



MEMORANDUM

TO: Mayor and Council Members

FROM: Stephanie Hayden, Director 

DATE: August 28, 2020

SUBJECT: MMAC Staff Update - Addressing COVID-19 disparities in the Hispanic/Latinx populations - Austin Public Health

This memorandum provides an update on the City’s efforts to date in addressing the COVID-19 disparities in Hispanic/Latinx populations. You may recall that during the onset of this pandemic, Austin Public Health (APH) established a Social Services Branch. The work of the Social Services Branch focuses on addressing the needs of all priority populations with a focus on equity. This branch assists community members with any unmet needs during this pandemic.

In addition to the education, testing and outreach efforts by Austin Public Health, a strike team developed a draft strategic plan to address disparities in the Latinx Community. That plan was sent out to the public for comments and recommendations. The survey provided a high-level overview of each strategy from the strategic plan and action items.

Survey Analysis

The results of this survey were analyzed by the Planning and Evaluation Unit of Austin Public Health. Qualitative data analysis was done through an internal review of emerging themes with manual coding for open response questions. Also, a chart was created to capture Community Based Organizations working on each strategy based on survey responses.

Results

A total of 225 surveys responses were collected (220 English and 5 Spanish). The English Survey had a completion rate of 62% with typical time spent 6 minutes 33 second and the Spanish survey had a 20% completion rate with a typical time of 2 minutes and 33 seconds spent. On average, most participants (77%) indicated that the four strategic areas were important. 59% indicated the strategies were “Very Important” and 18% marked the strategies as “Important” for all strategic areas. Only 14% of all responses marked the strategies as “Very Unimportant,” with the “Outreach, Prevention, and Communication” strategic area being the least popular with 16.67% marked as “Very Unimportant”. The survey also included several open-ended questions to ascertain if any additions or revisions should be made for the strategic area or action plan. Chart 1 shows the response rate per strategic area and the order of the questions as presented to participants. By the end of the survey the average response rate had dropped by almost 45%, possibly indicating research fatigue. Additionally, for the final question per strategic area,



‘Should any revisions be considered,’ many participants responded, “see above,” possibly indicating a duplication in questioning.

Report Highlights

The report is a culmination of efforts that began in March at the start of the pandemic. Unfortunately, the quick and rushed nature of emergency response does not always allow the time for the deep reflection necessary to fully represent the efforts of all individuals, partners, organizations, etc., involved in the difficult but necessary work required to ensure that Austinites emerge as safely as possible from this pandemic. Staff would like to reassert that safety of the community is at the heart of this work. While the bulk of the information presented represents city staff efforts, community partners working alongside City of Austin as part of the Emergency Operations Center have been and continue to be critical to the success of the work. We see the disparities among the Hispanic/Latinx community, and we resolve to build on what has been accomplished with community partners’ feedback, support, and partnership.

Ultimately the health of our residents in Austin is our number one priority. We would like to thank the Latino Coalition for their feedback to the strategic plan as well as strategies that have been implemented. We will continue to refine our efforts and work very closely with the community. We want to reach the folks that need our help the most. That will ultimately make our entire City and County stronger.

Should you have any questions or need additional information, please do not hesitate to reach out to me directly at Stephanie.Hayden@austintexas.gov or 512-972-5010.

Cc: Spencer Cronk, City Manager
Nuria Rivera-Vandermyde, Deputy City Manager
Chris Shorter, Assistant City Manager

ADDRESSING COVID-19 DISPARITIES ACTION PLAN

August 28, 2020

Background

Priority Populations, a former taskforce within the Social Services Branch of the Emergence Operations Center (EOC) initially drafted an Outreach Action Plan in June 2020. Concurrently, City staff met with Latinx community partners to review a list of recommendations and expectations provided to the Mayor and City Manager. In response to feedback from Mayor and Council, as well as our Hispanic/Latinx community, staff have worked on substantial updates to the initial plan: a team of City staff presented a draft of the plan to our partners UT/Dell Med and CommUnity Care for initial feedback and review and since then, community partners have had the opportunity to review the document and provide additional feedback and edits which have been incorporated into this Action Plan.

Staff have met with leaders from several organizations serving the Hispanic/Latinx community to request continued support for response and planning efforts. These partners have been brought in as community members of the recently formed Hispanic/Latinx Strike Team, housed under the Social Services Branch.

Outline

APH Hispanic/Latinx Strike Team has adopted a focus on four strategic areas:

Goal 1: Outreach, Prevention, and Communication

Goal 2: Testing and Contact Tracing

Goal 3: Access to Quality Clinical Resources

Goal 4: Economic and Employment Support

For each of these areas, goals and actionable strategies have been adopted and the Strike Team staff will continue the work alongside community partners to realize them. Community members have been brought on to the Strike Team and will meet at regular intervals to gather feedback and discuss action items. The Action Plan is detailed below along with progress to date on the strategies.

Staff

- Connie H. Gonzales, APH – Lead
- Maren Lujan, APH – Co-Lead
- Stephanie T. Trevino, APH – Health Equity Taskforce Co-Lead
- Marion Sanchez, COA Community Engagement Manager - is serving as the staff liaison for the Latinx community.
- Rocio Villalobos, COA Equity Office - Immigration Services
- Teresa Yrizarry, Travis County HHS
- JIS/PIO: The Joint Information System (JIS) team marketing plan includes focused efforts to reach the Hispanic/Latinx community. The plan seeks to leverage Spanish speaking TV, Radio, print media, and social media, along with in-person outreach and localized distribution of printed materials.

Goal 1: Outreach, Prevention, and Communication

APH has identified the provision of local targeted messaging from trusted community partners, like Austin Latino Coalition (ALC), as a top priority for the Latinx community. APH and community groups challenge us to have a laser focus on the channels through which the Latinx community receives and shares information. The messaging should be consistent, as to reinforce information in multiple ways. *NOTE: The Strike Force recognizes that many community and City efforts are underway in the areas of outreach, prevention, and communication. The strategies below intend to amplify the reach of those efforts – and suggest new ones – to ensure that needed information reaches everyone in the Latinx community.*

Principles

- (1) Support and enable work already happening in this space.
- (2) Must be in Spanish.
- (3) Must be easily understandable.
- (4) Should be culturally relevant.
- (5) Should generate trust and feelings of safety.
- (6) Should provide access to resources.

