

McLennan County, Texas
Recovery Plan

**State and Local Fiscal Recovery
Funds**

July 1, 2021 – June 30, 2022

McLennan County
July 1, 2021 – June 30, 2022 Recovery Plan

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GENERAL OVERVIEW – EXECUTIVE SUMMARY

In response to the COVID-19 pandemic, the federal government created the State and Local Fiscal Recovery Fund (SLFRF) to address the economic fallout and lay the foundation for a strong and equitable recovery. The total grant allocated to the County is \$49,846,009, to be received in two payments over a period of two years.

Per Treasury guidance, the Recovery Plan Performance Report provides the public and Treasury information on the projects that recipients are undertaking with program funding and how they are planning to ensure program outcomes are achieved in the effective, efficient, and equitable manner. McLennan County will update this report in the following years including key performance indicators and some mandatory indicators identified by Treasury. The Recovery Report will grow each year, as the County increases its spending, projects, reporting, and becomes more educated on the extent of reporting required.

The County has identified key areas on which to focus expenditure of the SLFRF funds. These areas include: public health, behavioral health, water infrastructure, aid to non-profits that provide services to the community and who have suffered revenue loss, aid to small businesses, etc. The McLennan County Commissioners Court is determined to ensure the resources provided through the SLFRF are expended in the most effective, efficient, and equitable manner possible. Most of the initial spending relates to public health and welfare.

Uses of Funds

The American Rescue Plan Act (ARPA), through the State and Local Fiscal Recovery Fund (SLFRF), has provided local governments with resources to respond to the negative effects of the COVID-19 pandemic and ensure a strong and equitable economic recovery.

The McLennan County Commissioners Court, through public hearings, work sessions, feedback and discussion with other community leaders, has analyzed the negative economic impacts within the County caused by COVID-19 and has created its American Rescue Plan Act (“ARPA”) Spending Plan. The purpose of this plan is to 1) indicate projects that are funded or are proposed to be part of the County’s Spending Plan, 2) provide information on the procedure for requesting grant funds for Non-County projects (Non-County projects are projects that address other than County buildings and County operations); and 3) provide factors that will guide the County in its decisions on spending the grant funds for Non-County projects.

The County has chosen to focus on priority areas to receive funding. These priority areas focus on public health, behavioral health, water infrastructure, assistance to non-profits that provide services to the community with an emphasis on serving the underserved, assistance to historically underutilized small businesses, and child welfare. All of these areas have either had a negative impact or have been identified as having a lack of resources caused by COVID-19.

a. Public Health (EC 1)

- McLennan County has coordinated several projects to promote testing, vaccinations, and public health. While these projects have been funded by other programs such as CARES they are important to include to provide a broader context on the overall approach for pandemic recovery.
- McLennan County has provided funding to 2 public health/behavioral health projects.
 - **Waco Family Medicine** - This project is being used to assist Waco Family Medicine in the construction of a new main clinic facility for primary care, mental health, oral health and health care professional training. The clinic will address pandemic operational needs, COVID-19 mitigation measures, the ability to respond to the COVID-19 health emergency, and the ability to safely serve the underserved and most vulnerable at an expanded level. Income limits apply so that those served are the economically disadvantaged. For example, Waco Family Medicine serves a culturally diverse patient population, with 80% of its patients living at or below the Federal Poverty Line. Demographics of its patient population are:

43.9% Hispanic, 25.9% White, 23.6% African-American, 1.25% Asian/Pacific Islander.
 - **Heart of Texas Region MHMR** - This project is being used to assist Heart of Texas MHMR in the construction of a public mental and behavioral health facility, which will be a one-stop location for multiple mental health services. The mental health facility will address pandemic operational

needs, COVID-19 mitigation measures, the ability to respond to the COVID-19 health emergency, expanded provisions of mental and behavioral health services to the disadvantaged, and will address the negative impacts of COVID-19, especially to the disadvantaged as it primarily serves the poor and indigent regardless of their ability to pay.

- **McLennan County**

- **Operational** - The County has expended funds for the purchase of PPE, cleaning/sanitizing Courtrooms and facilities, providing security at an off campus facility rented to hold jury calls/trials and overtime for nurses assisting in Covid testing for County employees.
- **Facilities** – This project is being used to focus on enhancing County facilities and technology to ensure safe and healthy operations within its public safety and judicial functions.
 - This Project would allow the County to upgrade its existing HVAC units to newer units that allow the introduction of outside air into the facilities. Introduction of outside air would allow for better ventilation and better air quality in congregate settings, such as courtrooms and jails. The County's current units range from 10-18 years in age and do not have this capability. As an example, the historic McLennan County Courthouse was constructed in 1902. Its hallways are not air conditioned/heated.
 - Air Purification Units. These units utilize proprietary technology shown to be highly effective in disabling the virus that causes COVID-19. Units would be deployed at jail(s), court facilities, high traffic areas like the Tax Office, etc.

- **Bridge of Souls** - was a temporary public art installation during Waco's popular riverside Cultural Arts Festival during October 2021. It honored the 568 (and rising) people from our community who had died from COVID-19. A mobile free vaccination clinic was made available at the festival on October 15, 16, and 17, 2021. The availability of the mobile free vaccination clinic was marketed as part of the Festival marketing leading up to the festival, and at the site of the art installation. During that same period, the Heart of Texas Region MHMR had a presence at the festival to provide counseling and to connect people with mental health resources in our community. The availability of mental health services in the community was also marketed at the art installation site. For the ceremony, mental health workers were present to assist families and medical providers, and to connect people with mental health resources in our community.

- **See also Cenikor under section b. Negative Economic Impacts (EC 2)**

b. Negative Economic Impacts (EC 2)

- In April 2020, at beginning of the pandemic, McLennan County and the City of Waco used local (non-federal) funds from the Waco McLennan County Economic Development Corporation to create a Small Business Recovery Fund that helped

numerous local businesses. It is important to note this program to show the County's overall approach to pandemic recovery.

