



American Samoa

2022 Recovery Plan Performance Report

State and Local Fiscal Recovery Funds

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GENERAL OVERVIEW

Executive Summary

American Samoa had been the only remaining U.S. soil not to have community spread of the COVID-19 virus until February 21, 2022. It was not accidental that American Samoa has remained COVID-19 free. It required tremendous sacrifice by the people of American Samoa to keep their loved ones safe and protected. We are fortunate to have the support and federal assistance of the various COVID-19 relief and recovery funds to help meet the challenges as a result of the COVID-19 pandemic and the public health emergency declaration.

Since the first public health emergency declaration in March 2020, American Samoa ad effectively closed its borders to all normal passenger travel and imposed restrictive protocols to combat the global pandemic and keep the people of American Samoa safe. The border closure was a critical component of the territories plan to mitigate and control the introduction of the deadly virus into American Samoa however, it caused incredible strain to our healthcare system and services and economic activity. Our healthcare system is based on a single acute medical facility and 8 small village clinics servicing the entire 50,000 population across 7 islands. Access to medical services and treatment not available on the island was severely impacted due to the border closure.

In February 2021, under the new Governor Lemanu Mauga and LT. Governor Taluega Ale administration, a repatriation program was launched to begin to allow residents that had been stranded off-island for over a year to return home in a safe and manageable way. This also coincided with the introduction of the life-saving vaccinations and health precaution measures which allowed for the controlled reopening of passenger travel. As repatriation flights slowly increased the risk for COVID-19 entering American Samoa also increased. Beginning in July 2022, American Samoa has returned to its regular passenger travel schedule for mainland flights and inter-island flights but with some public healthcare emergency declaration protocols to remain in place, namely to register vaccination status, testing upon arrival and select quarantine for positive travelers. These measures provide adequate protection from the spread of the coronavirus and ensures our healthcare system is not overrun by community spread.

The American Samoa ARPA Recovery Plan has been developed to address key territorial challenges that have been exacerbated as a result of the Public Emergency Declaration relating to our limited healthcare services and treatment capacity available in the Territory and the negative impact to our economic drivers as a result of the public health emergency declaration.

American Samoa has a single acute medical facility to serve all its residents. The LBJ Hospital has a total of 124 medical beds and only 10 ICU beds to serve all 7 islands and a population of 52,000 residents. Increasing access to adequate healthcare services and improving treatment options available in American Samoa is a critical need for the territory and has been exacerbated by the COVID-19 pandemic and the public health emergency declaration restricting travel. Improving our healthcare services and treatment available in the territory is the highest priority of this administration to meet our healthcare needs and allow us to reopen our borders and be ready to respond should COVID-19 reach our shores.

Strengthening our seaport and airport facilities and improving sea transportation between the main island of Tutuila, the Manu’a Islands and Aunu’u are critical for transporting supplies, developing businesses and access to healthcare services. The inadequate state of these facilities has been highlighted under our public health emergency declaration and as a result of mitigation steps to keep COVID-19 outside of our borders. Our entire society is 100 percent dependent on goods being able to flow through our single commercial port. Interruptions and delays which were a common scenario due to the added vessel clearance and inspection protocols had a direct and negative impact on our businesses and access to basic necessities. It cannot be overstated that our economy exists only so long as vessels are able to safely unload their cargo and commercial fishing vessels are able to be cleared to deliver their catch to the cannery for processing.

The American Samoa ARPA Recovery Plan will allow much needed improvement to our water distribution system, where much of the piping is approaching 60 years in service. These aged pipes are estimated to be leaking up to 60% of water throughout the distribution system.

Improving our connectivity and broadband access across the islands will be critical to ensuring American Samoa is better prepared to operate with the current COVID-19 pandemic and to strengthen our broadband infrastructure for future challenges.

Since the approval of the American Samoa ARPA Recovery Plan in August 2021, the implementation of the various programs and projects have been successfully launched to address the challenges mentioned above. Our attached 2022 Recovery Plan report will outline and highlight the progress and outcomes for each allocation of State and Local Fiscal Recovery Funds (SLFRF) administered by the ARPA Oversight Office under the Office of the Governor.

On behalf of the American Samoa Government and the people of American Samoa, we are truly grateful for the federal assistance these ARPA funds provide to address these critical territorial needs. We are committed to ensuring we implement and execute the American Samoa ARPA Recovery Plan in accordance with the statutory and award guidelines.

Use of Funds

The following table summarizes the intended use of ARPA funds to address the challenges as a result of the COVID-19 pandemic and the public health emergency declaration.

Section 602. Use of Funds	Percent Allocated	Total
(a) To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality; d) to make necessary investment into water, sewer and broadband infrastructure.	100%	\$479,135,254.00

Capital investment into Healthcare facility		63%	\$300,000,000.00
Capital investment into Mental Health facility		5%	\$24,000,000.00
Capital investment into DOH Community Centers		4%	\$20,000,000.00
Capital investment into Seaport facility		4%	\$20,000,000.00
Capital investment into Airport facility		3%	\$15,000,000.00
Travel Safe project		2%	\$8,100,000.00
ARPA Oversight Office Administration		1%	\$3,754,000.00
Repatriation/Quarantine program		2%	\$10,000,000.00
Capital investment into inter-island transportation		2%	\$8,000,000.00
Capital investment into Public buildings (Social Distancing, Non-profit Organizations (Hope House, NGO's, etc.)		3%	\$12,000,000.00
Affordable Home loan program		2%	\$8,000,000.00
Small Businesses loan program		2%	\$10,000,000.00
ASG Vaccination Program		1%	\$5,000,000.00
Upgrade of communication infrastructure (towers, Available funds for repairs to water distribution system		2%	10,000,000.00
remaining ARPA funds			\$281,254.00
	TOTAL:	100%	\$479,135,254.00

a. Public Health (EC 1)

American Samoa’s limited public healthcare system has been a challenge long before the threat of COVID-19 pandemic to provide adequate health care services for the people of American Samoa. Our reliance on a single medical facility, LBJ Hospital with its 124 medical beds and only 10 ICU beds was a significant factor to closing our borders since March 2020 as the first line of defense as the COVID-19 spread across the globe. Our limited services and capacity to handle an outbreak with our current public healthcare services capabilities. Utilizing the ARPA funds to strengthen our capacity to respond to the COVID-19 pandemic and future healthcare emergencies is the top priority for the use of ARPA funds

Improving medical services to the outer islands and outer villages is critical part of our plans to strengthen our response capabilities should COVID-19 reach our shores. The improvements in our community health centers planned will allow the outer islands and villagers better access to healthcare services and better prepare the territory to address issues should the COVID-19 arrive on our shores.

Lastly, a tragic consequence of our border closure saw a significant increase in teen and young adult suicides during 2020. The rise in criminal cases involving illegal methamphetamines and other illegal drugs during the border closure highlighted a desperate need to address this growing problem in American Samoa. Improving our mental health services in American Samoa is an important component in the overall health and wellness of the territory and is sorely lacking presently.

b. Negative Economic Impacts (EC 2)

All economic activity in American Samoa begins at the only commercial port and only Airport to serve international flights. American Samoa receives 100% of its medical supplies and medicines, food items, general merchandise, building supplies, equipment and mail through these ports. Disruptions in clearing fishing vessels or cargo ships cost businesses money every minute they are delayed. Many of these cargo vessels caring perishable goods have been on the water for two weeks and goods have been on the vessel for three weeks before they arrive in the territory. As a result of the public health emergency declaration and the protocols imposed to mitigate the possible introduction of the COVID-19 virus, our businesses experienced significant delays in their shipments. As supply chain issues arose in the United States, they were also felt in American Samoa.

Updating, upgrading and/or replacing the current Port facilities will allow commerce to continue with minimal interruptions and delays and still be able to adhere to mitigation protocols established by the public health emergency declarations. The seaport needs to remain operational during pandemic periods as it serves as a lifeline for all goods imported into the territory.

c. Services to Disproportionately Impacted Communities (EC 3)

American Samoa ARPA Plan is designed to address territory-wide challenges as a result of the public health emergency declaration and the mitigation protocols to keep American Samoa COVID-19 free. First, American Samoa's healthcare system is a public with one hospital and community centers used by the entire population. Private healthcare services are extremely limited in American Samoa so any capital investment into improving our public healthcare system benefits the entire territory.

Use of ARPA funds for non-profit organizations, home loan program and small business loans will provide various communities within the Territory an opportunity to seek relief and utilize the ARPA funds to address their difficulties as a result of the public health emergency declaration.

d. Premium Pay (EC 4)

The American Samoa ARPA Recovery Plan has not nor does it intend to expend any SLFRF funds in this category.

e. Water, sewer, and broadband infrastructure (EC 5)

The American Samoa ARPA Recovery Plan includes SLFRF funds for water distribution infrastructure projects to improve and reduce water loss due to aging pipe system. SLFRF funds will also be used to improve upload and download speed across the territory to include the Manu'a islands and Aunu'u and the outer villages. Having adequate connectivity and bandwidth is critical to allowing our children to continue their education during a pandemic shutdown and allow for commerce and needed government services to operate.

f. Revenue Replacement EC 6)

The American Samoa ARPA Recovery Plan has not nor does it intend to expend any SLFRF funds in this category.

Promoting Equitable Outcomes

American Samoa occupies a particularly unique demographic position within the greater United States. As discussed below, more than half of the population lives below the poverty line and there is universal dependence on a single hospital. There is generally some equity in economic status among the different ethnic/racial groups in the Territory; however, there are several barriers that exist among the minority groups that must be addressed.

The focus of the Recovery Plan is on investing into areas that will improve access and outcomes for a critically underserved population as a whole. Each subgroup faces much the same difficulty, but barriers to services like language will also be addressed.

a. Goals

According to the latest Statistical Yearbook published by the American Samoa Department of Commerce, 57.8% of the population lives below the poverty line. This figure is roughly similar across ethnic and racial lines except for the Tongan population, which sees 80.5% of individuals living in poverty. The per capita income for the residents of the Territory was \$6,311.

Generally speaking, the entirety of the 56,700 residents constitutes an underserved population. This is further reinforced by the complete reliance on a single, government run hospital for nearly all healthcare needs. Currently, there are no other hospitals in American Samoa and services can be limited. For example, there are only 130 beds and 10 ICU beds at the LBJ Tropical Medical Center servicing the entire population.