Goal 1: Obj. 1: Enhance current messaging

Goal 1: Outreach, Prevention, and Communication
Objective 1: Continue to enhance current messaging to reach and engage the Hispanic/Latinx community.
<p>1.1.1 Enable greater coordination between the APH Health Equity Unit, City of Austin Equity Office, and the Public Information Office to ensure appropriately tailored communications.</p> <ul style="list-style-type: none">• Hispanic/Latinx Strike Team has been developed. It includes staff from APH’s Health Equity Unity, COA Equity Office, JIS, plus Travis County HHS, in collaboration with community partners.• Holding weekly Community Meetings with community partners to discuss actionable items.

Goal 1: Outreach, Prevention, and Communication

Objective 1: Continue to enhance current messaging to reach and engage the Hispanic/Latinx community.

1.1.2 Find and refine currently available messaging (in Austin and beyond) with input from community partners.

- June 13 “Latinx Community Forum: Together Against COVID” Facebook Live event, the first City of Austin hosted event conducted in Spanish. The event allowed Austin’s Spanish speaking community to engage with health and community leaders across the City and County to receive information about COVID-19, community resources, as well as share concerns. Initial analytics indicate an overall positive response to the event, reaching over 50,000 and generating 847 interactions.
- APH executed a contract with PODER to conduct community engagement activities in the Montopolis area.
- JIS Publicized: LatinXcellence & Black Excellence “Mask On” Campaign developed by community partners: LatinXcellence.org; BlackExcellenceATX.org
- City of Austin COVID-19 website is translated in Spanish and contains Spanish translations of downloadable resources.
- JIS shared Spanish PSAs highlighting essential prevention methods and available resources.
- In partnership with the Education and Community Preparedness cabinet, APH sent informational mailers in English and Spanish to about 50,000 households in the Eastern Crescent.
- Flyers and Social Media images can be found at <https://www.austintexas.gov/page/printed-materials-and-required-signage>
 - Most materials have been translated into Spanish, as well as Vietnamese, Simplified Chinese, Traditional Chinese, Urdu, Burmese, Arabic, and Korean.

Goal 1: Outreach, Prevention, and Communication

Objective 1: Continue to enhance current messaging to reach and engage the Hispanic/Latinx community.

1.1.3 Reinforce messaging on testing – to reduce stigma and fear, and encourage everyone to take the assessment, especially those with chronic conditions, those working outside the home, those with limited English proficiency.

- Multiple flyers, social media posts, newsletters, audio & video PSAs, signage & education on how & why to enroll for testing.
- Created guidance for those living in close quarters, flyers, social media posts, audio & visual PSAs.
- Created guidance & flyers for those with chronic health conditions or at high risk of severe complications.
- Translation of all print material into Spanish and our other seven most commonly spoken languages (Vietnamese, Simplified Chinese, Traditional Chinese, Urdu, Burmese, Arabic, and Korean).
- PSAs both English and Spanish.
- JIS created & shared a video all about wearing masks in English & Spanish.
- APH launched a public enrollment form in March 2020 to reduce the stigma for testing.
- Current messaging: APH offers in-home testing and free testing through its community partners. APH encourages people with insurance to find alternative testing to ensure free testing is available for vulnerable populations.

1.1.4 Map all testing sites, including mobile sites to encourage testing. Include a “Find Nearest Test Site” feature to direct individuals and families to most convenient sites. Include operating hours, long term schedule, and anticipated wait time.

- COA Map of all testing sites was launched as of July 14, 2020:
<http://www.austintexas.gov/news/austin-public-health-launches-map-public-private-covid-19-testing-locations>
- Map site: <https://arcg.is/PzPza>
- Expansive outreach via media channels (print, broadcast, social).
- Neighborhood level community engagement- Made lists of all businesses, churches, multi-family dwellings, apt complexes, health clinics, etc., and distributed flyers to them, also had them posted in front of said locations.
- Two different mailers to all residents within the highest affected zip codes and those within a mile radius of all neighborhood testing sites.
- *Next Steps: underway*
 - *Additional promotion to introduce community members to the map and assist leaders and peer educators with navigation techniques.*
 - *Accessibility of testing: request the addition of the names of testing sites as well as filtering capacity between public/private testing sites.*

Goal 1: Outreach, Prevention, and Communication

Objective 1: Continue to enhance current messaging to reach and engage the Hispanic/Latinx community.

1.1.5 Target testing sites to specific zip codes, culturally relevant locations like churches, and to specific professions/occupations.

- See Goal 2: Objective 1
- APH Pop-up Testing Sites have targeted churches, specific neighborhoods like Dove Springs, Pflugerville, Colony Park and Del Valle, specific zip codes, as well as clusters at nursing homes and construction sites.
- Current walk-up sites are in Dove Springs, Givens Recreation Center and Rundberg Communities.

1.1.6 Clear, bilingual, culturally sensitive instructions on all elements of quarantine: childcare, food, rent, space, multi-generational homes, pregnancy, chronic disease, symptom monitoring, hygiene, school, etc. to be shared throughout COA and Travis County.

- COA's website provides information and updates on Covid-19; resources are informed by the CDC and cover a variety of topics and needs. <https://www.austintexas.gov/covid19>
 - Childcare & School: <https://www.austintexas.gov/department/covid-19-information/you-and-your-family>
 - Food & Rent: <https://www.austintexas.gov/department/covid-19-information/covid-19-resources>
 - Symptom Monitoring: <https://www.austintexas.gov/department/covid-19-information/symptoms-testing-and-care>
 - Multi-Generational Households: New Flyer for Households living in Close Quarters available under Print Materials site (linked below).
- Flyers and Social Media images can be found at <https://www.austintexas.gov/page/printed-materials-and-required-signage>
 - Most have been translated into Spanish, as well as Vietnamese, Simplified Chinese, Traditional Chinese, Urdu, Burmese, Arabic, and Korean.
- EOC Language Access Team works on translating materials into a variety of languages; English and Spanish are priority languages, but other common language needs include Vietnamese, Simplified Chinese, and Arabic.