- **Cen-Tex Minority Business Equity Fund** – This project is being used to assist minority-owned businesses in rebounding from the downturn in business caused by the COVID-19 pandemic by providing capital through its Cen-Tex Minority Equity Fund to better the business and sustain its existence. This does not include payments for lost profits. The funds must be used to enhance the business, increase inventory, add space, or otherwise assist in the business's recovery.
- **Cenikor** - Project is a renovation project to better serve clients in need of substance abuse treatment and to address increased costs caused by the pandemic. Cenikor's Waco facility saw an increase in the cost of care per client by 23% and the clients stayed longer. These increased expenses are attributed to the preventative Covid-19 measures that Cenikor made to ensure that clients and staff remain safe and to ensure that positive case clients were safe and still treated for their addiction.
- **Friends for Life** - The pandemic has interfered with normal fundraising and has increased costs, creating significant fiscal harm to the Friends for Life. In addition, Friends for Life lost 70% of its adult day care revenue and 100% of its Life Skills program revenue for about a year due to the pandemic. Grant funds will be used for the following programs:
 - Adult Day Care
 - Money Management
 - Guardianship
 - Life Skills
 - Independent Living
 - Quality of Life - Friends For Thanksgiving, Adopt -A- Grandparent, etc.
- **Greater Waco Sports Commission** - The Greater Waco Sports Commission seeks to encourage and develop local, healthful amateur sports and activities, while at the same time bringing in bigger competitions for qualified locals to participate in, and for others to enjoy watching in the fresh air of the outdoors. Beneficiary operates from 1) donations; and 2) revenue raised by the events. Unfortunately, the pandemic forced the cancellation of several events/benefits which caused the Beneficiary to lose a significant of revenue amount based on past events. These losses have hurt Beneficiary's ability to plan and stage new events and to provide for local competition, leagues, and spectator sports.
- **Meals on Wheels** – Covid has led to an increase in the number of meals delivered and to the number of seniors on their waitlist. In addition, it has increased the cost of providing the service. As the demand has gone up, funding has been negatively impacted due to Covid. This project will feed 64 seniors for one year.
- **Trinity Sports** - Utilizing grant funds for needed repairs to Trinity Sport's facility to assist in providing educational and recreational opportunities for underserved, low income children. This includes a meals program. The Beneficiary has not been able to

conduct fundraisers because of the pandemic, and operational costs have increased because of the pandemic. In addition, the condition of the building was inherited, and the plan for a meals service for the underserved requires significant work.

- **Volunteer Fire Departments – 501(c)(3)s** - Beneficiaries are non-profit corporations and 501(c)(3) corporations. The County is authorized to provide fire protection in the unincorporated areas of the County. It does this by contracting for fire protection services with multiple Volunteer Fire Departments, the Beneficiaries, which provide, in effect, a government service. Volunteer Fire Departments depend on fundraisers to keep themselves fiscally healthy and able to keep equipment maintained and members trained. During the COVID-19 Pandemic, fundraising could not be conducted resulting in losses.

c. Services to Disproportionately Impacted Communities (EC 3)

- McLennan County has partnered with the Economic Opportunities Advancement Corporation of Waco to provide rental and utility assistance to impacted citizens. Funds for this program are being provided by the Emergency Rental Assistance program 1 included in the Consolidated Appropriations Act of 2021 and by the Emergency Rental Assistance Program 2 included in the American Rescue Plan Act. Again, while this funding is not included in SLFRF, it is important to include it to show McLennan County's overall approach to pandemic recovery.
- **See also Waco Family Medicine and Heart of Texas Region MHMR under section a. Public Health (EC1)**
- **See also Cen-Tex Minority Business Equity Fund, Cenikor, Friends for Life, Meals on Wheels, and Trinity Sports under section b. Negative Economic Impacts (EC 2)**

d. Premium Pay (EC 4)

- McLennan County has not offered premium pay and it is not being considered at this time.

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

- McLennan County has engaged Lockwood, Andrews and Newnam as a consultant to assist the County in developing a list of infrastructure-related projects that will meet the requirements and allowable uses for funding through the American Recovery Plan Act (ARPA). This will be primarily to address arsenic levels in drinking water that exceed Environmental Protection Agency limits, to increase the availability of drinking water, and better water quality.
- **Tehuacana Creek** - Baseline Water Quality and Environmental Health Survey of NRCS Reservoir 19 - The purpose of the project is to characterize baseline water quality and environmental health in NRCS Reservoir 19 located northeast of Waco in Hill County. Baseline water quality and environmental information will be used to evaluate causes of water quality and environmental changes resulting from

construction of an adjacent municipal landfill. This landfill is proposed to be constructed north of the reservoir between Horse and Packwood creeks which are tributaries to Reservoir 19.

f. Revenue Replacement (EC 6); Government Services (EC 6-1)

- **Volunteer Fire Departments – non 501(c)(3)s** - Beneficiaries are non-profit corporations, but not 501(c)(3)s. The County is authorized to provide fire protection in the unincorporated areas of the County. It does this by contracting for fire protection services with multiple Volunteer Fire Departments, the Beneficiaries, which provide, in effect, the government service of fire protection. Volunteer Fire Departments depend on fundraisers to keep themselves fiscally healthy and able to keep equipment maintained and members trained. During the COVID-19 Pandemic, fundraising could not be conducted resulting in losses. The Beneficiaries lost funding which reduces their ability to operate fully and efficiently provide fire protection services. The Beneficiaries agree that in return for this funding they will continue to provide fire protection services for the County at least at pre-Pandemic levels.
- **Paul Tyson Field Demolition** – The County has entered into a “Venue Project” with the City of Waco and Waco Independent School District, whereby land has been exchanged among the entities, in part, to enhance recreational opportunities in an inner-city neighborhood. Per State law, the Venue Project can only be funded through a Hotel Occupancy Tax and a tax on rental cars. This revenue was severely impacted during the pandemic.

As part of the project, the ISD and County exchanged land including land where the “old” Paul Tyson Field was located, to allow the ISD to construct a new facility. The “old” Paul Tyson Field is in a state of disrepair and must be demolished. The County will use a portion of its lost revenue replacement to demolish the “old” field which now sits on County land.

