBOs required exploring the purpose behind the various requirements. Individual departments have some flexibility to develop and revise contract requirements to ensure compliance with Countywide requirements and alignment with the service being delivered and other specific needs, such as location and recipient(s) of service delivery (site, virtual or in-person, individual or family). Revisiting contracting requirements mandated by individual departments for specific services would be helpful to determine what insurance and other contracting requirements are non-negotiable and to tailor requirements to the specialized services being delivered in specific environment(s).

- The SHSMA contracting process also allowed DHS to quickly mobilize a mini-grant infrastructure to allocate small amounts of funds for small scale and short-term periods of work. Mini-grant funding allows for quicker turnaround times and has a more meaningful impact on a broader range of CBOs. DHS has been able to support up to 200 CBOs with small amounts of funding for outreach and engagement.
- Use of a Fiscal Intermediary (FI) to Oversee COVID-19 Equity Fund's CBO Contracts
 - Contracting and related monitoring is difficult, especially when the lead entities (DHS and DPH) are responsible for developing and implementing key elements of emergency response during a global pandemic. To ensure both fiscal and programmatic contract requirements were met, and that contracted CBOs received needed support, DHS and DPH contracted with CP to serve as the FI for the COVID-19 Equity Fund. CP has been an incredible partner, serving as an intermediary hub for all administrative matters related to personnel, programming, communication, and finances, and with sufficient expertise and capacity to directly support all 59 CBO partners.
 - Working with a FI contractor facilitated faster distribution of funds to CBOs, allowing money to flow more quickly to local communities than what is possible under a standard County contracting agreement. In addition, CP's existing network of partners allowed for a broader reach during CBO recruitment and hiring. Ultimately, by working through systems and relationships used by CP, DHS, and DPH, the COVID-19 Equity Fund was able to contract with a diverse range of CBOs of different sizes and varying organizational capacity.

3) COVID-19 Communication and Feedback Loops

- Joint Information Center (JIC): Support from the JIC has been critical to both coalesce and amplify COVID-19-related information across the County. The JIC is a temporary emergency response structure aimed at coordinating COVID-19 messaging and resources on behalf of County departments. While initial plans aimed to dismantle the JIC earlier in the COVID-19 response, JIC leaders have graciously supported pandemic response communications through today. The JIC has participated in development meetings with each department, managed a Countywide website, and facilitated requests for support, including videography and photography, for each department. This type of infrastructure is key and points to the need for robust and coordinated communications infrastructure within departments and across the County.
- Ongoing Feedback Loops: Best practices to implement ongoing feedback loops as part of some efforts have had positive results. For example, Team Friday began office hours with partners contracted through the CHWOI to gain insights about misinformation and emerging issues directly experienced by CHWs working with County residents. These forums have also allowed CBOs to ask questions, get programmatic and financial support, and network with other CBOs in an informal setting. DHS and DPH carried on those office hours with COVID-19 Equity Fund partners and have also found ways to further expand on this model of receiving and addressing community feedback. For example, DHS established three CBO working groups (Campaign Strategy, Messaging/Creative, and Website Workgroup) to inform the direction, identify strategies, and provide support for the Together Fighting COVID-19 campaign.

4) Funding Infrastructure for Contractors:

- Payment Structures: A deliverable-based payment structure helps support small and medium-sized organizations that typically cannot afford the upfront costs associated with a cost-reimbursement model contract. This payment structure also facilitates a more streamlined onboarding process when contracting with many entities since pre-determined payment for a set of deliverables reduces the amount of budget adjustments that may be needed across multiple entities. Cost-reimbursement models of payment require CBOs to collect and track more robust, yet more onerous amounts of documentation to justify their expenditures and facilitate reporting back to funders. Overall, a deliverable-based payment structure is less frequently used by County-issued contracts. Efforts to balance payment structures and appropriate documentation are needed to facilitate CBO reporting and auditing from the County and FI perspective. However, flexible opportunities are needed to build the organizational capacity of small to medium-sized CBOs for them to compete for other County contracts in the future.
- Flexible Funding: CBOs expressed the need for flexible funding, often not allowable using federal dollars, to help provide additional support for County residents. DHS and DPH worked to clearly articulate allowable expenses and also worked with CEO CSP to determine where additional supports may be needed. The flexible funding option allowed CBOs to leverage their budgets to allow individuals, families, and clients access to basic emergency needs to prepare for COVID-19 testing, participate in COVID-19 testing, and ensure resources to manage a positive test result. Flexible funding allowed CBOs to use the funds to cover utilities, food, gift cards for engagement, citation support, resources to adapt a home for isolation, relocation assistance, and wellness and healing resources.
- Collaboration with the CEO CSP: As noted throughout this report, the CEO CSP has been a wonderfully responsive partner, facilitating philanthropic investments in solutions and innovative programming to directly support the COVID-19 Equity Fund and each department's participation in the pandemic response. Partnering with the CEO CSP has facilitated the uplifting and addressing of needs raised by CBOs that are directly in service of communities disproportionately impacted by COVID-19. Additionally, CEO CSP's Statewide partnerships have also provided a forum for elevating community-centered best practices occurring across the County.

5) Emergency Planning and Coordination

- Coordination Across County Departments: The overall response to the COVID-19 pandemic also highlighted the importance of internal coordination. Working across County departments have allowed COVID-19 Equity Fund partners to access and promote services provided by departments outside of DMH, DHS, and DPH. In addition, departments have been able to leverage one another's resources (e.g., media buys) and relationships (e.g., CBOs, FBOs, local community influencers) to connect with hard-to-reach communities across the County.
- Emergency Medical Services (EMS): From a DHS EMS perspective, there are three areas of demonstrated value to provide effective and efficient services and support to County residents:
 - The Medical Health Operational Area Coordinator program in communication, preparation, response, and coordination to ensure the needs of the hospitals and provider agencies are met;
 - Disaster planning and drills; and
 - Established, accurate data systems and management.

APPENDIX I

Examples of Public Education Campaigns Developed and Implemented by DHS, DMH, DPH, Often in Collaboration with the Joint Information Center (JIC) and Other County and External Partners

Campaign Type and Name	Brief Description
<i>Campaigns to Promote Awareness of Mental Health Services</i>	
Mental Health Matters	This campaign promoted awareness and use of the DMH 24/7 Help Line.
Resources. Help. Hope.	This campaign promoted awareness and use of the DMH 24/7 Help Line, COVID-19 resources website, and the free Headspace subscription service for County residents.
DMH Wellbeing Line	This campaign promoted awareness and use of the DMH Wellbeing Line to provide support for County Disaster Workers and First Responders.
We Rise	This campaign commemorated Mental Health month by promoting wellbeing and healing through art, connection, community engagement, and creative expression. Specifically, the campaign recognized art is needed now more than ever as the County emerges from the isolation of the global pandemic and continues to grapple with related stressors and racial injustice.
<i>Campaigns to Support Adherence to Protective Measures</i>	
Safer at Home	This campaign stressed the importance of staying home as much as possible to prevent getting and spreading COVID-19.
Whether at Home or in Public, Don't Let Your Guard Down	This campaign highlighted necessary measures to prevent getting and spreading COVID-19 (wearing masks, physical distancing, hand washing, and disinfecting surfaces).
Connect to Protect	This campaign stressed the importance of connecting virtually with loved ones and friends to keep everyone safe.
Keeping Safe During the Holidays	This campaign promoted staying home and connecting virtually during the winter holidays.
The Risk is Real	This campaign highlighted the severity of COVID-19, highlighting experiences of actual DHS patients.
Every 10 Minutes	At one point in the pandemic, every ten minutes, one person died from COVID-19 in the County. Over New Year's Eve, this campaign highlighted both fictional and non-fictional accounts of persons who passed away due to COVID-19 in ten-minute intervals.
Together Fighting COVID-19	This campaign encouraged community members to get tested when needed and to get vaccinated.
It's Not Enough	This campaign provided information to County residents about who is eligible to get vaccinated, how to get an appointment, as well as vaccine safety information.
<i>Campaigns to Support Vaccination</i>	
Vaccinate LA County	This campaign encouraged community members to get vaccinated and described how to access and schedule vaccination appointments.