Minority groups face roughly the same economic disadvantages as the majority Samoan population. There are, however, significant immigrant populations that can be more vulnerable and face difficulties in accessing services. There are cultural, linguistic, and occasionally immigration issues that make healthcare services more difficult to access.

The focus has been on healthcare access in this section because the bulk of ARPA funding will be directed towards improving healthcare capacity and services. Providing adequate services to the population in general is the major concern since decades of limited resources has created a populace vulnerable to the effects of COVID-19.

b. Awareness

The American Samoa Government is committed to engaging residents and businesses to ensure that they are aware of the programs and services being offered. To start, the ARPA Oversight Office established by the Governor has held public forums to educate the public on the

Recovery Plan. The Office has also held sessions with the Chamber of Commerce to similarly educate the business community.

Various departments and agencies will administer the ARPA funded programs and projects, each administering department or agency will include public notification and information sessions to solicit feedback on the program from the territorial stakeholders, including businesses, non-profit organizations and individual residents of the territory. In particular, the Department of Health has well-established outreach initiatives including advertising campaigns (radio, social media, print).

In addition to the campaigns above, the traditional village hierarchy structure creates an opportunity to communicate information on wide spread basis. By coordinating with the Office of Samoan Affairs, messages can be relayed through pulenu'u (village mayors) and matai (chiefs) to spread program/service information to each family in villages throughout the Territory. Engaging with other leaders in the community, like pastors, is also an effective means to spread messages.

For the non-English and non-Samoan speaking groups, ASG is prepared to do outreach in those communities, as well. The need for multi-lingual campaigns has long been understood and even put into practice with the Measles outbreak that slightly preceded the COVID-19 pandemic.

With the tools at hand and the relatively small population size, disseminating information widely and equally is realistic and likely with the plans for engagement already in place.

c. Access and Distribution

American Samoa's healthcare facilities and programs are generally available for all residents. Through Medicaid and other programs, healthcare is largely subsidized. Barriers do, however, exist in some instances.

The most significant situation where barriers exist are with the immigrant population. Non-residents can face differing costs for services at the hospital or may not be eligible for DOH programs. This can discourage some from getting the healthcare they may need.

The intent of the Recovery Plan is to increase access for all populations and funding for care that will, in turn, increase the health of every individual in the Territory. Better facilities and funding of programs can lessen the burden on those populations that might not traditionally qualify for subsidized services.

d. Outcomes

The main objective of the American Samoa Government is to increase healthcare capacity, primarily through using funds on a new hospital. Given the socioeconomic situation of the population, this expenditure will greatly improve access to services and result in more positive health outcomes for the entirety of the population. As noted above, the high poverty rates and the critically low capacity in the healthcare system has caused many difficulties in keeping the population healthy. It has been a major factor in the suspension of commercial flights, which has kept American Samoa safe, but also exacerbated disparities in some instances.

Every group is reliant on a single hospital at this time and addressing this major need will definitely assist in creating better outcomes. Beyond the hospital, there are other plans in place to increase the access to better healthcare, mainly through capacity building.

With the above considerations in mind, American Samoa's objectives in spending these funds are to reach universal levels of service. Traditionally, the residents as a whole have been underserved in healthcare resulting in the high incidences of non-communicable diseases, which make many more susceptible to difficulties with COVID-19. Much of this funding will be used to achieve universal service by increasing capacity and quality.

In terms of specifically targeted groups, there are several areas of note. There will be significant investment in increasing both access to healthcare and economic opportunities for the Manu'a islands. Most recent data shows that there are 1,143 residents in these three islands located roughly 60 miles from the main island. The Territory's only hospital is located on the main island of Tutuila, making it difficult for Manu'a residents to access services. Department of Health services are likewise limited. Through the ARPA funded projects, efforts are being made to connect these residents to healthcare. Reliable transportation has been a major issue also for economic opportunities. Like the rest of American Samoa, these islands are completely dependent on importing goods requiring regular and reliable transportation services. These efforts are particularly important in light of the data that shows the per capita income in Manu'a is even lower than the Territory average at \$5,441.

Samoan and "Samoan and other" represent 91.3% of the population. The remaining population is made up of other Pacific islanders (3.7%), Asian (3.6%), White (0.9%), and Hispanic (0.1%). As stated above, the data shows that these groups have roughly the same economic opportunities and healthcare access. With such a large overall population below the poverty line, the focus and spending will be on access for all. Targeting of specific groups will be focused on communications and outreach to ensure that each group is aware of the services made available by ARPA funding. Specific programs like the Emergency Rental Assistance Program will help those residents that need it across every group since each is similarly situated.

Implementation Issues:

Goals and Targets –

As discussed above, the different racial groups have general parity economically, save for the Tongan community that has the highest poverty rate. There are roughly 541 adult age individuals of Tongan descent that are below the poverty line, based on the information contained in the most recent American Samoa Statistical Yearbook. While the difficulties facing the Tongan community are significant, the majority of the total population are also below the poverty line.

The efforts thus far, and the plan overall, is geared less towards specific racial equity and more towards increasing economic equity for the population as a whole. Specifically, programs like ERAP, the Cash Assistance Program for unemployed/underemployed workers, the Home Loan Assistance Program, and the Small Business Loan Program are all working towards improving the economic opportunities. The short-term Cash Assistance Program sought to assist workers

impacted by the government-imposed restrictions resulting from the first local spread of COVID-19.

Each of the above programs intended to provide immediate assistance to face the challenges brought on by the pandemic. However, much of the Recovery Plan is focused on providing adequate health care, which has been a constant challenge over the years. This focus on healthcare is not at the exclusion of economic equality, but rather in support of that policy goal. Studies have shown that healthcare expenditures have a positive relationship with economic growth by increasing income, GDP, productivity, and alleviating poverty.¹

The Recovery Plan's primary focus is on increasing healthcare capacity and making health services more accessible. This will be achieved through renovations at the existing hospital, a new 40-bed hospital, and improvements to/additional community health centers including a dedicated behavioral health center. Each of these is intended to not only directly address the issue of providing quality care and improving overall health outcomes, but will also have the effect of improving the economic well-being of the Territory.

Project Implementation –

Healthcare is at the forefront of the equity strategy employed by the American Samoa Government. Ensuring quality care locally, especially when the majority of the population is below the poverty line, is key. Often times, patients must travel for care that is unavailable in the Territory and despite government assistance, these trips can create a significant hardship.

In addition to the above, American Samoa has focused on improving accessibility to small businesses, in particular. Improving access to credit has been a major policy endeavor with ARPA funds that is intended to ensure that small businesses cannot just survive through the difficulties of the pandemic but to grow, as well. Accessibility, though, also includes investments in certain facilities like the Seaport and Airport. American Samoa is differently situated than its counterpart States and Territories in that certain basic issues like transportation serve to prevent growth by increasing shipping times, creating scarcity of necessary supplies and food making small businesses more vulnerable to factors outside of its geographical territory.

The investments in healthcare and Port facilities make up a significant portion of the allocated funds. However, American Samoa also recognizes the importance of immediate assistance. As previously pointed out, programs like ERAP and the Cash Assistance Program for workers made use of existing program structures to get funds quickly into the hands of those facing troubled times due to COVID-19. The non-profits of the community also had funds made available for assistance.

¹ Raghupathi, V., & Raghupathi, W. (2020). Healthcare Expenditure and Economic Performance: Insights from the United States Data. *Frontiers in public health*, 8, 156. <https://doi.org/10.3389/fpubh.2020.00156>

Community Engagement

The American Samoa ARPA Oversight Office has been tasked with the public outreach to gather feedback on the American Samoa ARPA Recovery Plan's identified priorities and category allocation.

Guidance from Territorial Leaders emphasized exploring projects and programs that addressed the challenges facing the territory as a result of the COVID-19 pandemic and the public health emergency declaration. To seek projects that allow this once in century funding to meet our present needs and prepares American Samoa for the next pandemic. Incorporating feedback from a wide range of territorial stakeholders was key in developing the American Samoa ARPA Recovery Plan.

The initial general public feedback began before the creation of the AS ARPA Oversight Office. As information became available, information was collected through individual interactions with members in the business community and private sector. Direct correspondence between the Executive and Legislative leaders regarding critical needs within the community and the possibility of ARPA funds as the funding source.

The administration created the American Samoa ARPA Oversight Office to administer the ARPA/SLFRF funds and to ensure compliance with all statutory and administrative requirements including public outreach and reporting.

Briefings are scheduled with the House of Representatives and Senate to present the initial American Samoa ARPA Recovery Plan for their input and feedback.

There have been numerous interactions with members of the business community and private sector seeking to understand how the SLFRF funds could be used to address eligible projects facing the business community. This includes presentations to the American Samoa Chamber of Commerce to gather their input and insight. The AS ARPA Oversight Office has also hosted ARPA/SLFRF informational sessions for the general public to comment and provide feedback.

An ARPA Oversight Office web page was created to post relevant information on ARPA/SLFRF funds on the American Samoa Government Website.

The American Samoa Government has a unique organizational government structure that includes traditional and cultural leaders that provides a unique perspective on village life. The Office of Samoan Affairs headed by the Secretary of Samoan Affairs and its District Governors leadership structure allows for information dissemination in a culturally unique way.

The ARPA Oversight Office has conducted individual meetings with semi-autonomous Authorities of government which includes our utilities for their valuable input.

The ARPA Oversight Office has connected with numerous non-profit and non-governmental organizations regarding the potential uses of the ARPA/SLFRF funds. Together, a wide cross-section of the population and key stakeholders have been involved in the creation of the American Samoa ARPA Recovery Plan. Based off this collection of feedback, priorities and recommendations, the American Samoa ARPA Recovery Plan was created to meet the immediate needs of the territory as a result of the COVID-19 pandemic and the public health emergency declaration.

The American Samoa ARPA Recovery Plan includes allocation of funding to meet the diverse needs of all the residents of American Samoa. Capital investment into a new medical facility on the main island of Tutuila that serves 90%+ of the local population will dramatically improve access to healthcare and the quality of treatment available in the territory. Too often, families must endure loved ones leaving the territory to seek medical treatment unavailable in the territory creating financial and emotional harm for the patient and families. American Samoa depends on its single acute medical hospital, improving these services are of critical importance.

In addition to the above, the ARPA Oversight Office works to review/approve funding requests. In order for projects and programs to be approved for funding, agencies and organizations must include a community engagement plan in their proposal. Typically, this has meant conducting informational sessions with a time for feedback/questions from the community. Efforts are made by the potential sub-recipients to advertise these meetings both on the internet and over the local radio stations to ensure that the largest group of people is reached. Written comments are also allowed. This feedback has become an essential aspect of each project/program and will continue to be used so that the public has input on the use of funds.