Promoting equitable outcomes

The Commissioners Court has chosen to grant fund numerous non-profit agencies, which serve the historically underserved, marginalized, and adversely affected sections of the population. McLennan County will strive to ensure all targeted populations are aware of and have access to these programs. Future annual reports will provide updates to these projects as they develop along with how they promoted equitable outcomes.

McLennan County's overall equity strategy translates into specific services or programs in the following Expenditure Categories:

- **Negative Economic Impacts (EC 2):** assistance to households to address impacts of the pandemic, which have been most severe among low-income populations. This includes assistance with rent and utilities. The funding for this program is being administered by the EOAC of Waco with funds provided by the Emergency Rental Assistance program 1 included in the Consolidated Appropriations Act of 2021 and by the Emergency Rental Assistance Program 2 included in the American Rescue Plan Act.
- **Negative Economic Impacts (EC 2):** assistance to non-profits to address impacts of the pandemic, which have been most severe among low-income populations. This includes assistance with food, housing, healthcare, and other needs.
- **Services to Disproportionately Impacted Communities (EC 3):** *services to address health disparities and the social determinants of health for adults and children, many of which are designated as "Low Socio-Economic Status", by giving them expanded access to healthcare services, including mental and behavioral health services.*
- **Services to Disproportionately Impacted Communities (EC 3):** services to promote healthy childhood environments. By increasing access to healthcare and mental healthcare for those disproportionately affected, the County is promoting healthy childhood environments. In addition, Trinity Sports provides education, structured programs and recreation, and meals to disproportionately affected children.

Community Engagement

Commissioners Court Work Sessions - County staff continues to facilitate a series of public work sessions during regular meetings of the Commissioners Court. These ongoing work sessions provide relevant information related to eligible uses of SLFRF funding and information from subject matter experts and key community stakeholders. For instance, on September 21, 2021, the Court held public hearings in which representatives from Waco Family Medicine and the Heart of Texas MHMR discussed pandemic-related impacts on various community health needs.

Labor Practices

Each Beneficiary or Subrecipient Agreement requires compliance with the grant terms, including those relating to labor.

Use of Evidence

McLennan County promotes the use of evidence-based practices. Many of the projects selected by the County leveraging SLFRF funds are grounded in research and evidence, particularly in the Health and Human Services realm. When determining program design, a variety of steps are taken to promote the best possible outcomes, including: research and literature reviews, identification of best and/or promising practices, investigation into the practices of peer and surrounding jurisdictions, use of validated instruments for evaluation, use of data to identify and target program beneficiaries, and the identification of evidence-based practices. To the extent that the County completely understands the “evidence-based interventions” concept, every expenditure under this Plan is for evidence-based interventions in eligible categories.

Table of Expenses by Expenditure Category

Note: All beneficiary and sub-recipient agreements were entered into after March 3, 2021.

| Expenditure Category | Description | Cumulative Expenditures | Amount Spent Since Last Recovery Plan |
|----------------------|--|-------------------------|---------------------------------------|
| 1.2 | COVID-19 Testing | 1,995.00 | 190.00 |
| 1.4 | Prevention in Congregate Settings Nursing Homes Prisons Jails Dense Work Sites Schools Child facilities etc. | 502,372.90 | 397,927.90 |
| 1.5 | Personal Protective Equipment | 14,064.03 | - |
| 1.6 | Medical Expenses including Alternative Care Facilities | 2,500,000.00 | - |
| 1.7 | Other COVID-19 Public Health Expenses | 10,000.00 | - |
| 1.12 | Mental Health Services | 3,000,000.00 | - |
| 1.14 | Other Public Health Services | 58,650.00 | 96,122.90 |
| 2.29 | Loans or Grants to Mitigate Financial Hardship | 50,000.00 | - |
| 2.34 | Assistance to Impacted Nonprofit Organizations Impacted or Disproportionately Impacted | 707,060.65 | 392,863.61 |
| 3.1 | Public Sector Workforce Payroll and Benefits for Public Health Public Safety or Human Service Workers | 13,906.56 | 66.60 |
| 5.13 | Drinking water Source | 30,000.00 | - |
| 6.1 | Provision of Government Services | 37,350.49 | 28,850.49 |
| 7.1 | Administrative Expenses | 48,161.00 | 23,163.84 |
| | | 6,973,560.63 | 939,185.34 |

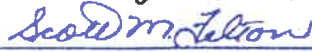
See Section C(7) on page 27 of the Reporting Guidance for additional information.

AMERICAN RESCUE PLAN BUDGET ADJUSTMENT
03/03/2021 - 12/31/2024

| | | | |
|--------------------------------|--------------------|-------------------|------------------|
| TOTAL AWARD AMOUNT | UNALLOCATED | ADJUSTMENT | REMAINING |
| American Rescue Plan Act Award | 32,869,169 | (10,022,888) | 22,846,281 |
| TOTAL ADJUSTMENT | 32,869,169 | (10,022,888) | 22,846,281 |