1.1.7 Enhanced communication in Spanish for resources for those individuals experiencing domestic violence to address increases in rates of abuse due to quarantine measures.

- No current information on resources or progress specific to domestic violence support.
- Integral Care's Help Line and services address trauma, including trauma due to domestic violence.

1.1.8 Employers should provide their employees with information as to how to protect themselves in the workplace.

- See 4.3.1

Goal 1: Obj. 2: Expand breadth of CHWs

Goal 1: Outreach, Prevention, and Communication	
Objective 2: Expand breadth and reach of Community Health Workers/Instructors (CHW/I) Increase funding support for the APH Health Equity Unit to expand the employment, training, and reach of community health workers and other trusted entities. To do this:	
1.2.1	Provide free training to Community Health Workers, Austin/Travis County EMS Community Health Paramedics, community organizations, and the public on contact tracing, COVID-19 testing guidelines, and other crucial areas of practice. <ul style="list-style-type: none">• COVID-19 Training for CHWs through UT School of Nursing - A 90-minute training titled “Supporting Mental Health During COVID-19” was conducted via Zoom on June 16.<ul style="list-style-type: none">○ Sixty-four individuals completed the course evaluation.• APH received DSHS-approval to provide 1.5 CEUs on 7/24/20 to train <i>Promotores</i>, CHWs, and instructors of CHWs. This training is being translated into Spanish with plans for it to be delivered in September 2020.• Currently pursuing a contract with UT School of Nursing for additional CHW trainings, with a focus on COVID-19 trainings.• Accomplishment: CHW Training Pilot completed March 2020<ul style="list-style-type: none">○ Topics included: Trauma Informed Care, Immunizations, Mental Health Crisis Management and Motivational Interviewing.○ Trainings were successful and have been asked to be repeated.
1.2.2	Offer CHW/I trainings in multiple languages and Spanish in particular <ul style="list-style-type: none">• APH CHWs used in person interpreters for all language access needs.
1.2.3	Support ongoing efforts to establish a Community Health Worker Network <ul style="list-style-type: none">• 5 County Region Survey sent out to CHWs living/working in the following counties: Bastrop, Caldwell, Hays, Travis and Williamson to gain knowledge of areas they have been working on during COVID19 and the interest in starting a CHW network in Central, TX.• Proposals for establishing a formal “CHW Network” was created and sent to APH Assistant Director Adrienne Sturup on 7/18/2020.• Accomplishments: APH collaborated with the following CHW/I partners to review proposal. They met over 6 weeks to ensure the work was reflective of CHWs in the area.<ul style="list-style-type: none">○ Central Health- Medical Management○ Community Care Health Centers○ Dell Medical School- Population Health Division of Community Engagement and Health Equity○ Department of State Health Services- Chronic Disease○ People’s Community Clinic- Health Promotion and Community Advocacy

Goal 1: Outreach, Prevention, and Communication

Objective 2: Expand breadth and reach of Community Health Workers/Instructors (CHW/I) Increase funding support for the APH Health Equity Unit to expand the employment, training, and reach of community health workers and other trusted entities. To do this:

- 1.2.4 Offer permanent employment opportunities to Community Health Workers/I (CHW/I) with job descriptions that reflect the work being done in the community.
- Hiring Freeze with the City of Austin and most available response positions are temporary
 - COA currently creating a formal job description for a Community Health Workers
 - Central Health, in collaboration with the Latino Healthcare Forum, has successfully hired five CHWs to assist with contact tracing work.
 - Central Health Medical Management Division is looking to expand their Health Management Liaisons who are also CHWs.
 - Dell Medical School has successfully hired 2 CHWs and in the process of hiring two more CHWs.
 - COVID-19 messaging is regularly distributed among the broader CHW network to ensure appropriate and uniform messaging.
 - People's Community Clinic is currently working on establishing their community health worker program and have recently hired more CHWs.

*See "Testing and Contact Tracing" section for additional recommended CHW contributions.

Goal 1: Obj. 3: Provide alternate messaging methods

Goal 1: Outreach, Prevention, and Communication

Objective 3: Provide alternative messaging methods; consider the following:

- **Low technology literacy**
- **Low technology access**
- **Limited availability due to work**
- **Targeted media**
- **Low Literacy**

1.3.1 Allow for self-assessment and enrollment in testing, and receipt of results via phone:

- COA Website offers self-assessment: <https://www.austintexas.gov/covid19>.
- APH Nursing Hotline is available for those needing testing without access to the internet/computers: 512-972-5560. When calling the Hotline press 1 for English, 2 for Spanish, 3 for Vietnamese and other languages. Hotline hours are Mon.-Fri. 8 am-6 pm and Sat. 9am-1pm. One out of the four employees is a Spanish speaker.
- 4/7 Application Hotline employees are Spanish speakers.
- Individuals receive results based on the method they signed-up for testing, via email or phone for phone appointments and walk-ins.

1.3.2. Provide access to FREE testing (including asymptomatic individuals) for front line workers and people living in zip codes with a high concentration of Latino residents and/or high concentration of confirmed COVID-19 cases

- Free testing is available from the following providers: APH, Ascension Health, Austin Regional Clinic, Baylor Scott & White Health, CommUnity Care, Lone Star Circle of Care, St. David's Hospital, UT Dell Medical.
- Qualifications to obtain testing vary based on CDC recommendations. Still, APH has been able to expand and open testing to all during high-risk moments like the Austin-wide protests and currently during low testing output.

1.3.3. Create mobile-site messaging and testing focusing on identified clusters and potential areas of high risk (homeless shelters, public housing, construction sites, priority zip codes based on concentrated poverty).

- See 2.1.3
- In addition to static sites, APH has held several pop-up testing, including Del Valle (2 weeks), Sacred Heart Catholic Church (2 one day events), at construction sites (3 events), and sites targeting homeless populations.
- In-home testing began in March by EMS; APH is now continuing in-home testing for individuals with mobility issues or lack of access to transportation. In-home testing has recently increased from 6.28 tests per day to 12 tests per day due to increased promotion.