Campaign Type and Name	Brief Description
Now Vaccinating	This campaign highlighted groups newly eligible to receive the COVID-19 vaccine.
Community Immunity	This campaign stressed the importance of vaccination as a way to achieve more widespread community-level protection against COVID-19.
Flex Your Defense Against COVID-19	This campaign encouraged community members to share their story about why they chose to get vaccinated by highlighting personal accounts from actual patients receiving their vaccine at a County-run vaccination clinic.
Don't Wait to Vaccinate	This campaign encouraged community members to get vaccinated as they become eligible for vaccination.
DHS Patient and Workforce Vaccination	This campaign encouraged members of the DHS workforce and patient population to get vaccinated by highlighting personal accounts from actual DHS staff and patients.

In addition to each department's respective websites, much of the campaign collateral in various languages is available on these web-based platforms: <https://toolkit.covidhelpfla.org/> (CBO Toolkit, administered by DHS) and <https://thesocialpresskit.com/countyofla> (County Social Media Toolkit, administered by the JIC).

APPENDIX II

List of (58) Community-Based Organizations Funded to Participate in the COVID-19 Community Equity Fund

CP: Community Partners

DHS: Department of Health Services

DPH: Department of Public Health

PHI: Public Health Institute, Together Towards Health Initiative

Organization Name	Lead Department	Fiscal Lead Agency
1) African Communities Public Health Coalition	DHS	CP
2) Alma Family Services	DPH	CP
3) Anti-Recidivism Coalition	DPH	CP
4) Armenian Relief Society of Western USA, Social Services	DHS	CP
5) Asian Pacific Policy & Planning Council (AP3CON)	DPH	CP/PHI
6) California Association of African-American Superintendents and Administrators	DHS	CP
7) California Black Women's Health Project	DHS	CP
8) California Healthy Nail Salon Collaborative	DHS	CP
9) California Native Vote Project, a project of Community Partners	DHS	CP
10) Center for Living and Learning	DHS	CP
11) Central City Neighborhood Partners	DHS	CP
12) Chinatown Service Center	DPH	CP
13) CIELO comunidades Indígenas en Liderazgo	DPH	CP
14) Clergy and Laity United for Economic Justice	DHS	CP
15) Coalition for Humane Immigrant Rights	DPH	CP
16) Community Coalition	DPH	CP
17) Community Development Technologies Center	DHS	CP
18) Dignity Health – Northridge Hospital Foundation	DPH	CP
19) Disability Community Resource Center	DPH	CP/PHI
20) East Yard Communities for Environmental Justice	DHS	CP
21) Esperanza Community Housing Corporation	DPH	CP
22) Foothill Unity Center, Inc.	DHS	CP/PHI
23) Gender Justice LA	DHS	CP
24) Good Seed Community Development Corporation	DHS	CP
25) Herald Christian Health Center	DPH	CP
26) InnerCity Struggle	DPH	CP
27) International Institute of Los Angeles	DPH	CP
28) Kheir Clinic	DPH	CP
29) Khmer Girls in Action	DHS	CP
30) Los Angeles Brotherhood Crusade	DPH	CP
31) Los Angeles Metropolitan Churches	DHS	CP
32) Little Tokyo Service Center - Community Development Corporation	DPH	CP
33) Maternal and Child Health Access	DPH	CP
34) Northeast Valley Health Corporation	DPH	CP