| PROJECT # | EXPENDITURE CATEGORIES | PROJECT TITLE | CURRENT BUDGET | ADJUSTMENT | REVISED BUDGET |
|--------------------------|---|--|-------------------|-------------------|-------------------|
| 1 | Public Health | | | | |
| A1-602120-1 | 1.2 - COVID-19 Testing | McLennan County COVID-19 Testing | - | 1,995 | 1,995 |
| A1-607106-1 | 1.4 - Prevention in Congregate Settings | McLennan County Court Cleaning Prevention | 104,445 | - | 104,445 |
| A1-701000-1 | 1.4 - Prevention in Congregate Settings | McLennan County Air Purification | 362,248 | - | 362,248 |
| A1-501000-1 | 1.5 - Personal Protective Equipment | McLennan County PPE | 14,065 | - | 14,065 |
| A1-604156-1 | 1.6 - Medical Expenses (including Alt. Care Facilities) | Waco Family Medicine | 2,500,000 | - | 2,500,000 |
| A1-604149-1 | 1.7 - Other COVID-19 Public Health Expense | Cultural Arts of Waco | 10,000 | - | 10,000 |
| A1-604157-1 | 1.12 - Mental Health Services | HOT MHMR | 3,000,000 | - | 3,000,000 |
| A1-601111-1 | 1.14 - Other Public Health Services | BASE Rental and Equipment Set up | 58,250 | 400 | 58,650 |
| | Total Public Health | | 6,049,008 | 2,395 | 6,051,403 |
| 2 | Negative Economic Impacts | | | | |
| A2-604159-1 | 2.29 - Small Business: Loans or Grants to Mitigate Financial Hardship | Cen-Tex Minority Business Equity Fund | 50,000 | - | 50,000 |
| A2-604160-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Cenikor | 24,500 | - | 24,500 |
| A2-604161-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Trinity Sports | 71,000 | - | 71,000 |
| A2-604158-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Friends for Life | 348,000 | - | 348,000 |
| A2-602102-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Greater Waco Sports Commission | 96,525 | - | 96,525 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Bruceville Eddy | 4,000 | - | 4,000 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - China Spring | 15,000 | - | 15,000 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Crawford | 2,000 | - | 2,000 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Elm Mott | 15,000 | - | 15,000 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Robinson | 10,317 | - | 10,317 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Mart | - | 5,493 | 5,493 |
| A2-604131-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Volunteer Fire Dept - Downsview | - | 15,000 | 15,000 |
| A2-604139-1 | 2.34 - Assistance to Impacted Nonprofit Organizations | Meals on Wheels | 128,000 | - | 128,000 |
| | Total Negative Economic Impacts | | 764,342 | 20,493 | 784,835 |
| 3 | Public Health-Negative Economic Impact: Public Sector Capacity | | | | |
| A3-411960-1 | 3.1 - Public Sector Workforce: Payroll and Benefits | BASE Security | 13,710 | - | 13,710 |
| A3-411960-2 | 3.1 - Public Sector Workforce: Payroll and Benefits | Nurses Administering County COVID Testing | 280 | - | 280 |
| | Total Services to Disproportionately Impacted Communities | | 13,990 | - | 13,990 |
| 4 | Premium Pay | | | | |
| | Total Premium Pay | | - | - | - |
| 5 | Infrastructure | | | | |
| A5-604162-1 | 5.13 - Drinking Water : Source | Tehuacana Creek Water Improvement District | 30,000 | - | 30,000 |
| A5-630123 | 5.0 - Water Projects | General Allocation (Not for reporting) | - | 10,000,000 | 10,000,000 |
| | Total Infrastructure | | 30,000 | 10,000,000 | 10,030,000 |
| 6 | Revenue Replacement | | | | |
| A6-630122 | 6.1 - Provision of Government Services | | 9,954,675 | (40,260) | 9,914,415 |
| A6-604131-1 | 6.1 - Provision of Government Services | Volunteer Fire Dept - Elk | 5,500 | - | 5,500 |
| A6-604131-1 | 6.1 - Provision of Government Services | Volunteer Fire Dept - Riesel | 3,000 | - | 3,000 |
| A6-604131-1 | 6.1 - Provision of Government Services | Volunteer Fire Dept - Speegleville | 6,825 | - | 6,825 |
| A6-604131-1 | 6.1 - Provision of Government Services | Volunteer Fire Dept - Valley Mills | 15,000 | - | 15,000 |
| A6-604131-1 | 6.1 - Provision of Government Services | Volunteer Fire Dept - West | 15,000 | - | 15,000 |
| A6-704000 | 6.1 - Provision of Government Services | Venue Project - Area B Demolition | - | 40,260 | 40,260 |
| | Total Revenue Replacement | | 10,000,000 | - | 10,000,000 |
| 7 | Administrative | | | | |
| A7-615112-1 | 7.1 - Administrative Expenses | BKD, LLC | 49,500 | - | 49,500 |
| A7-602119-1 | 7.1 - Administrative Expenses | Lockwood, Andres & Newman, Inc. | 70,000 | - | 70,000 |
| | Total Administrative | | 119,500 | - | 119,500 |
| TOTAL ALLOCATIONS | | | 16,976,840 | 10,022,888 | 26,999,728 |

| | |
|---------------------------------|------------|
| Total allocated and Unallocated | 49,846,009 |
| Total award Amount | 49,846,009 |

APPROVED BY COMMISSIONERS COURT
THIS 21 DAY OF JUNE 2022

COUNTY JUDGE

Project Inventory

Project

Project [Identification Number]: Waco Family Medicine [A1-604156-1]

Funding amount: \$2,500,000

Project Expenditure Category: [1.12 – Mental Health Services]

Project overview

- This project is being used to assist Waco Family Medicine in the construction of a new main clinic facility for primary care, mental health, oral health and health care professional training. Beneficiary is a Federally Qualified Health Center (FQHC) providing health care to underserved residents of McLennan and Bell counties. The clinic will address pandemic operational needs, COVID-19 mitigation measures, the ability to respond to the COVID-19 health emergency, and the ability to safely serve the underserved and most vulnerable at an expanded level. Income limits apply so that those served are the economically disadvantaged. Final Rule Commentary at pp. 127-128 provides that: facilities designed to address disparities in public health outcomes (clinics, hospitals, etc.) are eligible capital expenditures. Beneficiary is making the capital expenditure in part from the ARPA funds allocated to it by the County.

Use of Evidence

Goals are:

- *To improve public health outcomes.*
- *To address healthcare for underserved residents.*
- *To address pandemic operational needs and responding to health emergencies.*
- <https://wacofamilymedicine.org/>
- <https://compassionandchoices.org/resource/covid-19-impact-on-underserved-communities/>
- <https://www.rutgers.edu/news/impact-covid-19-underserved-communities>

Evidence-based interventions in the new facility.

The new facility will serve as the principal site for the Waco Family Medicine (WFM) clinic system (also known as the Heart of Texas Community Health Center), a large, 60,000-patient Federally Qualified Health Center. 95% of the system's patients live at or below 200% of the federal poverty level. Additionally, internal research has shown that 80% of their patients suffer from a comorbid psychiatric diagnosis. The new facility is designed to address these specific factors and social determinants of health (SDoH) using evidence-based modalities.