Goal 1: Outreach, Prevention, and Communication

Objective 3: Provide alternative messaging methods; consider the following:

- Low technology literacy
- Low technology access
- Limited availability due to work
- Targeted media
- Low Literacy

1.3.4 Stagger messaging and testing to accommodate working people (e.g., lunch hour, after 6 pm). For those with nonstandard hours of work, offer late night or late morning messaging and opportunities for testing.

- According to Testing Map: 4/15 free testing sites are open on weekends; 7/15 sites offer at least one weekday open after 5 pm and 7/19 after 6 pm; 5/15 sites open before 8 am.

1.3.5 Provide hotline in Spanish that is answered within 3 min. of calling. Sufficient resources will be necessary to ensure the successful operation of this line.

- APH Nursing Hotline provides service in Spanish and other languages.

1.3.6 Provide resource materials to work sites.

- Designed flyers, in-person outreach, media campaigns targeting the construction industry, worked with community partners to support messaging to this industry.
- Created standard letters to support workers needing to obtain paid sick leave (English and Spanish):
<http://www.austintexas.gov/sites/default/files/files/Employee%20FFCRA%20Notice%20Letter.pdf>
- Online Resources for Businesses during COVID: <https://www.austintexas.gov/department/covid-19-information/businesses-and-industries>.
- Online Resources for Small and Minority-Owned Businesses:
<https://www.austintexas.gov/department/small-and-minority-business-resources-0>

Goal 1: Obj. 4: Provide resources need to quarantine

Goal 1: Outreach, Prevention, and Communication

Objective 4: Provide resources needed to quarantine if exposed or self-isolate, regardless of documentation.

1.4.1 Provide paid leave, during the isolation period, for front line workers who test positive for COVID-19 (Tap into Response Funding Framework)

- See Goal 4: Economic and Employment Support
- Economic Recovery Team currently in discussions with Workers Defense Project to contract \$2 million of funding in support of workers.

Goal 1: Outreach, Prevention, and Communication

Objective 4: Provide resources needed to quarantine if exposed or self-isolate, regardless of documentation.

1.4.2 Prioritize City Social Services funding for individuals that have tested positive and express financial need to ensure they are able to isolate and continue to support their families.

- See Goal 4: Economic and Employment Support
- Economic Recovery Team currently in discussions with the Workers Defense Project to contract \$2 million of funding in support of workers.

1.4.3 Do not tie assistance to immigration status and/or other paperwork that would disincentivize/delay enrollment.

- City-level assistance regardless of immigration status (i.e., RISE Funding, RENT & RENT 2.0, Central Texas Food Bank, Travis County Rental/Mortgage Assistance, Austin Energy Bill Help, COA Neighborhood Centers Rent/Mortgage Assistance and Curbside Food Pantries, Family Eldercare fan program, etc.)
 - 80% of the clients receiving RISE funding identify as Hispanic
- Provision of cloth masks, hand sanitizer, and other Personal Protective Equipment (PPE) to Go Austin Vamos Austin (GAVA), Austin Voices, and other agencies serving the Hispanic/Latinx community.
- Current language on the FAQ states you can use your QR code or phone for testing.
- Hispanic/Latinx Strike Team has organized six upcoming PPE distribution events in collaboration with community partners to ensure all residents have access to masks, and hand sanitizer.

1.4.4 Impose penalties on landlords who violate CARES Act Guidelines.

- *Next Steps:*
 - *Internal City of Austin meeting with Neighborhood Housing to discuss their current process.*
 - *Staff must discuss have a City-level discussion with City Management.*

Goal 1: Outreach, Prevention, and Communication

Objective 4: Provide resources needed to quarantine if exposed or self-isolate, regardless of documentation.

1.4.5 Provide access to isolation facilities, with support staff that speak Spanish.

- Isolation Facility opened on March 24, 2020
 - 08/24 count is 29 total guests: approximately 220 rooms available.
 - There have been 381 Hispanic/Latinx guests out of a total of 914 individuals served.
 - About 15% (137) of guests were predominantly Spanish speakers.
 - Qualifications: Person Under Monitoring (PUM), Person Under Investigation (PUI), or COVID positive who cannot safely isolate at another location, (e.g., individual fears staying home due to high-risk family members).
 - Support at discharge: Integral Care and COA Guest Navigation Staff reach out to each person. Persons Experiencing Homelessness (PEH) are referred to the Bed Management team for placement either at the ProLodge or another shelter. PEH who refuse all are provided a cell phone and a tent. Staff work with caseworkers related to the guests onsite.
- 18% of homeless individuals staying in ProLodges identify as Hispanic/Latino.

Goal 1: Obj. 5: Evaluate outreach efforts

Goal 1: Outreach, Prevention, and Communication

Objective 5: Evaluate outreach efforts and continuously improve them.

1.5.1 Bolster research on messaging for Latinx communities in Austin.

- Latinx Covid-19 Survey requesting feedback on this Action Plan shared broadly with community partners; 225 responses received, and the final report presented by APH.

1.5.2 Collect and share with community partners anonymous demographic data on age, gender, employment, nativity, language, race/ethnicity, sexual preference).

- COA Dashboard shares aggregate age, gender, and ethnicity, but does not include employment, language, sexual preference.

Goal 2: Testing and Contact Tracing

How do we assure that all symptomatic people and contacts can be tested quickly and without fear? The success of testing is directly related to lowering the prevalence of COVID-19 in this population.

Principles

- (1) Testing should be accessible without a car/using public transportation.
- (2) Testing should be free.
- (3) Results should be available within three days.
- (4) Individuals should be able to protect their friends, family, co-workers if they are COVID +.