Labor Practices

American Samoa has required clauses in procurement contracts that address the strong labor standards as well as supporting economic recovery. These are well-established and will be included in all contracts for infrastructure projects using ARPA funds. The American Samoa Government, American Samoa Power Authority, and American Samoa Telecommunications Authority are all required to include these provisions, which ensures that no matter which agency is leading the project, the requirements will be consistent.

Below are the required contract provisions:

CLAUSE	REQUIRED BY AMERICAN SAMOA ADMINISTRATIVE CODE	APPLIES TO
EQUAL OPPORTUNITY	10.0250(d)(3), 10.0260(c)	All Contracts in excess of \$10,000
DAVIS BACON ACT	10.0250(d)(5)	Construction contracts that exceed \$2,000 and when required by federal grant program legislation
CONTRACT WORK HOURS AND SAFETY STANDARDS ACT	10.0250(D)(6); 10.0260(D)	Construction contracts in excess of \$2,000 or contracts in excess of \$2,500 which involve employment of mechanics or laborers
CLEAN AIR AND WATER	10.0250(d)(7); 10.0260(f)	All contracts over \$100,000 (unless requirement has been waived by EPA)

In addition to the above required clauses, ASG Procurement Rules give preference to local bidders in construction projects. For contracts valued at \$50,000 or less, only local bidders are allowed to participate. For those greater than \$50,000, local bidders are given specified add-on percentages. This local preference leads to a greater number of local employees and overall income that is much needed in the Territory. This policy has a direct effect on local stimulation of the economy.

Use of Evidence

The American Samoa Government has established an Oversight Office responsible for administering and managing the ARPA funds as well as vetting the eligible projects. Part of the responsibilities of the Office is to evaluate the eligibility and need for each project.

The process for evaluation/vetting begins with the lead government agency or organization submitting a project proposal that must include specific information about the necessity of the project. The Oversight Office staff is then responsible for reviewing the proposal and obtaining more information from both the lead department as well as other agencies to get a complete picture of how the project qualifies and fills a required need. For each program like behavioral health and other public health outreach endeavors, data showing current resources, identified targeted groups, and other information showing the need created/exacerbated by the pandemic are required to evaluate the projects.

A Learning Agenda would be helpful in focusing attention on areas of need so that the funds are most effectively used. Currently, ASG has not been using a Learning Agenda. The development of one would help keep the attention on the areas of most need and assist in formulating the programs accordingly. However, unlike many other jurisdictions, American Samoa's needs can be extremely fundamental. For example, after decades of limited resources, the only hospital serving 55,000 residents will need to expand to sufficiently address factors that make the population more susceptible to poor outcomes with regard to COVID-19. In short, the only way to address this is to expand healthcare capacity by investing in new facilities that will increase the capacity from ~160 or so beds to a number far greater. The knowledge of this necessity has long been apparent and captured in data over the years, so the necessity of a tool like a Learning Agenda for a project like this is far less significant.

An ever-present issue in American Samoa is the challenge of data collection and availability. Where other jurisdictions may have access to more defined data to create tailored, evidence-based responses, such information is not always available for the Territory. The American Samoa Statistical Yearbook 2019 is the latest available resource, however, there are some instances where the data is not recent. This makes using evidence clearinghouses difficult as adequate baselines and trackable program data are not well established. The problem is compounded by a historic lack of resources to support this type of data collection and analysis.

American Samoa does, however, seek out the most information and data it can find to support its evaluation efforts. Obtaining this data is critical to the mission of the Oversight Office, which is ensuring that funds are used in accordance with the Act and fill the needs made worse by the

pandemic. Working with departments and other organizations in the evaluation stage begins the process of data collection. Justifications for funding requests typically must include data that highlights the need and can then be tracked to show the impact/effectiveness of the program/project.

Much of the current projects include capital investments based on the readily available information regarding public health and economic impact. At this juncture, investments in healthcare facilities represent the vast majority of the funding allocations. In order to refine these projects to be most effective, data showing existing facility capacity and identifying how many patients need to be served are the types of information used to justify expenditures. The long lead times in getting these projects off the ground, though, unfortunately make providing trackable data reflecting the effectiveness of the project at this point impossible.

Table of Expenses by Expenditure Category

Expenditure Category	EC	Cumulative Allocation to date	Cumulative Expenditure (up to 6/30/22)
1: Public Health			
COVID-19 Mitigation & Prevention			
COVID-19 Vaccination^	1.1	2,665,254.00	2,527,074.35
COVID-19 Testing^	1.2		
COVID-19 Contact Tracing^	1.3	7,716,000.00	5,000,000.00
Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, Child care facilities, etc.) *^	1.4	12,000,000.00	-
Personal Protective Equipment^	1.5		
Medical Expenses (including Alternative Care Facilities) ^	1.6		
Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine) ^	1.7	376,000,000.00	14,389,480.93
COVID-19 Assistance to Small Businesses^	1.8		
COVID 19 Assistance to Non-Profits^	1.9		
COVID-19 Aid to Impacted Industries^	1.1		
Community Violence Interventions			
Community Violence Interventions*^	1.11		
Behavioral Health			
Mental Health Services*^	1.12	24,000,000.00	-
Substance Use Services*^	1.13		
Other			
Other Public Health Services^	1.14		

Expenditure Category	EC	Cumulative Allocation to date	Cumulative Expenditure (up to 6/30/22)
Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency	-		
2: Negative Economic Impacts			
Assistance to Households			
Household Assistance: Food Programs*^	2.1		
Household Assistance: Rent, Mortgage, and Utility Aid*^	2.2		
Household Assistance: Cash Transfers*^	2.3		
Household Assistance: Internet Access Programs*^	2.4		
Household Assistance: Paid Sick and Medical Leave^	2.5		
Household Assistance: Health Insurance*^	2.6		
Household Assistance: Services for Un/Unbanked*^	2.7		
Household Assistance: Survivor's Benefits^	2.8		
Unemployment Benefits or Cash Assistance to Unemployed Workers*^	2.9	500,000.00	-
Assistance to Unemployed or Underemployed Workers (e.g., job training, subsidized employment, employment supports or incentives) *^	2.1		
Healthy Childhood Environments: Child Care*^	2.11		
Healthy Childhood Environments: Home Visiting*^	2.12		
Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System*^	2.13		
Healthy Childhood Environments: Early Learning*^	2.14		
Long-term Housing Security: Affordable Housing*^	2.15	8,000,000.00	-
Long-term Housing Security: Services for Unhoused Persons*^	2.16		
Housing Support: Housing Vouchers and Relocation Assistance for Disproportionately Impacted Communities*^	2.17		
Housing Support: Other Housing Assistance*^	2.18		
Social Determinants of Health: Community Health Workers or Benefits Navigators*^	2.19		
Social Determinants of Health: Lead Remediation*^	2.2		
Medical Facilities for Disproportionately Impacted Communities^	2.21		
Strong Healthy Communities: Neighborhood Features that Promote Health and Safety^	2.22		
Strong Healthy Communities: Demolition and Rehabilitation of Properties^	2.23		
Addressing Educational Disparities: Aid to High-Poverty Districts^	2.24		
Addressing Educational Disparities: Academic, Social, and Emotional Services*^	2.25		

Expenditure Category	EC	Cumulative Allocation to date	Cumulative Expenditure (up to 6/30/22)
Addressing Educational Disparities: Mental Health Services*^	2.26		
Addressing Impacts of Lost Instructional Time^	2.27		
Contributions to UI Trust Funds^	2.28		
Assistance to Small Businesses			
Loans or Grants to Mitigate Financial Hardship^	2.29	10,000,000.00	215,037.46
Technical Assistance, Counseling, or Business Planning*^	2.3		
Rehabilitation of Commercial Properties or Other Improvements^	2.31		
Business Incubators and Start-Up or Expansion Assistance*^	2.32		
Enhanced Support to Microbusinesses*^	2.33		
Assistance to Non-Profits			
Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)^	2.34	4,500,000.00	-
Aid to Impacted Industries			
Aid to Tourism, Travel, or Hospitality^	2.35		
Aid to Other Impacted Industries^	2.36		
Other			
Economic Impact Assistance: Other*^	2.37		
Household Assistance: Eviction Prevention*^	-		
Education Assistance: Other*^	-		
Healthy Childhood Environments: Other*^	-		
Social Determinants of Health: Other*^	-		
3: Public Health-Negative Economic Impact: Public Sector Capacity			
General Provisions			
Public Sector Workforce: Payroll and Benefits for Public Health, Public Safety, or Human Services Workers	3.1		
Public Sector Workforce: Rehiring Public Sector Staff	3.2		
Public Sector Workforce: Other	3.3		
Public Sector Capacity: Effective Service Delivery	3.4		
Public Sector Capacity: Administrative Needs	3.5		
4: Premium Pay			
Public Sector Employees	4.1		
Private Sector: Grants to Other Employers	4.2		
5: Infrastructure			
Water and Sewer			
Clean Water: Centralized Wastewater Treatment	5.1		
Clean Water: Centralized Wastewater Collection and Conveyance	5.2		
Clean Water: Decentralized Wastewater	5.3		

Expenditure Category	EC	Cumulative Allocation to date	Cumulative Expenditure (up to 6/30/22)
Clean Water: Combined Sewer Overflows	5.4		
Clean Water: Other Sewer Infrastructure	5.5		
Clean Water: Stormwater	5.6		
Clean Water: Energy Conservation	5.7		
Clean Water: Water Conservation	5.8		
Clean Water: Nonpoint Source	5.9		
Drinking water: Treatment	5.1		
Drinking water: Transmission & Distribution	5.11	20,000,000.00	-
Drinking water: Lead Remediation, including in Schools and Daycares	5.12		
Drinking water: Source	5.13		
Drinking water: Storage	5.14		
Drinking water: Other water infrastructure	5.15		
Water and Sewer: Private Wells	5.16		
Water and Sewer: IIJA Bureau of Reclamation Match	5.17		
Water and Sewer: Other	5.18		
Broadband			
Broadband: "Last Mile" projects	5.19		
Broadband: IIJA Match	5.2		
Broadband: Other projects	5.21	10,000,000.00	1,940.00
6: Revenue Replacement			
Provision of Government Services	6.1		
Non-federal Match for Other Federal Programs	6.2		
7: Administrative			
Administrative Expenses	7.1	3,754,000.00	359,291.46
Transfers to Other Units of Government	7.3		
Transfers to Non-entitlement Units (States and territories only)	-		
		479,135,254.00	22,492,824.20

Performance Report

As stated previously, many of the approved projects are capital expenditures that will not have sufficient data to examine the Key Performance Indicators (KPI). As KPI's become available in subsequent reports, they will be included.