Waco Family Medicine is the only site in McLennan County offering robust opioid use disorder (OUD) treatment for those with limited access to healthcare. Importantly, "the overdose crisis is, in part, an epidemic of poor access to care" (Wakeman and Barnett NEJM 2018). 80% of Americans cannot access treatment for OUD (Saloner and Karthikeyan JAMA 2015). To address this disparity, WFM has developed a medication assisted treatment (MAT) clinic utilizing buprenorphine for OUD. At similar clinics, MAT has been shown to lead to better rates of abstinence when compared to detox and counseling alone and also prevents overdose, directly improving mortality risk (Schwartz et al AJPH 2013). These funds will allow WFM to

expand their clinic space to allow for increased capacity and a team-based, multidisciplinary approach.

An epidemic level of mental and behavioral health disorders exists, and the volume of mental illness is increasing (Olfson J Clin Psychiatry 2014) and will accelerate further due to the impact of the COVID-19 pandemic (Rohilla, et al J Family Med Prim Care 2020). Primary care is the *de facto* mental health system in the United States, as primary care clinicians serve most patients who receive treatment for mental illness and prescribe a majority of psychotropic medications. Remarkably, up to 75% of primary care visits include mental or behavioral health components (Robinson, et al Behavioral Consultation and Primary Care: A Guide to Integrating Services 2007). These realities—in addition behavioral health factors having an outsized influence on morbidity and mortality, register the need to “include substance use disorders and other mental health conditions under the same roof as congestive heart failure and other chronic conditions” (Saitz, et al Ann Fam Med 2017).

To this end, WFM leverages an award-winning integrated care program where Integrated Behavioral Health (IBH) providers are core members of the primary care team, working alongside physicians, nurse practitioners and physicians assistants in a *shared-care model* to enhance primary care and improve population and mental health outcomes. Moreover, WFM also operates a robust and successful internal behavioral health consultation service (BHCC) where primary care clinicians can refer patients for short-term diagnostic clarification and treatment planning across the full range of mental health conditions. The BHCC service does not retain patients long-term but returns patients back to their primary care provider for ongoing management, usually after fewer than four consultation visits, and thus increases treatment capacity for behavioral health conditions across the WFM system. WFM’s new clinic design incorporates new and designated space for both the BHCC clinic and imbedded IBH providers.

WFM is expanding current programs to address SDoH. Their new facility will integrate a wellness and coach-based exercise center into the first floor of the building. Prior research has shown that 70% of US adults do not get adequate physical activity. Insufficient physical activity is a major contributor to the burden of chronic disease, resulting in a significant financial burden on the healthcare system. Primary care settings that integrate physical activity screening and promotion via linking strategies (e.g., referral to health coaches and integrated exercise facilities) were 80% more likely to have patients who reported exercising regularly (Balasubramanian, et al Am J Prev Med 2008). WFM’s Wellness Center is directly integrated in the new building to seamlessly link their services with patient care services.

A Community Health Resource Center (CHRC) is a “one-stop shop,” a physical location that co-locates services so that patients can gain access to multiple health, SDoH, and wellness resources in one facility. CHRCs have been shown to increase access to healthcare, wellness, and human services (Garney, et al JABFM 2013; CHRC Case Study, Center for Community Health Development – TAMHSC). Modeled on the CHRC model, WFM’s new building design incorporates a Community Health “Marketplace” on the ground floor that will incorporate community partners such as WIC, social service organizations and a medical-legal partnership as well as a teaching kitchen, wellness center, and fresh produce distribution.

Population Being Served

Waco Family Medicine (WFM) has provided most of the primary health care (medical, dental, and behavioral) for the vulnerable population for 51 years. Our service area has no County

Hospital District nor any other organized primary care physician services for individuals living at or below 200% of the Federal Poverty Level. As a Federally Qualified Health Center (FQHC), Waco Family Medicine provided care to 61,394 unique patients with 73% living at or below 200% of the Federal Poverty Level, with a race/ethnicity stratification of:

- 23.6% African American/Black
- 43.9% Hispanic
- 1.25% Asian/Pacific Islander
- 25.9% White

- **Evidence Based Expenditures.**

The evidentiary basis of the Beneficiary's program has been provided by the beneficiary and is set out above. However, beyond this, our knowledge of the Beneficiary and the key role that it plays in serving the medical and mental health of the underserved in an overwhelmed healthcare environment supports the project. We know from first-hand observation that there is a need for this project in our community to better serve the poor and underserved population. We have interviewed key personnel of the Beneficiary and others in the medical community not associated with the Beneficiary and the project appears to have universal support. We have also reviewed scholarly articles and other publications and have conducted research. The full \$2,500,000 allocated to the Beneficiary is found to be for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Based on the excess patient demand for Waco Family Medicine, and the patient demographics, the construction of the new facility itself would be a sufficient performance indicator. Therefore, the progress of the construction will be periodically reviewed as an indicator of Project performance.

Expected Construction Start Date: _____

Expected Operations Start Date: _____

Project

Project [Identification Number]: Heart of Texas Region MHMR [A1-604157-1]

Funding amount: \$3,000,000

Project Expenditure Category: [1.12 – Mental Health Services]

Project overview

- This project is being used to assist Heart of Texas MHMR in the construction of a public mental and behavioral health facility, which will be a one-stop location for multiple mental health services. The mental health facility will address pandemic operational needs, COVID-19 mitigation measures, the ability to respond to the COVID-19 health emergency, expanded provisions of mental and behavioral health services to the disadvantaged, and will address the negative impacts of COVID-19, especially to the disadvantaged as it primarily serves the poor and indigent regardless of their ability to pay. Final Rule Commentary at page 69 provides that: Mental and behavioral health facilities are eligible capital expenditures. The Beneficiary will make the capital expenditure in part with the ARPA funds allocated to it by the County.