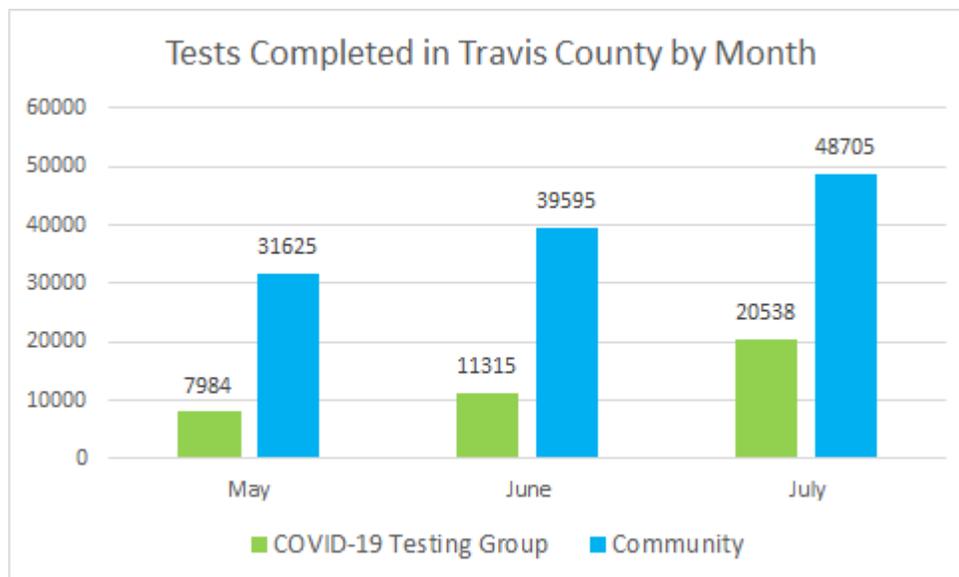
Goal 2: Obj. 1: Focused, safe testing

Goal 2: Testing and Contact Tracing

Objective 1: Focused, safe testing

2.1.1 Continue to support APH static, walk-up testing sites located in target areas.

- See 1.3.2
- Testing Sites:
 - 7211 N IH 35, Austin, TX 78752 (contracted out)
 - Little Walnut Creek Library: M, F, SA 9 am – 1 pm TH 3 pm-7 pm; 835 Rundberg Ln, Austin TX 78758 (3 Spanish speakers)
 - South East Library: M, F, SA 9 am – 1 pm TH 3 pm-7 pm; 5803 Nuckols Crossing Rd, Austin TX 78744 (2 Spanish speakers)
 - Givens Rec Center: M, F, SA 9 am – 1 pm TH 3 pm-7 pm; 3811 E 12th St. Austin TX, 78721 (2 Spanish speakers)
 - The Pfield Monday: Saturday 8 am-12 pm; 1440 W Pecan St, Pflugerville, TX 78660 (contracted out)
 - Community Testing Sites – 18 Support Staff (across three sites) - 6 Spanish Speakers
 - Sites were strategically selected based on high positivity rate and social vulnerability index; many sites serve Hispanic/Latinx and immigrant communities.
- Community Partners, including APH, have surpassed monthly testing goals; testing goals for the rest of the year are 60,000 per month: <https://mailchi.mp/austintexas.gov/austin-travis-county-surpasses-covid-19-testing-goals-for-may-july?e=8bdf09a30e>



*COVID Testing Group refers to APH/COA coordination; community tests refer to CommUnityCare/People's Community Clinics/Regional Hospitals/Private Physicians efforts.

Goal 2: Testing and Contact Tracing

Objective 1: Focused, safe testing

(2.1.1 continued)

- APH static testing sites offer free testing, with walk-up testing available as of 7/15. Testing sites are categorized as “Drive-Thru,” “Neighborhood,” or “Home.” Other testing options include a pop-up testing site at Pflugerville, information on CommUnity Care’s testing sites, and Private testing.
- CommUnity Care manages five different testing sites, which are all free to uninsured populations, no appointment is necessary, and walk-ups are accepted.
- Pflugerville testing site: Pflugerville Testing Sites: run in partnership with APH and TDEM and a contractor. If factored in, weekly capacity increases from 6,922 to 8,722 tests.

2.1.2 Complement static testing sites with mobile, walk-up sites with hours tailored to community need (e.g., at churches)

- See 1.3.3
- Pop-up Sites: two events were held at Sacred Heart Catholic Church (1 day event) and one event at Del Valle Middle School (2 weeks).
- Mobile Team: Beginning in March, APH partnered with EMS, but has now employed contractor “I’m Aware Pulse”; Facilities Team perform testing at facilities if a cluster is identified. Pop-up testing is also available based on need; sites include nursing homes (100+) and construction sites (3).
- In-home testing is available via the APH Nursing Hotline
 - Previous two nurses were Spanish Speakers, but the current two do not speak Spanish; the team is seeking to hire a third bilingual worker. The team calls 311 or Nursing Hotline for interpreters.
 - August averaged 6.38 tests per day, with a recent increase to 12 tests per day due to increased promotion.

2.1.3 Publish widely these testing sites (CUC has made their sites publicly available)

- See 1.3.3
- COA Map offers information on all testing sites
- The testing sites are communicated in method most accessible to Hispanic/Latinx community members.

2.1.4 Resources need to be dedicated to a media campaign with paid spots on Spanish outlets.

- Temporary PIO Alejandro Gamez has been hired explicitly to address disparities among the Hispanic/Latinx community and is managing contracts with several Spanish-serving media outlets.
- Univisión town hall focused on working safely at construction sites.
- JIS facilitated simulcasting media availabilities and press conferences in Spanish on ATXN3 or including a Spanish-speaking health professional in media events as well as Interviews with Spanish-speaking physicians.

Goal 2: Testing and Contact Tracing

Objective 1: Focused, safe testing

2.1.5 Establish transparent, data-informed daily testing goals alongside actual testing achieved.

- For sites that use Salesforce (APH, Ascension Health, Austin Regional Clinic, Baylor Scott & White Health, CommUnity Care, Lone Star Circle of Care, St. David's Hospital, UT Dell Medical): Since 4/24 to 8/25 average 355 tests per day.
 - May – 136 average per day
 - June – 461 average per day
 - July – 706 average per day
 - Aug – 353 average per day
- The average since we started testing in March is 250 a week. The average includes low numbers of 35 a day at the start of the pandemic to hundreds of tests per week during the peak.
- Sites that use Salesforce (see 2.3.2) current testing capacity is 6,922 tests per week.