At the moment, there are several programs to which we can draw on KPI to evaluate project performance. Where performance data is available, they are included below in the associated entry in the Project Inventory.

Project Inventory

ARPA Project Name: American Samoa Vaccination Program (ASVP)

ARPA FUND AMOUNT: \$2,665,254.00

1.1	COVID-19 Vaccination
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Department of Health, Office of Samoan Affairs, Department of Treasury & Office of the Governor

Timeline for implementation: 0-6 months



VACCINATION OUTREACH & INCENTIVES

American Samoa's high comorbidity and non-communicable diseases (Hypertension, diabetes, obesity, and others) puts the population at high risk to the impact of the COVID-19 virus. Additionally, our limited healthcare services and facilities in the territory only heightens the risk to the general population. Our cultural and communal societal norms where multi-generations and in many cases multi-families sharing the same living space makes the possibility of community spread of the COVID-19 virus even more risky.

The territory experienced initial success in the early months with the implementation of the COVID-19 vaccinations as they became readily available for residents. Prioritizing the highest risk population, American Samoa quickly outpaced many States and other Territories in the vaccination rate of its citizens. Unfortunately, the vaccination rates slowed and the American Samoa COVID-19 Task force began to seek ways to incentivize and increase turnout at vaccination sites. Figure 1.4 below highlights the number of doses in the early months of the year and gradual declines in subsequent months.

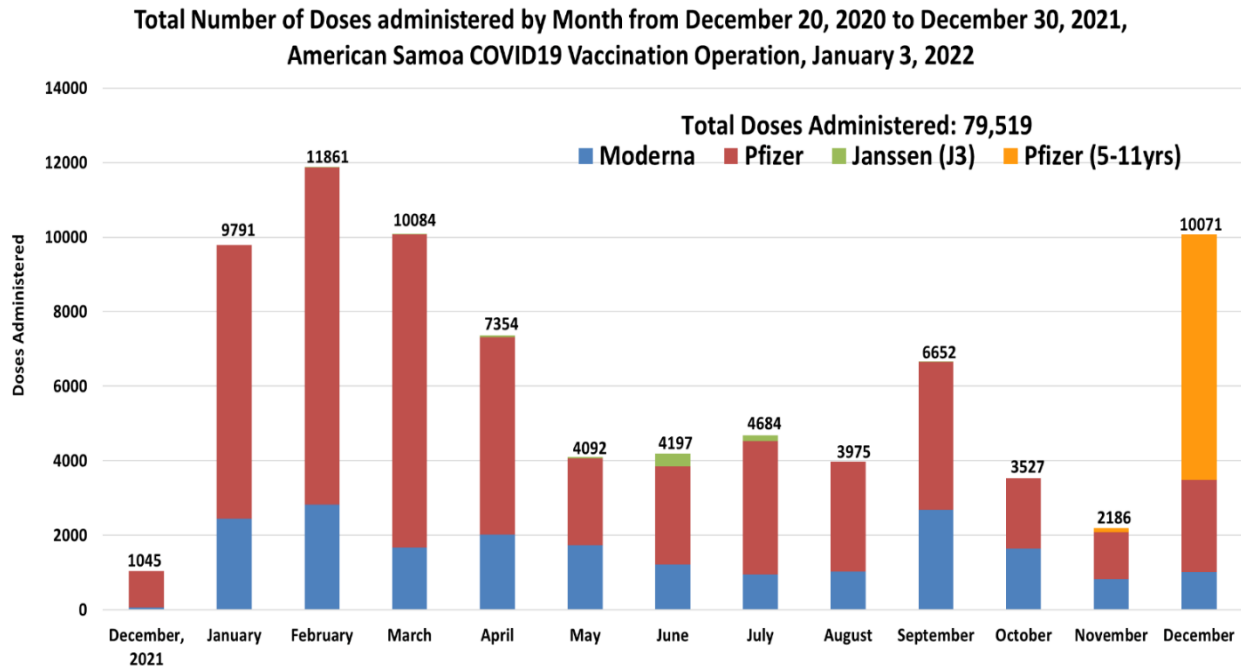


Figure 1.4: Total Number of Doses (Jan 3, 2022)

First, the Department of Health implemented village level vaccination and outreach sites to inform and educate the public on the benefits vaccinations bring to individuals and the community at large. Second, The Covid-19 Taskforce launched a vaccination sweepstakes with prizes and awards for vaccinations. A \$100 incentive was launched in the summer and again as part of the December mass vaccination drive which resulted in one of the most successful months of the year.

The ARPA Vaccination program is a multi-department initiative by the Department of Health, Office of Samoan Affairs, Department of Treasury and the Office of the Governor to implement territory-wide COVID-19 outreach and vaccination campaign to increase our territorial vaccination rate in order to safely reopen our borders and keep the population of American Samoa safe and free of the deadly COVID-19 virus. American Samoa’s unique cultural and traditional system of governance incorporates our traditional village and matai system. These traditional leaders play a critical role in village life and are instrumental in American Samoa’s response to various emergency events. The support from our traditional leaders were integral to increasing our vaccination rates.

\$100 Incentives (August)

Table 2.8 below illustrates the impact of the \$100 incentive program as over 10,000 doses (combination of 1st& 2nd doses) were administered during the initial \$100 incentive campaign period between August - October. The highest locations were the more populated areas of Tafuna and Pago Pago.

LOCATION	TOTAL COUNT	TOTAL \$	%
Airport	377	\$37,700	4%
Amouli	147	\$14,700	1%
DYWA Pago	3013	\$301,300	30%
EOB	691	\$69,100	7%
Fagaalu	228	\$22,800	2%
Leone	593	\$59,300	6%
Manua	87	\$8,700	1%
DWYA Tafuna	5046	\$504,600	50%
Total	10182	\$1,018,200	100%

Table 2.8: \$100 incentives disbursed

School-based Mass Vaccination Drive (December)

December 2021 School Mass Vaccination Campaign Summary	
Reporting Period:	December 1-31, 2021
Total Disbursed:	\$780,800.00
Total Doses:	7,808

ARPA Project Name: American Samoa Repatriation Program (ASRP)

ARPA FUND AMOUNT: \$16,000,000.00

1.7	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
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Department of Health, Department of Homeland Security, Medicaid Office & Office of the Governor

Timeline for implementation: 0-1 year

In January 2021, planning began for the repatriation of medical referrals, returning residents, and special skill employees from across the Pacific, Hawaii, and the continental US. Due to the high risk of travelers from the US and low vaccination coverage in American Samoa, the local public health and medical community recommended pre-travel quarantine and quarantine upon arrival as the best course of action to protect the community. Such measures would allow for frequent testing and the prevention of active positives from being imported into the Territory as vaccination efforts were barely getting off the ground. Coordination was critical with key public and private sector leaders and support staff in both American Samoa and Hawaii. The ASG Hawaii office took the lead in coordinating operations with the State of Hawaii. This entailed the hiring of adequate Hawaii quarantine and medical staff and securing suitable accommodations for pre-travel quarantine operations. The COVID-19 Task Force coordinated the planning and execution of local operations and payments. The implementation of two concurrent operations presented many unique challenges.

Such challenges included identifying an accurate account of stranded residents, continued outbound flights with departing residents, and the American Samoa Government taking on the task of coordination of charters amid Coronavirus surges and low vaccination rates. This meant determining priority categories for a slew of individual and traveling families, the collection of payments, ensuring travelers were approved medically to fly, and assisting with the fulfillment of immigration and residency requirements.

Commercial Flight Cost Summary

Table 2.5 (see also Appendix M) below provides a summary of the limited commercial flight schedule including total number of passengers, average costs per flight, and costs per passenger. A significant reduction in costs by nearly half of repatriation phase costs were primarily due to the elimination of charter costs and pre-travel quarantine costs in the state of Hawaii.

Flight	Passengers	Cost	Cost per Passenger
1-Sep-13	260	\$ 1,336,075.67	\$ 5,138.75
2-Sep-27	232	\$ 1,336,075.67	\$ 5,758.95
3-Oct-14	278	\$ 1,336,075.67	\$ 4,806.03
4-Nov-01	262	\$ 1,336,075.67	\$ 5,099.53
5-Nov-18	282	\$ 1,336,075.67	\$ 4,737.86
6-Dec-06	253	\$ 1,336,075.67	\$ 5,280.93
15-Dec-21 (Fiji Airways)	89	\$ 240,000.00	\$ 2,696.63
	1655	\$ 8,256,454	

Table 2.5: Commercial Flight Schedule

This program continued on from 2021 to March 2022 and because of the Covid-19 community spread it was reprogrammed and redirected toward the new phase stage for enforcement and monitoring for home isolations and quarantines.

The Department of Homeland Security’s emergency hire personnel transitioned into Home Isolation & Quarantine Monitoring for all individuals and families identified by the Director of Health and the Attorney General with Policy Directives and Guidance for compliance until such time the Department of Health has cleared them from Home Isolation & Quarantine Monitoring. This includes all who have tested positive and their residing family members. The team will assist security, data mapping, reconnaissance and providing mass care (food distribution) logistics to partner agencies as necessary.

Decontamination Services:

Since the activation of the Emergency Operations Center (EOC), the increasing traffic of essential workers and first responders also poses significant risk of transmission. As a recommendation by the Department of Health and the Medical Community, it remains critical to our success the continuing use of decontamination and specialized services within the EOC, Public Safety, LBJTMC, Public Health, and other critical infrastructure during the heightened stage of our public health color-coded matrix.

Repatriation Flight #7

On July 9, 2021 the American Samoa Government’s seventh repatriation charter flight arrived with a total of 254 passengers. According to *Table 1.9* (see also Appendix I) below, all associated costs for this charter were approximately **\$1.8 Million** with the total cost per passenger at \$7,144.15.