Use of Evidence

- *Goals are:*
 - *To improve behavioral health outcomes.*
 - *To address behavioral healthcare for underserved residents.*
 - *To address pandemic operational needs and responding to health emergencies.*
 - *To create more equitable access to mental/behavioral healthcare and to provide for better mental/behavioral health outcomes for the poor.*
- Links to websites/articles which discuss the pandemics impact on mental and behavioral health:
 - <https://www.hotrmhmr.org/>
 - <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
 - <https://www.cdc.gov/mentalhealth/stress-coping/cope-with-stress/index.html>
 - <https://www.commonwealthfund.org/blog/2020/long-term-impact-covid-19-mental-health>
 - <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7361582/>

Key outcomes for the Crisis Hub project include the following: 1) decrease wait-time for Law Enforcement officers who are dropping off individuals requiring Behavioral Health Crisis Care; 2) decrease the frequency of individuals in Behavioral Health Crisis who present at local Emergency Departments; 3) better coordinate all Crisis Care and Support Services; and 4) improve general Behavioral Health outcomes for individuals experiencing Behavioral Health Crisis Episodes. These objectives represent nationally recognized Best Practices for Behavioral Health Crisis.

The Crisis Hub is designed to provide the following services: Crisis Assistance and Triage, Short-term Crisis Care, Law Enforcement Drop Off, Safety Monitoring, Extended Observation, Medical Clearance, Psychiatric Consultation, Medication and Medication Management Support,

Substance Abuse Assessment and Referrals for Treatment, Housing Specialists and Access to Housing Services, Care Coordination and Integrated Care Support, Medical Care, Crisis Respite Services, Crisis Residential Services, and Peer and Family Support.

As the pilot provider site for the Texas Children Recovering from Trauma (TCRFT) initiative, beginning in 2012, HOTRMHMR undertook extensive training to be designated as an NCTSN Category III trauma provider, and therefore formalized and promoted Trauma Informed Care (TIC) principles, training, and implementation. Tightly interwoven into TIC activities, as well as into Certified Community Behavioral Health Clinic standards, is the health equity model known as Culturally and Linguistically Appropriate Services (CLAS). HOTRMHMR strictly adheres to National CLAS Standards, and actively assesses Agency policies and procedures, along with programmatic activities, to ensure that all services are provided in a culturally responsive manner. The Agency also seeks out consumer voice through local advisory committees, and has functional mechanisms in place, like Certified Family and Peer Partner services, to elicit input from consumers in the process of guiding programmatic decision-making. These activities are meant to assist in the overall vision of providing a culturally responsive continuum of care.

HOTRMHMR's services include: Certified Community Behavioral Health Clinic (CCBHC) Services, Targeted Case Management, Medicaid Rehab Services and Skills Training, Psychosocial Rehab, Medication Support, Crisis Intervention, Psychotherapy (both individual and group), Adult and Child Psychiatric Services, Nursing Services, Peer and Family Support, Supported Employment, Education & Housing Services, Assertive Community Treatment (ACT) Services, YES Waiver Services, Youth and Adult Homeless Support Services, Co-occurring Psychiatric and Substance Use Disorder Services (COPS-D) and SUD Services, Veterans Services, Integrated Health Services, as well as a full range of IDD/ECI Services, and more.

- *Heart of Texas Behavioral Health Network routinely seeks consultation from SAMHSA, the National Council of Mental Wellbeing, and other program experts concerning Best Practice programming. It is envisioned that the Crisis Hub program will provide a network of services that will achieve the National Council of Mental Wellbeing's Crisis Services Aspirational Goal, as outlined in their Roadmap to the Ideal Crisis System, "Every person receives the right service in the right place, every time." In this way, we have sculpted programming to meet the National Council of Mental Wellbeing's Best Practice model.*
- Heart of Texas Behavioral Health Network (HOTBHN) provided 11,887 Crisis Interventions in its six-county catchment area between the dates of 9/1/2020 and 8/19/2021 (HOTBHN, Crisis Volume Statistics), with over 20,000 additional services provided to citizens in need of Covid-19-specific Behavioral Health support. These numbers are representative of actual crisis intervention services for which data is definitively collected. It is understood amongst local service providers that there are, indeed, more incidents of crisis episodes occurring within the geographical Heart of Texas Region than are officially reported.
- **Client Demographics for the Agency**
- White (60%)
Hispanic or Latino (25%)
Black or African American (14%)
Asian (1%)
- **Evidence Based Expenditures.**

Evidence based information for the project is set forth above. However, beyond this, our knowledge of the Beneficiary and the key role that it plays in serving the mental and behavioral health of the underserved in an overwhelmed care environment supports the project. We know from first- hand observation that there is a need for this project in our community to better serve the poor and underserved population. We have interviewed persons in the mental health field and there seems to be wide support for this Project. We have also reviewed scholarly articles and other publications and conducted other research. The full \$3,000,000 allocated to the Beneficiary is found to be for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Based on the existing and increasing demand for mental/behavioral health services (especially since the Pandemic), the construction of the new facility itself would be a sufficient performance indicator. Therefore, the progress of the construction will be periodically reviewed as an indicator of Project performance.

Expected Construction Start Date: _____

Expected Operational Start Date: _____

Project

Project [Identification Number]: Cenikor [A2-604160-1]

Funding amount: \$24,500

Project Expenditure Category: [2.34, Aid to nonprofit organizations]

[Additional authority is found under Category 1.13 Substance Use Services]

Project overview

- Project is a renovation project to better serve clients in need of substance abuse treatment and to address increased costs caused by the pandemic. Cenikor's Waco facility saw an increase in the cost of care per client by 23% and the clients stayed longer. These increased expenses are attributed to the preventative Covid-19 measures that Cenikor made to ensure that clients and staff remain safe and to ensure that positive case clients were safe and still treated for their addiction.

- Use of Evidence

- *Goal is to provide aid to a non-profit that suffered increased costs due to the pandemic.*
- Cenikor is an evidence-based treatment provider accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF). With its personalized programs, clients can adjust their recovery methods as needs change. Some individuals are best served with short-term residential programs, while others need the convenience and flexibility of our outpatient facilities. Cenikor works with each person to find the right recovery treatment plan.
- Links to websites/articles which discuss the pandemics impact on substance abuse:
- <https://www.cenikor.org/locations/waco-texas/>
- <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
- <https://www.drugabuse.gov/drug-topics/comorbidity/covid-19-substance-use>
- <https://www.apa.org/monitor/2021/03/substance-use-pandemic>
- Cenikor provides its clients a minimum of 30 hours of programming each week, with programming 7 days a week. Living in Balance is the primary curriculum, which is an evidence-based model. They also supplement programming with other curriculums, like Seeking Safety, which are additional evidence-based curriculums as an example.