2.1.6 Eliminate ID requirements for testing.

- State/Federal ID is NOT required for testing.
- According to the website requirements.
- Promotional testing and explicitly address undocumented populations' access to testing and reframe/rename "ID" requirements.

Goal 2: Obj. 2: Scale Testing

Goal 2: Testing and Contact Tracing

Objective 2: Scale testing and reduce test result turnaround time.

2.2.1 Source lab vendors who can meet the testing demands

- APH is using one lab right now. AIT - www.healthtrackrx.com
 - In the process of integrating two additional labs (CPL - <https://www.cpllabs.com/> and Dascena - <https://www.dascena.com/covid-19>) - these should be other labs in the next few weeks.
- Turnaround time for APH test results has significantly decreased, and the current lab has a 48-hour turn around for processing samples.

2.2.2 Mandate prioritization of testing: those from highest priority groups get high priority turnaround time.

- APH Testing is currently available to all but varies based on accessibility and CDC guidance; when testing is restricted it is to prioritize high-risk groups (i.e., close contacts and symptomatic individuals)

Goal 2: Testing and Contact Tracing

Objective 2: Scale testing and reduce test result turnaround time.

2.2.3 Expand rapid POC SARS-CoV-2 testing as able.

- APH is currently researching the feasibility of rapid-testing measures; constraints include ensuring lab access for rapid tests.

2.2.4 Consider using a pooled testing strategy (where one test is done on pooled blood within a work unit or family) if testing resources continue to be limited.

- Austin did not reach community spread levels requiring pooled testing strategy; testing has been increasingly accessible.

Goal 2: Obj. 3: Contact Tracing Platform

Goal 2: Testing and Contact Tracing

Objective 3: Adopt a common contact tracing platform.

2.3.1 Adopt an effective contact tracing method.

- Contact Tracing Methodology has varied based on the number of cases and staff capacity.
- Current strategy: Case Investigators also function as Contact Tracers.
 - Case investigators call and talk with the COVID patients to learn about the symptoms experienced, underlying medical conditions, and whether the individual was hospitalized. They additionally ask about travel taken, congregate settings visited, and close contacts during their incubation period and infectious period.
 - The investigator provides education to the patient about self-isolation and the need for close contacts to quarantine. On some occasions, the investigator may refer the patient to an isolation facility. The investigator also provides information on quarantining and testing of household members. The investigator also assists in educating the patient about COVID and provides information on resources (i.e., food pantry, rental assistance, etc.)
- Case investigation is conducted in collaboration with community partners:
 - Epi Case Investigation Team: APH has 41 Temporary/ 9 Permanent/1 volunteer (51 Total); 19 Spanish speakers; 4 new hires for August 31 (all Spanish speakers); volunteer speaks Spanish as well.
 - Community Care has hired five COVID case investigators. These five staff interview COVID cases seen at Community Care health centers. All five investigators speak Spanish.
 - Second, Dell Medical School, the University of Texas at Austin, staff perform COVID case investigations for those cases affiliated with the University of Texas. Approximately 15 university staff perform case investigations and contact tracing (# of Spanish Speakers unknown)

2.3.2 Make sure all cases and contact tracing data are efficiently populated into one database for ease of tracking/measurement of equity.

- 3/19/20 APH started using SharePoint to track tests for COVID19 = 1,211 total tests
- 4/24/20 APH started using Salesforce to track tests for COVID19 = to date 40,000 tests
- Around 5/8/20, APH started to collect “partner” testing data = to date 166,545 tests
- This data lives in Microsoft Azure platform.
- Current partners: Ascension Health, Austin Regional Clinic, Baylor Scott & White Health, CommUnity Care, Lone Star Circle of Care, St. David’s Hospital, UT Dell Medical.
- Salesforce database is accessible to partners for ease of tracking and monitoring cases.

Goal 2: Obj. 4: Reach 70% of cases and contacts

Goal 2: Testing and Contact Tracing	
Objective 4: Reach 70% of cases and their contacts.	
2.4.1	<p>Provide front line workers information and training on CDC decontamination guidelines and safety guidelines.</p> <ul style="list-style-type: none">• APH is currently working with Central Health and CommUnity Care on messaging and best practices.
2.4.2	<p>Provide contact tracing in Spanish through collaboration with a non-governmental agency (eliminate language and cultural barriers; build trust)</p> <ul style="list-style-type: none">• See 2.3.1• Community Care has hired five COVID case investigators. These five staff interview COVID cases seen at Community Care health centers. All five investigators speak Spanish. CUC intentionally worked with organizations to hire contact tracers from culturally and linguistically competent groups to provide education about quarantine and isolation in patients' preferred language and to connect them to community resources.• Second, Dell Medical School, the University of Texas at Austin, staff perform COVID case investigations for those cases affiliated with the University of Texas. Approximately 15 university staff perform case investigations and contact tracing (# of Spanish Speakers unknown).
2.4.3	<p>Hire and train community health workers to serve in a contact tracing capacity, as they are a trusted resource. (See "Outreach, Prevention, and Communication" section for more strategies related to Community Health Workers.)</p> <ul style="list-style-type: none">• See Goal 1: Objective 2

Goal 3: Access to Quality Clinical Resources

Increase access to information about how to care for oneself, what to expect, when to seek care, and where to go for care in the community if not hospitalized and after hospitalization, without regard for ability to pay.

Principles

- (1) Equitable and timely access to clinical COVID-19-specific advice and services.
- (2) Avenue for timely access to in-person/telemedicine evaluation if getting worse/need care.
- (3) Timely primary care follow-up after discharge from the hospital.
- (4) Access to primary care for chronic disease management and immunizations to reduce individual COVID-19 Risk.
- (5) Timely access to culturally and linguistically accessible mental health resources.