EXPENSE BY CATEGORY	REPAT 7
HOTEL	\$ 1,094,487
FOOD	\$ 230,849
TRANSPORTATION	\$ 318,920
DECONTAMINATION SERVICES	\$ 15,575
MEDICAL SERVICES	\$ 132,351
MISCELLANEOUS	\$ 8,306
RENTAL	\$ 14,126
CAPITAL IMPROVEMENTS	\$ -
LEGAL	\$ -
TALOFA PASS	
TOTAL	\$ 1,814,614

Table 1.9: Expense by Category Repat Flight #7

ARPA Project Name: American Samoa Safe Travels Website Design, Development and Deployment

ARPA FUND AMOUNT: \$7,716,000.00

1.3	COVID-19 Contact Tracing
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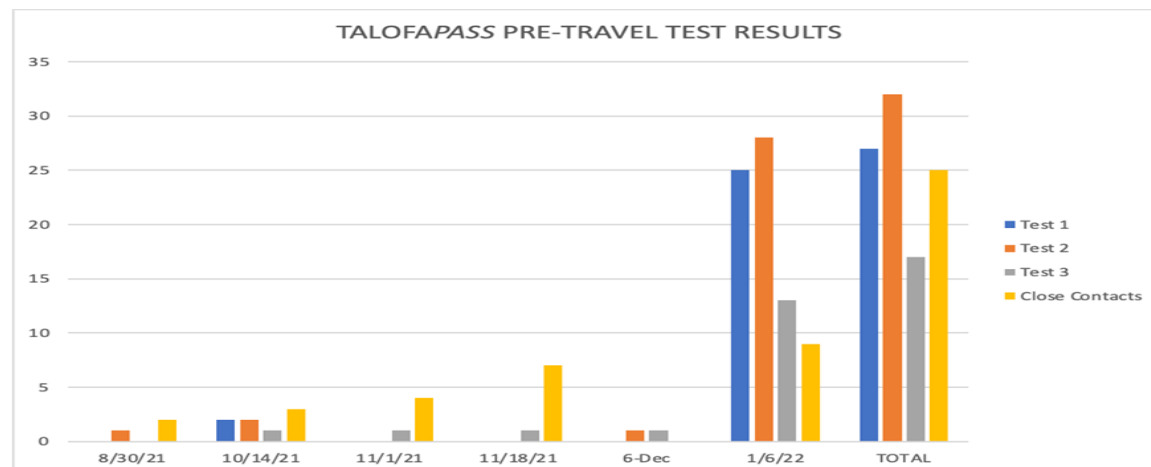
Covid-19 Task Force/Governor Authorized Representative (GAR)

Timeline for implementation: 0-3 months (3-year active contract)

Safe Travels TALOFAPASS System

On July 22, 2021, a one-way outbound medical charter flight was used as a safe travels assessment and pre-test trial for the 3-Test protocols that was being developed for the next phase after repatriation. This effort was part of the government’s planning and designing of the solution to continue flights after July. During this planning phase to resume commercial flights without pre-travel quarantine, careful consideration was given to the testing requirements and quarantine time for fully vaccinated and unvaccinated travelers. Two directors and two Hawaii safe travels consultants traveled on one-way inbound flight to test the 3-test protocols with the HI test center and assess the airport COVID testing protocols and arrivals logistic. The final test flight for the TALOFAPASS system arrived safely on August 30, 2021 with 140 passengers.

The system enables the timely and seamless sharing of information and documents between the traveler and government, as well as between government agencies and other partner entities like the airlines and COVID test sites. In addition, the TALOFAPASS has the capability to capture critical data and test results of passengers to assist with informed decision making. According to Figure 1.3 below, 101 positive travelers and close contacts were detected and prevented from entering the Territory as result of the three-test protocol required before departure in Hawaii.



ARPA Project Name: New Hospital Facility, Fagaalu Hospital Improvements and Expansion, and Enhance Healthcare Workforce Capacity
ARPA FUND AMOUNT: \$300,000,000.00

1.7	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
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Departments: LBJ Hospital Authority, Department of Health, Medicaid Office & Office of the Governor

Timeline for implementation: 2-3 years

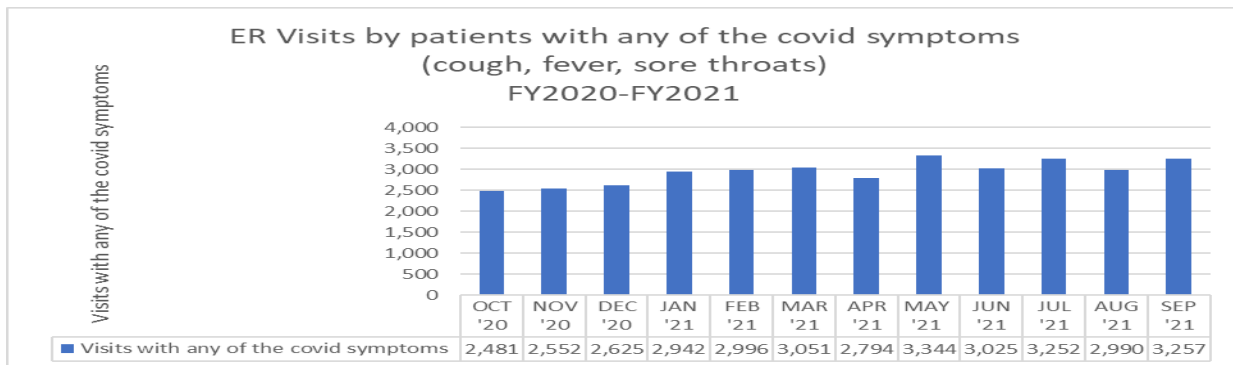


The COVID-19 pandemic highlighted the continued lack of healthcare infrastructure and services in the Territory. LBJ Tropical Medical Center has been American Samoa’s only hospital for many decades and its aging facilities and shortage of necessary equipment played a significant role in the determination to suspend commercial flights to the Territory. The lack of health care capacity was a major risk to the population in general and made worse by the potential impact of COVID-19.

Even without the pandemic, American Samoa would need upgraded medical facilities to properly meet the needs of the people. However, COVID-19 poses such a threat to the community that a new facilities and more comprehensive care is critically necessary.



Our single acute medical facility with only 124 medical beds and 10 ICU beds is dangerously insufficient to address the medical needs of the territory. Investing into a new medical facility and increasing our basic response capacity will provide American Samoa adequate response capabilities.



Currently, there are far less physicians and nurses employed than there should be. Recruitment efforts are typically impacted by the remote location and lower salary offers base on what ASG can afford. The pandemic, though, has worsened this trend as healthcare workers have been in demand across the United States and American Samoa was forced to close its borders to prevent the spread of COVID-19. The people of American Samoa have a higher incidence of non-communicable diseases that make them vulnerable to the effects of COVID-19. Without a properly staffed hospital, it leaves the population at significant risk of severe disease and death should COVID-19 reach American Samoa.

The grant has three (3) main projects as detailed below.

1. **Faga’alu Expansion Project** for \$50,000,000.00. Focuses on improvements at the LBJ Tropical Medical Center which will provide the necessary means to address the

challenges that will be brought forth by the Covid-19 pandemic. The identified areas for this project are vital for LBJTMC to operate in times of emergencies such as the Covid-19 pandemic.

- a. New ICU, MIS, Hyperbaric Treatment Facilities
- b. Central Plant
- c. ER
- d. Dialysis Unit

Upgrading the hospital facility in Faga'alu will provide the necessary means to address the challenges that will be brought forth by the pandemic. The renovation, expansion of proposed services and improvement to the central plant, ER, ICU/MIS/ HB, and Dialysis Unit will better prepare the LBJ-TMC facility to cope with the COVID-19 pandemic. The proposed projects are the forefront services that are directly affected by any spread of COVID-19, so these projects are vital to the LBJ-TMC operation in time of emergencies or COVID-19 pandemic.

2. **The New Hospital / Medical Projects** for \$200,000,000.00 focuses on planned new building improvements at the Tafuna site to include:
 - a. A new 40-bed hospital with appropriate support facilities and services to respond to Covid-19 responses
 - b. Additional service capacity – special services and medical building

New and upgraded medical facilities in Tafuna will provide much needed medical care and increased capacity to serve the residents in American Samoa. A new hospital will address the inequities and access to healthcare for many of the residents of the western side of the island, which is a developing area with increase in population for the territory. These facilities will not only assist in meeting pandemic operational needs as required in ARPA, but also provide more treatment facilities to address underlying conditions that make much of American Samoa vulnerable to the effects of COVID-19.

3. **The Enhance Healthcare Workforce Capacity/Staffing Personnel Project** for \$50,000,000.00 focuses on addressing the following areas:
 - a. Recruitment of Professional Staffing
 - b. Retention of Professional Staffing
 - c. (Re)Training of Professional Staffing

Staffing recruitment, retention and retraining for LBJ Tropical Medical Center workforce is highly critical at this emergency level for American Samoa. Providing adequate facility and support systems to accommodate the public will solve a lot of social issues as well as people trusting the quality of care that they will receive when visiting the LBJ-TMC.

Project Objectives

Project 1 – Faga'alu Expansions to respond to the Covid-19 pandemic

- Provide up-to-date ICU, MIS, ER, Dialysis and HB facilities to respond to the Covid-19 pandemic
- Provide expansion for operations and training
- Provide the consolidation of services to prevent Covid-19 spread throughout the facility lacking sufficient space

- Expand the hospital current cooling and dehumidification capability through increased chiller capacity
- Provide for increased emergency generator capacity in an environmentally protected enclosure
- Expand the ER capacity for exams
- Provide isolation capacity in the waiting and treatment rooms
- Expand the Dialysis treatment capacity
- Increase the Isolation treatment capacity
- Relocate OB/Gyn to accommodate the Dialysis expansion

Project 2 – New 40 Bed-Hospital/Medical Office in Tafuna

- Build a new 40 bed hospital on the western side of the island where the majority of the population lives
- Provide access to care to combat the Covid-19 pandemic
- Expand healthcare service capacity, diagnostic capabilities and treatment protocols in the Territory to respond efficiently for the Covid-19 pandemic
- Harden the healthcare system in the Territory against environmental disasters through diversification of treatment locations
- To support staff in the efforts to provide the highest level of care for the patients

Project 3 – Staffing Recruitment, Retention and (re)Training for both Faga’alu and Tafuna LBJTMC sites

- Improve and strengthen healthcare workers capacity
- Enhance the skillset and knowledge of all staff to provide improved services to the beneficiaries of the hospital as it relates to the Covid-19 and public health emergency response and pandemic
- Improve the access and quality of healthcare services
- Augment medical physicians, providers, nursing, clinical and support staff for both LBJTMC sites (Faga’alu and Tafuna)

The LBJ Tropical Medical Center and American Samoa Government (ASG) intends to allocate funds for this project to address the healthcare system and to build and promote equitable outcomes for the community with capital investments to public facilities, such as the hospital, to improve the response to the COVID-19 pandemic health emergency.