- **Evidence Based Expenditures.**

The beneficiary has provided evidence, some of which has been cited above, that shows the services that it provides and the project are evidence based. In addition, we have reviewed scholarly articles and other publications, including about the Pandemic's impact on substance abuse and find the Beneficiary's program to be solidly based on evidence.

We know from our courts, jails, and probation departments that drug addiction is constantly on the rise. The Beneficiary's structured rehabilitation programs are needed in our community. The full amount of the allocation of \$24,500 is for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

- Is Cenikor serving the same or a higher number of patients that it did pre-Pandemic? Check at 12 and 24 months after grant. Documentation required.

[Capital spending requirement already completed]

Project

Project [Identification Number]: Cen-Tex African American Chamber of Commerce – Small Business Equity Fund [A2-604159-1]

Funding amount: \$50,000

Project Expenditure Category: [2.29, Loans or Grants to Mitigate Financial Hardship]

Project overview

- This project is being used to assist minority-owned businesses in rebounding from the downturn in business caused by the COVID-19 pandemic by providing capital through its Cen-Tex Minority Equity Fund to better the business and sustain its existence. This does not include payments for lost profits. The funds must be used to enhance the business, increase inventory, add space, or otherwise assist in the business's recovery.
- Use of Evidence
- *Goal is to assist minority-owned businesses in recovering from the pandemic.*
- *County staff has reviewed evidence-based publications and reports conducted by the Minority Business Development Agency – U.S. Department of Commerce. The provision of these funds is in alignment with those evidence-based findings.*
- Links to websites/articles which discuss the pandemic's impact on minority-owned businesses:
 - <https://www.mbda.gov/research>
 - <https://www.centexchamber.com/>
 - <https://www.pnas.org/content/117/30/17656>
 - <https://www.census.gov/data/experimental-data-products/small-business-pulse-survey.html>
- **Evidence Based Expenditures.**

Based on scholarly articles and other publications, the full amount of \$50,000, is for evidence based intervention. It is also evidence based given our knowledge of the beneficiary or subrecipient's operations; information from the beneficiary or subrecipient; and interviews.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Percentage of grant recipients that are still operating after receiving the grants 6, 12, 24 months;

Pre-grant due diligence;

Documentation supporting the foregoing.

Project

Project [Identification Number]: Friends for Life [A1-604158-1]

Funding amount: \$348,000

Project Expenditure Category: [2.34, Assistance to Impacted Nonprofit Organizations]
[Additional authority is found under 1.14, Other Public Health Services]

Project overview

- The pandemic has interfered with normal fundraising and has increased costs, creating significant fiscal harm to the Friends for Life. In addition, Friends for Life lost 70% of its adult day care revenue and 100% of its Life Skills program revenue for about a year due to the pandemic.
- Program means the use of the grant funds for:
 - Adult Day Care - The ADC is a safe and happy place for seniors and persons with disabilities to come each day to enjoy nutritious meals, snacks, and lots of fun activities provided by the trained RN and CNA staff.
 - Money Management - Serve as a representative payee and fiduciary for seniors and persons with disabilities who are at risk of losing independence due to the inability to manage financial matters.
 - Guardianship - Serve as a guardian for seniors and persons with disabilities whom the courts have determined are unable to perform basic life skills and have no family or friends willing or suitable to serve in this capacity.
 - Life Skills - The Life Skills Program provides one on one training with adults with Intellectual Disabilities living in nursing facilities with the goal of increased independence and transition into a community setting.
 - Independent Living - Volunteers help us ensure that the elderly and people with disabilities can live independently and safely in their homes as long as possible through services such as transportation to and from medical appointments, delivery of groceries, or small household repairs.
 - Quality of Life - Volunteers help us to minimize the isolation and loneliness of seniors and persons with disabilities in our community through our different programs that include Friends For Thanksgiving, Adopt -A- Grandparent, etc.
- Use of Evidence
- Goals are –
 - *To provide aid to a non-profit that suffered revenue loss and increased costs due to the pandemic.*
 - To improve the quality of life for seniors and people with disabilities, particularly those who are without family to care for them
- Links to websites/articles which discuss the pandemic's impact on people with disabilities:
 - <https://friendsforlife.org/>
 - <https://www.frontiersin.org/articles/10.3389/fpubh.2021.738304/full>
 - <https://chrt.org/publication/fighting-social-isolation-and-loneliness-in-adults-with-disabilities/>
 - <https://www.cdc.gov/ncbddd/humandevelopment/covid-19/people-with-disabilities.html>

- https://www.cdc.gov/ncbddd/humandevelopment/covid-19/guidance-for-direct-service-providers.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fdirect-service-providers.html

- **Evidence Based Interventions**

- **Guardianship:**

Outcome: Client will have a safe living environment, have access to needed medical care and have the best quality of life possible.

Output: Monthly in-person visits by care managers will monitor and evaluate personal situation for each client. Care managers will advocate with medical providers and other care-givers for best quality of life.

Data collected at each monthly visit will be the documentation used to evaluate the overall effectiveness of the program.

- **Money Management:**

Outcome: Client's funds will be protected while ensuring expenses are paid and personal needs met.

Output: Money management staff will pay bills directly to providers. Staff will deposit funds to a re-loadable debit card for client's person use. Staff will document all activity in a database software program and will reconcile all bank accounts monthly.

Data collected in the software program plus the bank statements received monthly will be the documentation used to evaluate the overall effectiveness of the program.

- ***NOTE; During the pandemic, it became apparent that many of the money management clients have other problems besides the inability to manage financial matters. Friends for Life is in the process of recruiting Phone Friend volunteers to call each of its money management clients to check in on well-being and to identify any unmet needs. The agency has also developed a new program called Lifelines, staffed with a Master of Social Work, to do case management and assist with problems identified by the Phone Friends volunteers.***

- **Life Skills:**

Outcomes: Nursing Facility residents with Intellectual and Developmental Disabilities will be encouraged to become more independent in daily life and to be more engaged in the day to day activities in the facility. The ultimate outcome is to transition back into community settings if desired.