Goal 3: Obj.1: Timely access to medical and mental healthcare

Goal 3: Access to Quality Clinical Resources	
Objective 1: Timely access to medical and mental health care for patients with COVID-19, those most vulnerable to COVID-19, and/or those who are most likely to develop anxiety/depression as a result of COVID-19-related financial and social stresses.	
3.1.1	<p>Provide clinician-staffed, extended-hours, multi-lingual with an emphasis on Spanish speakers, telemedicine resource for COVID-19 +patients; patients should be able to get advice without waiting longer than 5 min. on the line. Sufficient resources will be necessary to ensure the successful operation of this line.</p> <ul style="list-style-type: none">• Integral Care provides mental health services: 139 employees receive a bilingual stipend agency-wide (this means they have taken a test and been certified as bilingual in a language other than English). The majority of these are Spanish speaking. Our services are offered in the top 15 languages through interpreter service when a bilingual staff member is not available.• Integral Care’s Help Line connects Spanish-speakers with interpreters in 23.54 seconds. (See 3.1.5)• 80% of Integral Care services are being provided via telehealth. Face to face visits are available as needed, including Psychiatric Emergency Services, outpatient clinical services, medication-assisted treatment, and crisis residential. They have provided tablets, phones, and data plans to hundreds of clients during COVID.• Integral Care’s unduplicated clients served between March 1 and July 31 (16,417 total), of that 5.03% were Spanish speaking or 826 clients.
3.1.2	<p>Continue to support bilingual clinic for COVID+ patients. (CUC operates such a clinic seven days/week already).</p> <ul style="list-style-type: none">• Clinical service providers to ensure that clinical services provided are bilingual (Spanish) and culturally appropriate and address COVID+ patients’ needs.

Goal 3: Access to Quality Clinical Resources

Objective 1: Timely access to medical and mental health care for patients with COVID-19, those most vulnerable to COVID-19, and/or those who are most likely to develop anxiety/depression as a result of COVID-19-related financial and social stresses.

3.1.3 Expand and integrate insurance-eligibility assessment capacity for the un- and under insured.

- Integral Care serves individuals regardless of ability to pay and offer a sliding fee scale in addition to accepting insurance.
- Integral Care offers a wide range of services to adults and children based on their diagnosis, rather than insurance status:
 - Crisis care: via phone, in person, telehealth, crisis respite/residential, mobile response, connection to ongoing services.
 - Community-based mental health and substance use services including outpatient clinical care and in-home supports.
 - Medication support for mental illness.
 - Medication-assisted treatment for opioid use disorder.
 - School-based counseling for children and families as well as services through our outpatient clinic.
 - Homelessness outreach, housing, and rehabilitation.

3.1.4 Mental Health Hotline in Spanish available a minimum of 12 hours a day.

- Integral Care’s Helpline operates 24 hours/day, seven days/week: 512-472-HELP (4357).
- Integral Care offers services on the helpline in 15 different languages, including Spanish.
- January 1, 2020, through July 30, 2020: Individuals calling the helpline are connected with a Spanish speaking interpreter in 23.54 seconds. As of 8/23, there have been a total of 11 CCP referrals that noted the caller as Spanish speaking. CCP is a COVID specific emergency resource through the state of Texas.

Language	Calls	Minutes	Avg. Search time
SPANISH	1873	18501	23.54

3.1.5 Prioritization of initial primary care visit for Latinx patients at risk for hypertension, diabetes, and other chronic diseases.

- *Next Steps: Convene clinical service providers to ensure that clinical services address preventative care and chronic diseases aggravated by Covid-19.*

Goal 3: Access to Quality Clinical Resources

Objective 1: Timely access to medical and mental health care for patients with COVID-19, those most vulnerable to COVID-19, and/or those who are most likely to develop anxiety/depression as a result of COVID-19-related financial and social stresses.

3.1.6 Prioritize access to care and medication for those individuals with chronic conditions that make them more susceptible to severe and fatal manifestations of COVID-19.

- *Next Steps: Convene clinical service providers to ensure that clinical services address preventative care and chronic diseases aggravated by Covid-19.*

3.1.7 Flu and pneumococcal immunizations clinics for adults in context of COVID complications (4 weeks).

- Started strategy to integrate Flu Vaccination efforts with COVID-19 testing to support COVID-19 safe approaches (e.g., school-based campaigns). Ensure that all approaches are in Spanish and are culturally appropriate.

3.1.8 Immunization clinics and bilingual outreach for families with young children – given decreased access due to COVID.

- Started strategy to integrate Flu Vaccination efforts with COVID-19 testing to support COVID-19 safe approaches (e.g., school-based campaigns). Ensure that all approaches are in Spanish and are culturally appropriate.

3.1.9 Advocate for parity of reimbursement based on services provided rather than the type of visit (e.g., telephone, video, in-person).

- *Next Steps: Convene clinical service providers to discuss needs and ways to improve access for patients.*

Goal 3: Obj. 2: Timely access to linguistically appropriate care.

Goal 3: Access to Quality Clinical Resources

Objective 2: Ensure timely access to linguistically appropriate care.

When needed, provide care via certified interpreter. Additional guidance:

3.2.1 In emergency settings, certified interpreter services must be available within 1 minute.

3.2.2 In palliative care scenarios, certified interpreter services must be made available within 5 minutes.

3.2.3 In-person interpretation services are preferred whenever possible, as tele-delivery is not always reliable or of high quality.

- *(Above) Next Steps: Convene clinical service providers and emergency response partners to discuss needs and ways to improve bilingual/interpretation access for patients.*

Goal 3: Obj. 3: Access to Primary Care Services

Goal 3: Access to Quality Clinical Resources

Objective 3: Access to primary care services following hospital discharge

3.3.1 Ensure that COVID-19 positive patients can access a primary care appointment within 5 days of hospital discharge. Such appointments should be arranged, confirmed, and communicated to patients before discharge.

- *Next Steps: Convene clinical service providers to discuss primary care for discharged Covid-19 patients. Potential Partners: CommUnityCare; Central Health; El Buen Samaritano; People's Community Clinic; Lone Star Circle of Care; other Hospital Partners*

Goal 4: Economic and Employment Support

Austin/Travis County must ensure the economic security of workers impacted by COVID-19. In addition, employers must be held accountable for protecting their workers and supporting them if they become sick, particularly if they serve essential functions (e.g., health care, grocery stores, etc.).