LBJTMC and ASG are considering the following to promote equitable outcomes:

- Enhance and provide more acute care services for the community to respond to the COVID-19 pandemic
- Provide and enhance access to healthcare for all people in American Samoa
- Create and build state-of-the-art health services for the community to serve everyone
- Augment the healthcare professional staffing by recruiting more professionals, retaining current healthcare professionals, and providing professional training for staff

The LBJTMC and ASG are currently in the early stages. More strategies to promote equitable outcomes for individual projects will be forthcoming in future reporting based on the SLFRF program reporting guidance.

Community Engagement

The LBJ Tropical Medical Center and ASG understands it is vital that all stakeholders and community members are included in the decision-making process. Below are some of the strategies that are intended to be conducted throughout the duration of the performance period.

- Set up a public website for accountability, informational, and transparency of LBJTMC sub-recipient ARPA funding
 - Website shall conduct input surveys for residents of American Samoa to submit their ideas on the use of the funding for the hospital
- Utilize evidenced-based community engagement assessment tools (for staff engagement, board engagement, institutional support, community awareness, community voice in hospital)
- Create an email account for the community and stakeholders to send in their suggestions and ideas about the new hospital. (This strategy was utilized before and after the Community Engagement and Stakeholders meeting held at the Lee Auditorium on December 13, 2021)
- Collaboration through information exchanges, sharing resources, for mutual benefit and common purpose
- Networking with different partners, community leaders, NGO, and stakeholders

Labor Practices

The LBJ Tropical Medical Center and ASG are in the early stages of this plan. Labor and workforce practices on any infrastructure projects or capital expenditures will plan to promote effective and efficient delivery of high-quality infrastructure projects. The LBJTMC and ASG are committed to be in compliance with all local and federal requirements for labor practices. This will be evidenced and forthcoming in future reporting.

Use of Evidence

The LBJTMC and ASG are currently in the early stages. Evidence-based interventions and evaluations will be forthcoming in future reporting based on the SLFRF program reporting guidance.

Performance Report

The LBJTMC and ASG are currently in the early stages. Performance management, tracking of goals for these funds as well as measuring results for individual projects will be forthcoming in future reporting based on the SLFRF program reporting guidance.

The LBJTMC and ASG are currently in the early stages. Performance management, tracking of goals for these funds as well as measuring results for individual projects will be forthcoming in future reporting based on the SLFRF program reporting guidance.

ARPA Project Name: Behavioral Health Services & Drug and Alcohol Facility
ARPA Funds: \$24,000,000.00

1.12	Behavioral Health Services	\$24,000,000.00
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Department of Health

Timeline for implementation: 1-2 years

Addressing the increased need for mental health services and treatment has been exacerbated during the public health emergency and border closure. To meet the needs for behavioral Health Care services and treatment exacerbated by the pandemic and respond to other public health impacts. These services include mental health treatment, substance misuse treatment, other behavioral health services, hotlines or warmlines, crisis intervention, overdose prevention, infectious disease prevention, and services or outreach to promote access to physical or behavioral health primary care and preventative medicine.

ARPA Project Name: Village Community Health Centers

ARPA Funds: \$20,000,000.00

1.7	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)	\$20,000,000.00
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AS Department of Health

Timeline to implementation: 1-2 years

To improve access to basic healthcare services in the outer islands and outer villages. The investment in to the Department of Health Community Centers will allow for improved healthcare services in the Manu’a islands, Aunu’u island and the outer villages. Expanding these community centers services strengthens American Samoa’s overall healthcare system. Improving health community centers to facilitate mitigation and prevention efforts for COVID–19 vaccination programs; medical care; testing; contact tracing; support for isolation or quarantine and supports vulnerable populations to access medical or public health services.

ASDOH Community Health Centers have experienced challenges since the onset of the COVID-19 pandemic and more importantly the urgent need for specific infrastructure improvements to further support the department’s COVID-19 mitigation and prevention efforts. Below is a list of projects the ASDOH is seeking funding approval from ARPA.

1. Laboratory Conversion in Tafuna

Key Objectives

Laboratory conversion objectives are:

- addition of a new Polymerase Chain Reaction (PCR) testing room,
- installation of a new HVAC system,
- Installation of 3 new Negative Pressure rooms,
- installation of fire alarm system,
- installation of IT network,
- adding a new COVID-19 testing space,
- purchasing of testing equipment and supplies,
- onboarding of additional staff,
- purchase of vehicles to support administrative and logistical functions of the lab,
- purchase of COVID-19 tests kits, and other office supplies and equipment.

2. Ofu and Olosega Islands Clinic

Key Objectives:

- Design and develop new medical facility and services
- Provide Design concept of proposed new facility
- Identify key response capabilities of the new facility to respond to the COVID-19 pandemic and the public health emergency declaration
- Design to include nurses’ station, COVID-19 testing waiting area, dental, prenatal, well baby, and diabetes clinics

- Design to include: morgue
- Provide relevant design details at this point in the process
- Design to include where applicable to utilize renewable energy solutions
- Design and construction to utilize materials best suited for territory weather conditions
- Design to meet all medical construction requirements
- Design to include adequate parking and green area

3. COVID-19 Administration Building in Tafuna

The scope of this project is for the complete design, permitting and construction of a new two story COVID-19 Administrative Building. This will be the Headquarter office for ASDOH's COVID-19 Clinical Response and the CHC Administration. It will house COVID-19 the leads for the clinical staff and the executive administrators for the CHC COVID-19 Response Team. This will include health information specialists, a conference room for training and COVID-19 Response Team briefings and meetings to the COVID-19 pandemic.

4. Aunu'u Island Community Health Clinic

The project entails building a CHC for the people of Aunu'u. The CHC will be fully equipped with medical personnel, equipment, and supplies to address the healthcare needs of Aunu'u residents and solidify the ASDOH response to the COVID-19 Public Health emergencies. The proposed site planned for the Aunu'u CHC is situated on the island of Aunu'u, about one mile from the pier to Auasi.

5. Tau Island Community Health Clinic & Fitiuta Medical Services Expansion

The Ta'u CHC is a new construction due to the relocation of the existing Ta'u CHC from the unsafe Tsunami zone to a new higher location in the hills of Ta'u village. This new Clinic will include new housing facilities for the residence doctor and visiting nurses and various health programs. It will include all of the necessary clinic requirements for a standalone CHC on the Island. It will also include an isolation holding facility for COVID-19 patients. The facility will be equipped with the latest Health Clinic furniture and equipment. An emergency generator (requirement for all clinics) will be provided for the facility with a paved parking lot with ample parking spaces on site for the community. This facility will be ADA accessible.

Fitiuta Medical services expansion will allow for the renovation of the Fitiuta airport to include a medevac holding station that will be equipped with an assessment or triage station, a physician's office, and a two-chair dialysis room for patients requiring urgent dialysis treatment

6. Aunuu & Manu'a Medical Vessel

To custom build a COVID-19 critical patient medevac, safe transport of COVID-19 vaccines, moving medical supplies and staff from Aunuu and the Manu'a islands to LBJ Hospital on Tutuila at any given time an emergency arises. As mentioned, this vessel will be utilized to transport COVID-19 vaccines, medical supplies and medical personnel

at any given time during the outbreak. Currently, the CHC charters the Samoa Airways flights. Each month there are an average of five or more chartered flights transporting critical patients from the Manu'a islands to Tutuila for medical care at LBJ hospital. Chartered flights cost the department \$3,000 per flight. For the island of Aunuu, the residents must travel through the Auasi channel to the main island of Tutuila for health care services at the Amouli Health Center or travel onward to the main hospital LBJ Tropical Medical Center. This medical evacuation vessel will be utilized to transport critical patients directly from Aunuu to Fagaalu where the Emergency Medical Services will await the patient's arrival to be taken to the LBJ Emergency Room.

7. Tafuna Health Center Expansion

The ASDOH CHC would like to request funding to expand the existing TFHC by adding a second floor providing additional space for the Pediatric/Well-Baby, Prenatal/Women's, Primary, and Dental Clinics. The current administrative offices will be converted to additional clinic space for the Pediatric/Well-Baby, Prenatal/Women's, Primary, and Dental Clinics. The pediatric or children's clinic is the busiest clinic at the CHC conducting the highest number of visits during regular service hours. In addition, this clinic serves a very vulnerable population including infants and young children. Since the Emergency declaration was issued in March 2020, clinic services were scaled down and the CHC experienced a great setback in the provision of routine services in all its clinics. As the COVID-19 response level was elevated, the CHC had to halt most of its clinic routine services. The additional patient space will promote COVID-19 safety precautions such as safe distancing, minimizing the number of people in enclosed spaces, to prevent possible transmission of COVID-19 in the clinic/patient areas.

ARPA Project Name: Non-profit Assistance Program (NAP)
ARPA Funds: \$4,500,000.00

EC 2.34	Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)	\$4,500,000.00

AS Criminal Justice Planning Agency
Timeline to implementation: 3 months to 18 months

Overview

Providing SLFRF funding for non-profit organizations that have seen a significant drop in donations and contributions to fund their humanitarian work. The CJPA will award grant funds to nonprofit organizations that meet all qualifications and can provide proof of need by the community of their services and products. The applications and proposals submitted by said nonprofit organizations will help to determine what their needs are and how to operate despite COVID-19. The funding granted is to support the nonprofit organizations to revert back to normal operations or enhanced operations in the face of the pandemic.

Project Objectives

- Determine nonprofit organizations with 501(c)(3) tax exempt status with registered articles of incorporation at the Territorial Registrar’s Office
- Identify said nonprofit organizations that provide services and/or products that are needed in the community that have been negatively impacted by COVID-19
- Determine how much of grant funds to award to nonprofit organizations depending on grant proposals and support documentation
- Verify that these nonprofit organizations have the capacity to carry out usage of grant funds for their needs to return to normal operations or enhance their services to the community

ARPA Project Name: Business Recovery Capital Program (BRCP) - Revolving Line of Credit and BRCP Grants

ARPA Funds: Combined \$10,000,000.00

2.29	Loans or Grants to Mitigate Financial Hardship	\$10,000,000.00
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Department of Commerce

Timeline to implementation: 3 months to 1 year

Small to medium size businesses are the lifeline of our island’s isolated economy and is a key to the Territory’s economic livelihood. Thus, any help we can provide expediently will help our response to the global COVID 19 pandemic restrictions. The ARPA BRCP programs offered and managed by DOC. The first one offered in December 2021 was the \$5 million followed by \$4 million in grants (March 2022). They are all in response to the negative impact of the pandemic on the local economy and businesses. The importance of strengthening and expanding our businesses is the goal and any assistance from ASG is welcomed by the business community.