Organization Name	Lead Department	Fiscal Lead Agency
35) Our Saviour Center	DHS	CP/PHI
36) Pacoima Beautiful	DHS	CP
37) Pilipino Workers Center of Southern California	DPH	CP/PHI
38) Planned Parenthood	DPH	CP
39) Pomona Economic Opportunity Center, Inc.	DHS	CP
40) Proyecto Pastoral	DHS	CP
41) Pukuu Cultural Community Services	DHS	CP/PHI
42) QueensCare Health Centers	DPH	CP
43) SAAHAS For Cause	DHS	CP
44) Southern California Pacific Islander COVID-19 Response Team	DPH	CP
45) Southern California Rehabilitation Services, Inc.	DPH	CP
46) St. John's Well Child & Family Center	DPH	CP
47) Strengths Based Community Change	DHS	CP
48) The Community Action League	DHS	CP/PHI
49) The G.R.E.E.N (Gathering Resources to Educate and Empower through Network) Foundation	DHS	CP
50) The TransLatin@ Coalition	DHS	CP
51) The Wall Las Memorias Project	DHS	CP
52) Tierra del Sol Foundation	DPH	CP/PHI
53) Urban Peace Institute	DHS	CP
54) Valley Care Community Consortium	DPH	CP
55) Vision y Compromiso	DPH	CP
56) Watts Labor Community Action Committee	DPH	CP
57) Whittier Area First Day Coalition	DHS	CP
58) Young Invincibles	DPH	CP

APPENDIX III

Department of Mental Health Media Buys

Time Period: February-April 2021

Total Amount: \$1,248,000

CATEGORY AND IMPRESSIONS	LANGUAGE	CHANNEL	DEMOGRAPHICS
Television 18,448,009	English	NBC-TV, KABC-TV	30% Hispanic 20% Asian 22% African American 28% Others
	Spanish	KMEX-TV, KFTR, KVEA-TV	82% Hispanic 3% Asian 1% African American 14% Others
Out of Home 1,380,143,063	English, Spanish, Mandarin	Digital Billboards, Bus Interior Cards, Rail Interior and Exterior	50% General Market (All Ethnic Groups) 50% Hispanic
		Full Bus Backs, Bus Tails, Strategic Shelters, Digital Rail Station Kiosks	100% General Market (All Ethnic Groups)
		Static Building Wall	100% General Market (All Ethnic Groups)
		1-Sheet Posters, 30-Sheet Posters	60% Hispanic 30% General Market (All Ethnic Groups) and African American 10% Asian
		Digital Geo-Fencing and Digital Mobile Billboard	40% General Market (All Ethnic Groups) 25% Hispanic 15% African American 10% Asian 10% Others
Radio 82,304,624	English	KPWR-FM, KDAY-FM, KLOS-FM, KJLH-FM, KAMP-FM, KTWV-FM, KRTH-FM, iHeart streaming (KISS-FM, REAL 92.3, KFI-AM, AM 570, KOST-FM, ALT 98.7)	58% Hispanic 10% Asian 17% African American 15% Others
	Spanish	KLVE-FM, KSCA-FM, KXOL-FM	88% Hispanic 1% Asian 1.5% African American 9.5% Others
	Mandarin	KWRM-FM	97% Asian 3% Others

CATEGORY AND IMPRESSIONS	LANGUAGE	CHANNEL	DEMOGRAPHICS
	Korean	AM1540 Radio Korea, The Korean Daily	97% Asian 3% Others
	Persian and Armenian	KIRN-FM, 95.5 FM HD SoCal Armenian	97% Persian/Armenian 3% Others
	Vietnamese	Saigon Radio	97% Asian 3% Others
Print 3,841,692	English	Los Angeles Times, Los Angeles Sentinel	37% General Market 30% Hispanic 18% African American 8% Asian 7% Others
	Spanish	La Opinion Newspaper	89% Hispanic 11% Others
	Mandarin	ICITI News and WeChat	96% Asian 4% Others
WIC Offices 2,500,000	English and Spanish	Posters	14% African American 1% American Indian 7% Asian/Filipino/Pacific Islander 42% Hispanic 28% General Market 1% Multiracial 7% Others
Social Media 1,792,520	English	Facebook and Instagram	General Market