Principles

- (1) Employees –including contractors and the self-employed – are vital to the health of our community and must be protected.
- (2) Employers are accountable for their employees’ safety and well-being.
- (3) Employers must provide the working conditions and resources for employees to protect themselves and others from COVID-19.
- (4) Workers should receive economic support if they have to quarantine/self-isolate.
- (5) Businesses/employers should understand how this helps them, as well.
- (6) Self-employed workers must be supported in similar ways as those working for employers.

Goal 4: Obj. 1: Address the economic needs of those impacted by Covid-19

Goal 4: Economic and Employment Support	
Objective 1: Address the economic needs of those who either need to quarantine due to exposure; self-isolate because they test positive for COVID-19; cannot work because of a pre-existing health condition that puts them in danger if COVID positive; or are caring for someone who is COVID positive.	
4.1.1	<p>The City of Austin should increase direct financial cash assistance to help those impacted by COVID-19, support lost wages, increase food security, ensure housing stability, and meet other needs.</p> <ol style="list-style-type: none">a) Resource distribution should occur through multiple avenues such as the City of Austin (RISE funding) as well as trusted community organizations.b) Provide paid leave, during the isolation period, for frontline workers who test positive for COVID-19c) The duration of financial assistance should correlate with individual circumstances. For example, monthly assistance may be needed for immunocompromised or other individuals who should not work outside the home during the COVID-19 pandemic.d) Receipt of financial assistance should not be tied to immigration status. <ul style="list-style-type: none">• APH is finalizing details for the distribution of RISE 2.0 funds, through an online portal with phone assistance available multiple languages, where immigration information is not requested.• APH continuing to pursue \$2 Million contract with a non-profit to educate workers on their rights, provide assistance in applying for unemployment assistance, and direct financial support to high-risk workers experiencing economic distress. City-level benefits aren’t tied to immigration status.

Goal 4: Economic and Employment Support

Objective 1: Address the economic needs of those who either need to quarantine due to exposure; self-isolate because they test positive for COVID-19; cannot work because of a pre-existing health condition that puts them in danger if COVID positive; or are caring for someone who is COVID positive.

4.1.2 Establish a dedicated bilingual phone line for access to economic assistance. (See “Outreach, Prevention, and Communication” section).

- Workforce Solutions offers a hotline to assist job-seekers: 512-485-3792 and a dedicated website to existing employment options: <http://www.wfscapitalarea.com/Job-Seekers/Jobs-Now>

4.1.3 Establish Sick Workers Resource Center that would provide:

- a) Education and advice on worker rights, including paid sick time.
- b) Information on where and how to file complaints of employer violations.
- c) Training for teleworking jobs.
- d) Help applying for unemployment benefits and other assistance.
- e) Establish source of funding.

- APH is negotiating a \$2 million contract with a non-profit to educate workers on their rights, assist in applying for unemployment assistance, provide legal case management and distribute direct financial support to high-risk workers experiencing economic distress.

Goal 3: Obj. 2: Require businesses to invest in employee health protections

Goal 4: Economic and Employment Support

Objective 2: Require businesses to invest in employee health protections.

4.2.1 Require employers that contract with the City of Austin – particularly those serving essential functions (e.g., construction, janitorial, health care) – to:

- a. Commit to tailored, bilingual outreach.
- b. Post sick time/Families First Coronavirus Relief Act (FFCRA) information at the worksite in English and Spanish.
- c. Send a letter (English and Spanish) to all employees explaining their sick time rights under FFCRA.
- d. Provide PPE and other supplies (e.g., hand sanitizer) to essential workers.
- e. Eliminate any requirement of a health clearance letter as a condition of employment.
- f. Establish accountability for compliance.

- Template Letter has been created for employees seeking Sick Leave compensation with information about FFCRA as well as isolation/quarantine period; currently available online in English and Spanish under Testing notices for Employers:
<http://www.austintexas.gov/department/information-businesses-and-industries>
- Hispanic/Latinx Strike Team has organized six upcoming PPE distribution events in collaboration with community partners to ensure all residents have access to masks, gloves, and hand sanitizer.

4.2.2 Levers of enforcement might include denying permits to and eliminating from future bid consideration those employers who do not comply.

- APH identified six zip codes to provide additional enforcement and education to businesses, restaurants and child care facilities. The goal is to ensure compliance with Health Authority and Mayor’s orders and to ensure health and safety in these communities. Staff will continue to monitor for compliance.
- Next steps: An internal meeting with City departments to discuss non-compliance with city rules and regulations.

4.2.3 Provide training, PPE or other resources to employers; Consider training on CDC Decontamination Guidelines and safety procedures. <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>

- Hispanic/Latinx Strike Team has organized six upcoming PPE distribution events in collaboration with community partners to ensure all residents have access to masks, and hand sanitizer.
- Staff are developing training (videos) and messaging on best practices for frontline workers.

Goal 4: Obj. 3: Motivate business to share Covid-19 support services

Goal 4: Economic and Employment Support

Objective 3: Motivate trade associations and business organizations that work closely with the Latinx community to share COVID-related support services and information with their constituents.

4.3.1 Provide messages and materials to share in English and Spanish.

- The Small and Minority Business Resource department has an ongoing communication effort that has reached over 8,400 vendors to date. The staff will continue to provide emails, testing information, guidelines for health, including “Stay home if you are sick” messaging to vendors.
 - Sent 560 certified mail to vendors and their primes.
 - Asked suppliers to post COVID-19 posters and testing site information in their stores.
 - Emailed construction job site flyers and testing information to ten local suppliers and two local landfills.
- Austin Public Health (APH) and Economic Development (EDD) departments leveraged vendor relationships by providing information to vendors that they could share with their clients. Several provided education via case management sessions and phone sessions, as well as using their social media platforms to provide information to their clients and making printed material available to clients as they accessed services at locations throughout the City and County.
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4.3.2 Create an informal ambassador program – focused on the few most influential organizations that can help and have them disseminate the messages to other groups (I.e. ALC).

- ALC has been invited to join the Hispanic/Latinx Strike Team as a community partner.
- Weekly community partners meetings to discuss next steps outlined in this document.