Project Objective: Support recovery and expansionary efforts of local businesses that were affected by the COVID restrictions. Due to lack of capital access, the businesses are considered the most underserved areas in our community.

Expenditure Category 2.29	Project Name
Revolving Lines of Credit (\$50k to \$500k)	ARPA BRCP RLOC
Grants (up to \$25k)	ARPA BRCP Grants

BRCP RLOC

After numerous outreach programs explaining the ARPA BRCP RLOC program, the program was launched early 2022. The total allocated budget is \$5 million with approved amounts ranging from \$50k to \$500k. However, only 2 clients got the maximum as they needed it for bulk cement orders that were affected by supply and shipping issues. All facilities are for one year due on demand. It could be renewed if the lending need is still warranted and clients comply with a 30-day cleanup period.

The list of eligible clients includes building suppliers, contractors, restaurants, retail stores and wholesalers. The deadline for availability is the end of July. With the pending log of applicants, the program will have unused/available amounts which may be re-allocated to Grants (in order to finish up that program).

ARPA BRCP GRANTS

This program was launched in February, 2022. It went some early changes and finally offered as grants only up to \$25,000. The allocated budget is \$4 million. If fully disbursed at \$25,000, the total number to be accommodated is 160.

ARPA Project Name: New Seaport Facilities, Pago Pago International Airport Terminal Building Reconstruction, New Inter-Island Transportation
ARPA Funds: Combined \$40,000,000.00

1.7	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)	\$40,000,000.00
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AS Department of Port Authority

Timeline to implementation: 6 months to 18 months

The use of the ARPA funding has been earmarked to strengthening the maritime and air transportation systems, primarily because American Samoa is an island nation and is heavily reliant on the sea and air for the movement of cargo, and passengers. The disruptions in maritime shipping and air travel caused by COVID-19 not only created a shortage of imported supplies, but it also further isolated the Territory from the rest of the world. The approved projects are aimed to allow for better recovery from the effects of COVID-19, and for enhanced sustainability prior to, during and after major adverse events.

American Samoa is a disadvantaged and disproportionately impacted territory. The capital projects listed in this report are aimed towards making necessary infrastructure and transportation improvements that will have positive economic and social impacts on the island’s entire population of nearly 50,000 residents. The projects are designed to ensure that the Ports have sustainable infrastructure to recover from the pandemic and to increase economic productivity for the years to come.

Strategies include:

- Providing stability to the port and airport infrastructure to ensure continuity of transportation services and systems to and from American Samoa;
- Placing focus on projects that directly mitigates Covid-19 public health challenges and negative impacts due to Covid-19 pandemic and delays in the movement of cargo and passengers;
- Minimizing the negative COVID-19 impacts to sea and air transportation systems and provide effective, efficient, and equitable outcomes.
- Providing transportation infrastructure strategies to support the recovery of government and private sectors from the negative impacts caused by COVID-19.
- Mitigating the impact of uncertainties of shipping and air travel brought about by the pandemic and economic downturn.
- Providing seaport and airport users and community at large with the proper facilities and systems that accommodate the health and safety measures in line with CDC and the ASG Department of Health guidelines.

Performance Report:

<u>Project Name</u>	<u>Project Status</u>	<u>Cost</u>	<u>Description</u>	<u>Use of Evidence</u>
New Seaport Facilities SLFRF-T-A21003-2022	5%, Demolition to begin 07/18/22, Design RFP Contract currently under evaluation	\$20,000,000.00	Expand and improve seaport facilities. An upgraded seaport facility will not only address the public health impacts of the pandemic but will ensure the ability to maintain operations that are essential to all commercial activity on island. The proposed projects will accommodate for social distancing and quarantine measures that will be able to better receive ships and crews thereby reducing delays and disruptions. The new layout of the ASG facilities will also ensure adequate space between inspection bays, to ensure inspections and flow of goods are not interrupted.	When a contract(s) is developed for this ARPA project, evidence-based outcomes will be included per the reporting requirements.
New Airport Facilities SLFRF-T-A21002-2022	Not yet started; Design RFP Contract evaluations in progress	\$15,000,000.00	The Airport Upgrade Project will make necessary adjustments to the facilities that will allow for the better flow of travelers and public health related safety measures. Each part of the project is designed to specifically address the spatial requirements for social distancing. The Vehicle Canopies also address public health issues by allowing access to emergency vehicles at the airport. This is an important part of the public health response.	When a contract(s) is developed for this ARPA project, evidence-based outcomes will be included per the reporting requirements

<p>New Inter-Island Transportation Program SLFRF-T-A21003-2022</p>	<p>20% Complete, 2 tugboats purchase in progress</p>	<p>\$6,500,000.00</p>	<p>For the proposed use, transportation is an essential aspect of business operations in Manu'a and overall economic development. American Samoa has a limited number of vessels that can adequately navigate the wharfs in these islands. The islands are remote and difficult to access, an issue that was exacerbated by the pandemic and highlighted the need for adequate transportation for goods and services to a population dependent on imports. The project funds will go toward the procurement of 2 tugboats and 2 Landing Craft Units</p>	<p>When a contract is developed for this ARPA project, evidence-based outcomes will be included per the reporting requirements</p>
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ARPA Project Name: DBAS MAOTA Affordable Loan Project (DBAS MALP)

2.15	Long-term Housing Security: Affordable Housing	\$8,000,000.00
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AS Development Bank of American Samoa

Timeline to implementation: 3 months to 1 year

Implementing the AHLP will provide high-quality primary residence living units in a safe and healthy environment in Manu’a, Eastern Tutuila, and Western Tutuila Districts in three years collaborating with various government and private agencies stakeholders. Further, the AHLP will be a timely and proportional response to the COVID-19 health emergency and its negative impact. Hence, DBAS developed the *DBAS MAOTA Affordable Loan Project (DBAS MALP)* to build new single-family housing units and renovate existing home structures. MAOTA stands for “Malū Apitaga O Tagata Amerika Samoa”, which translates into secure and safe homes for the people of American Samoa.

The DBAS MALP will achieve the following goals and objectives as listed in the American Rescue Plan Act.

- To develop viable communities by providing decent and affordable homes for low-income families or households.
- To create and increase a suitable living environment within the community.
- To expand economic development opportunities primarily for persons of low and moderate-income.
- To increase the number of quality affordable homes across the Territory.

The following is the funding breakdown of the DBAS MALP: ninety percent of the funds to perform new construction and renovation throughout the territory, while ten percent is set aside for administrative costs. For continuation of the DBAS MALP Project, DBAS will continue to charge 10% of program income annually after three years to ensure sustainability of this revolving home loan fund.

10% DBAS Administrative Cost	\$800,000.00
The breakdown of the 90% (\$7,200,000.00) is as follows:	
25% Manu’a District (New Home & Renovations)	\$1,800,000.00
75% Tutuila (Renovations)	\$1,620,000.00
Tutuila Western District (New Home Construction)	\$1,890,000.00
Tutuila Eastern District (New Home Construction)	\$1,890,000.00
Total	\$7,200,000.00
Grand Total	\$8,000,000.00

ARPA AHLP funds are allocated to develop DBAS MALP in the form of an affordable interest-bearing loan to construct new single-family-owner occupied units and renovate existing structures. An affordable equitable interest rate will be charged as follows:

Low-income	1.0%
Moderate-income	2.0%

To determine a potential DBAS MALP loan borrower’s income eligibility, DBAS will use the income limits as provided by the U.S. Treasury based on the definitions of low-income and moderate-income households. Upon the recommendation from the ARPA Oversight Office,

DBAS adopts the following calculations as exemplified by Buffalo County, South Dakota, using the Tool for Determining Low- and Moderate-Income thresholds to determine income eligibility (U.S. Treasury, n.d.) of families and households in American Samoa.

Performance Report

Starting to implement the DBAS MALP, DBAs accomplished the following:

- Initiated *Community Engagement Plan*: Published the Notice of Funding Availability (NOFA) and application requirements online and in local newspaper, television, and radio on June 13, 2022
- Conducted general public meetings with residents of Tutuila on June 21, 2022 at the Lee Auditorium, Pago Pago, American Samoa; 118 members of the community attended.
- Conducted general meetings with the residents of Manu'a on June 23, 2022 at EOB Ta'u with nine members of the community; on June 24, 2022 at the CCCAS Fitiuta Hall with five members of the community; and on June 25, 2022 at Siua'i Guest House, Faleasao with 16 members of the community.

ARPA Project Name: Broadband iNEI Initiative

ARPA Funds: \$10,000,000.00

EC 5.21	Broadband: Other projects	\$10,000,000.00
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AS Department of Commerce

Timeline to implementation: 6 months to 18 months

Developing and expanding the territory’s bandwidth capacity and connectivity are crucial components to responding to the COVID-19 pandemic and pour public health emergency declaration.

Improving upload and download speed is critical for educational and commercial purposes. The outer villages and outer islands are already susceptible to frequent connectivity interruptions, improving internet capabilities through the local service providers will provide the connectivity foundation needed to effectively respond to the mitigation and prevention protocols.

Project Objectives:

Support projects that will increase internet broadband speeds of up to 100/100 Mbps; to improve broadband services to the most underserved areas in our community; to make internet rates affordable for the most underserved in our community.

Projects accomplishments over this reporting period.

- Application submission window closed May 31, 2022
- Application review panel has completed its review of the 3 applications received and have made final recommendations
- DOC is referring to ARPA legal counsel for legal review of award documents

ARPA Project Name: ASPA Water System Improvement Projects

ARPA Funds: \$20,000,000.00

5.11	Drinking Water: Transmission & Distribution	\$20,000,000.00
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ASPA

Timeline to implementation: 6 months to 1 year

The current approach for ASPA utilizing the SLFRF is to ensure the funds are spent in a broad-based manner so the greatest numbers of residents are benefited. This approach will be used by providing area residents with a safe and clean drinking water that is highly accessible and designed to serve the largest number of residents possible. ASPA also worked with community partners to assist the most at risk residents. Further, any future program design will prioritize ease of navigation, accessibility, and administrative simplification. This will make sure SLFRF are delivered quickly and efficiently while minimizing bureaucratic hurdles.

Performance Report

The projects awarded to the American Samoa Power Authority under the *Water, sewer, and broadband infrastructure (EC 5) of the American Rescue Plan Act (ARPA) for Water Transmission Projects* include the following;

- a. Replacing several miles of deteriorating Asbestos-cement (AC), Cast Iron (CI) and High Density Polyethylene (HDPE) Pipe with new Polyvinyl Chloride (PVC) Pipe (majority of the ASPA projects)
- b. The exploration drilling and connecting of new wells,
- c. The rehabilitation of welded steel tanks and
- d. The reduction of water salinity within the Eastside villages of Tutuila using RO technology.

The list below are the approved Recovery Plan Project that had public hearings so the residents had the opportunity to see a full list of expenditure proposed;

List of \$20M ARPA Award for ASPA Water System Improvement Projects

1. ACP Replacement (Tafuna)	\$4,000,000
2. ACP Replacement (Pago)	\$2,000,000
3. ACP Replacement (Aua)	\$3,500,000
4. CIP Replacement (Pago Hillside)	\$2,500,000
5. ACP Replacement Airport Loop (Tafuna)	\$1,500,000
6. Well Exploration Drilling and Connection (Tutuila)	\$2,000,000
7. HDPE Pipe Replacement (Tualauta)	\$2,000,000
8. Rehabilitation of Welded Steel Tanks (Tutuila)	\$1,500,000
9. Water Salinity Reduction (East Side Tutuila, Aunuu)	\$1,000,000

Project: ACP Replacement (Tafuna)

Funding Amount: \$4,000,000.00

Project Status

- 06.30.22 - Design in progress
- 05.11.22 - Land Use Permit in progress.

- 05.10.22 - Section 106 in progress with ASPA Archaeology

Project Accomplishments

- N/A

Performance Challenges

- N/A

Performance Quarterly Goals

- Complete Bid Documents for RFP (construction) and RFQ (Material Supply)
- Complete Land Use Permits

Project: ACP Replacement (Pago)

Funding Amount: \$2,000,000.00

Project Status

- Design is pending completion.
 - Land Use Permits are in process

Project Accomplishments

- Design and Engineering is in progress.

Performance Challenges

- Covid-19 Pandemic has caused delays in meeting for procurement process
- Shipping delays

Performance Quarterly Goals

- Complete Procurement Process
- Award Contracted for Material
- Complete Land Use Permits

Project: ACP Replacement (Aua)

Funding Amount: \$3,500,000.00

Project Status

- Design in progress
- Permitting on process

Project Accomplishments

- Design in progress and on task

Performance Challenges

- Covid-19 pandemic delay the progress of the design

Performance Quarterly Goals

- To complete the design and specs requirement
- To complete the permitting task
- To advertise the RFP of the project

Project: Cast Iron Pipe Replacement (Pago Hillside)

Funding Amount: \$2,500,000.00

Project Status

- 06.28.22 - RFP Design Phase sent to ASPA Procurement for advertisement.
- 06.15.22 - Land Use Permit in progress.
- 05.26.22 - Section 106 in progress with ASPA Archaeology.
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Project Accomplishments

- N/A

Performance Challenges

- N/A

Performance Quarterly Goals

- Project Design Phase Complete
- QC on A&E Firm/Contractor work performance to be satisfactory.

Project: ACP Replacement Airport Loop Tafuna

Funding Amount: \$1,500,000.00

Project Status

- Permitting and design is on progress

Project Accomplishments

- N/A

Performance Challenges

- N/A

Performance Quarterly Goals

- Design Phase to replace existing AC Pipe completed.

Project: Well Exploration Drilling and Connection

Funding Amount: \$ 2,000,000.00

Project Status

- Land Use Permits are in progress

Project Accomplishments

- N/A

Performance Challenges

- N/A

Performance Quarterly Goals

- Complete Land Use Permits
- Complete drilling and connection of at least a few new wells

Project: HDPE Pipe Replacement Phase III Tualauta

Funding Amount: \$ 2,000,000.00

Project Status

- Design in progress
- Permitting in progress

Project Accomplishments

- Design in progress not part of this funding

Performance Challenges

- Covid-19 Pandemic has caused delays design Process

Performance Quarterly Goals

- To Complete Design and Specs requirement
- To Complete permitting task
- To Advertise the RFP

Project: Rehabilitation of Existing Welded Steel Tanks

Funding Amount: \$1,500,000.00

Project Status

- Request for Proposals (RFP) was issued on May 13, 2022
- RFP for this project closed on 6/15/2022.
- Completed Request for Proposal Forms
- Advertising Proposals
- The source evaluation board (SEB) is now reviewing bid submittals.
- Land Use Permits are in process

Project Accomplishments

- Successfully Advertised the Request for Proposals
- Source Evaluation Members have been selected and had initial meeting

Performance Challenges

- Covid-19 Pandemic has caused delays in meeting for procurement process
- Shipping delays
- Nationwide Delays in finding vendors for procuring supplies and materials

Performance Quarterly Goals

- Complete Procurement Process

- Award Contracted for Material
- Complete Land Use Permits

Project: Water Salinity Reduction Project

Funding Amount: \$1,000,000.00

Project Status

- Planning and Design is in progress.

Project Accomplishments

- N/A

Performance Challenges

- N/A

Performance Quarterly Goals

- Complete Permitting

ARPA Project Name: ARPA Cash Assistance Program (CAP) for Impacted Non-Profit Workers

ARPA Funds: \$500,000.00

2.9	Unemployment Benefits or Cash Assistance to Unemployed Workers	\$500,000.00
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AS Department of Human Resources

Timeline to implementation: 0-2 month

American Samoa was hit with Covid-19 community transmission on February 22, 2022, which prompted immediate shutdown of all government operations and businesses except essential services. Governor Lemanu issued an emergency public declaration and imposed Code Red restrictions. The shutdown and restrictions caused disruptions to normal business operations and negatively impacted the private sector community including non-profit organizations. Their employees have faced financial challenges because of reduced work hours and loss of income.

The attached expenditure report reflects the actual number of claimants for non-profit organizations that have applied for assistance during this quarter.

ARPA CAP UNEMPLOYMENT

ACCOUNT STATUS

	(A) TOTAL	(B) TOTAL	(C) TOTAL	(D) TOTAL	€ TOTAL	(F=A-B-D) TOTAL
Non-Profits	<u>CLAIMS</u>	<u>PD</u> <u>CLAIMS</u>	<u>PD AMT</u>	<u>ENC.</u> <u>CLAIMS</u>	<u>ENC. AMT</u>	<u>PENDING</u> <u>CLAIMS</u>
1 HOPE HOUSE	17	0	\$0	0		17
2 HOLY FAMILY PARISH	2	0	\$0	0		2
3 PACIFIC HORIZONS	8	0	\$0	0		8
4 TONGAN MARKET	3	0	\$0	0		3
5 ALEGA PRESERATION	1	0	\$0	0		1
6 HAPPY HOUSE DAYCARE	1	0	\$0	0		1
7 HARBOR LIGHTS PIANO	2	0	\$0	0		2
8 CANCER COALITION	4	0	\$0	0		4
9 SOUTH PAC. ACADEMY	2	0	\$0	0		2
10 SOUTH PAC. WATER	1	0	\$0	0		1
11 WORKING MAMA'S	1	0	\$0	0		1
12 DIOCESE OF SAMOA	5	0	\$0	0		5
13 LDS	1	0	\$0	0		1

14	LITTLE ANGELS DAYCARE	1	0	\$0	0		1
		49					49

The project was opened for intake on June 28, 2022 after the media advertisements on the local KVZK television and the KSBS Radio station broadcasted this program.

Due to the Emergency Declaration and shutdown for the Territory, this program will assist many of the employees for the non-profit organizations who were impacted during the period of February 22 to April 18, 2022.

ARPA Project Name: Public Buildings CDC Compliance Program
ARPA Funds: \$12,000,000.00

EC 1.4	Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, Child care facilities, etc.)	\$12,000,000.00
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American Samoa ARPA Oversight Office
Timeline to implementation: 1-4 months

The COVID-19 pandemic highlighted the importance of social distancing measures as well as ensuring public spaces are well-ventilated and maintained. American Samoa, like many other jurisdictions, implemented many different policies to ensure that social distancing is effectively practiced.

In practice, however, it has become clear that many of ASG’s buildings are in need of improvements or new facilities to meet pandemic operational needs. Improvements to the buildings or new construction to replace facilities that are incapable of meeting these needs are necessary for public health and safety. This is particularly true with the updated guidance from the CDC.

Total of 10 applicants were approved for this award. A portion of this award will also be made available to ASG agencies and departments for emergency response to address their immediate needs during the Covid-19 pandemic for a safe working environment.

ARPA Project Name: ARPA Oversight Office Administration program
ARPA Funds: \$3,754,000.00

7.1	Administrative Expenses	\$3,754,000.00
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American Samoa ARPA Oversight Office
Timeline to implementation: Program Launched

The ARPA Oversight Office administrative program will support the effective and transparent use of ARPA funds in American Samoa. Having adequate review and oversight for these funds are fundamental to fiscal responsibility and accountability. The ARPA Oversight Office administration program will provide the leadership in the American Samoa Government guidance and advise as to determining eligibility of various programs and projects and to work with key community stakeholders to develop a territorial ARPA Recovery Plan that serves all the residents of American Samoa.

The ARPA Oversight Office will also be responsible for all SLFRF compliance and reporting requirements.

Vision Statement the American Rescue Plan Act (ARPA) Oversight Office will oversee the implementation, disbursement and execution of all ARPA funds as prescribed in the American Rescue Plan Act to address the impact to the Territory and its residents as a result of the COVID-19 pandemic and the Public Health Emergency.

Mission Statement To ensure full compliance with all statutory requirements for the eligible use of ARPA funds as prescribed in the American Rescue Plan Act. To ensure all ARPA funded projects are implemented with transparency and accountability. To ensure compliance with all public health emergency measures and to protect the people of American Samoa.

Guiding Principles & Objectives:

- Adherence to all ARPA statutory requirements
- Improve healthcare access and services for our People and Territory
- Address key eligible infrastructure needs
- Improve negatively impacted economic needs territory-wide
- Develop sound financial and program oversight procedures
- Ensure transparency and accountability for all ARPA funds