Outputs: Life Skills Trainers will visit daily to provide one on one assistance and training to improve socialization, communication and cognitive skills.

Data collected in daily case notes plus monthly reports submitted to MHMR will be the documentation used to evaluate the effective of the program. Client status is also monitored in quarterly care plan meetings at the nursing facility.

- **Independent Living/Quality of Life:**

Outcome: Seniors and adults with disabilities without a support system will continue to live independently and safely as long as possible with assistance from volunteers. Isolation will be reduced.

Output: Volunteers will provide transportation to necessary medical appointments.

Volunteers will provide delivery of grocers and personal items. Volunteers will provide

minor household repairs. Volunteer phone friends will call weekly to visit and identify any unmet needs. Volunteers will deliver birthday gifts and Christmas gifts. Volunteers will deliver hot meal on Thanksgiving.

NOTE: Lifelines staff and volunteers are available to assist with any problems that cannot be solved via volunteer services.

Data will be collected via surveys conducted by Baylor interns and program staff to evaluate the effectiveness of the programs.

- **Adult Day Care:**

Outcome: Attendees will have a safe place to spend the day, with nutritious meals/snacks and fun activities.

Output: Trained RN and CNAs provide necessary medical needs. Kitchen supervisor provides a nutritious hot breakfast and lunch. Trained activities director provides a variety of activities and utilizes volunteers to assist with activities as possible.

Data will be collected via surveys sent home with attendees requesting evaluation of day services provided. This data will be used to evaluate the effectiveness of the program.

- **It is important to note that Friends for Life undergoes twelve unique audits yearly from different agencies and organizations. These audits measure the effectiveness of the program overseen by each agency.**

- **Evidence Based Expenditures.**

Based on the foregoing and scholarly articles and publications, the full amount of \$348,000 is for evidence based interventions. Also, our knowledge of the beneficiary or subrecipient's operations support that the funding is for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

- Is Friends for Life providing the same level of programs and assistance that it did pre-Pandemic? Check at 12 and 24 months after grant.

Project

Project [Identification Number]: Waco Cultural Arts Fest – Bridge of Souls [A1-604149-1]

Funding amount: \$10,000

Project Expenditure Category: [1.7, Other Covid-19 Public Health Expenses]

[Additional authority is found under 1.1, COVID-19 Vaccination; 1.12 Mental Health Services]

Project overview

- BRIDGE OF SOULS was a temporary public art installation during Waco's popular riverside Cultural Arts Festival during October 2021. It honored the 568 (and rising) people from our community who had died from COVID-19.

Families of COVID-19 victims were invited to help create the banners, and approximately 150 artists were paid a small bursary to support the cost of art supplies plus their design and creation time. Turning statistics into a visual representation of beloved people of all ages and backgrounds is a chance for families to commemorate loved ones, and our whole community to honor medical workers and those who risked their lives to care for others. And while turning statistics into visual acknowledgement of those lost is helpful to the families; it also creates a visual representation of the scope of the pandemic and brings home its seriousness. Information on free vaccination clinics/pop-ups was clearly displayed near the art installation. Mental health has taken a documented turn for the worse during the pandemic. It is hoped that the project will be a cathartic experience for the families and others, and possibly result in support networks being created amongst the families or amongst healthcare workers. A mobile free vaccination clinic was made available at the festival on October 15, 16, and 17, 2021. The availability of the mobile free vaccination clinic was marketed as part of the Festival marketing leading up to the festival, and at the site of the art installation. During that same period, the Heart of Texas Region MHMR had a presence at the festival to provide counseling and to connect people with mental health resources in our community. The availability of mental health services in the community was also marketed at the art installation site. For the ceremony, mental health workers were present to assist families and medical providers, and to connect people with mental health resources in our community.

- Use of Evidence
- Goals are:
 - *To provide increased awareness to the pandemic.*
 - *To promote free vaccination clinics at the festival.*
 - *To encourage and promote access to mental health services.*
 - *To provide on-site mental health counseling services.*
 - <https://www.americansforthearts.org/node/103614>

- **Evidence Based Expenditures.**

The full amount of \$10,000 is for evidence based interventions. Scholarly articles and other publications support this position. In addition, knowledge of the beneficiary's operations and the purposes of this project support that the funds were spent for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

- The Bridge of Souls event was completed. Was the availability of Vaccine marketed? Yes. Was the vaccine made available at the event? Yes. Were mental health professionals available at the event? Yes. Did the event educate on the dangerous nature of COVID-19? Yes.

Project

Project [Identification Number]: Volunteer Fire Departments – 501(c)(3) [A2-604131-1]

Funding amount: \$66,810

Project Expenditure Category: [2.10, Assistance to Impacted Nonprofit Organizations]

Project overview

- Beneficiaries are non-profit corporations and 501(c)(3) corporations. The County is authorized to provide fire protection in the unincorporated areas of the County. It does this by contracting for fire protection services with multiple Volunteer Fire Departments the Beneficiaries, which provide, in effect, a government service. Volunteer Fire Departments depend on fundraisers to keep themselves fiscally healthy and able to keep equipment maintained and members trained. During the COVID-19 Pandemic, fundraising could not be conducted resulting in losses. Funding was provided to:
- Bruceville-Eddy VFD
- China Spring VFD
- Elm Mott VFD
- Robinson VFD

- Use of Evidence

- Goals are:

- *To provide aid to a non-profit that suffered revenue loss and increased costs due to the pandemic.*
- *To ensure fire protection services continue to be provided*

- <https://www.npr.org/2022/02/03/1077383009/calls-volunteer-fire-departments-few-first-responders>

- <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2021/11/09/pandemic-adds-stress-to-already-strained-rural-fire-departments>

- **Evidence Based Expenditures.**

The full amount of \$66,810 is for evidence based interventions. This is based on scholarly articles and other publications, review of the project, and knowledge of the Beneficiary's operations.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Is the VFD providing the same or higher level of fire protection service to the unincorporated areas as before the Pandemic? Review 12 and 24 months after receipt of the grant.

Project

Project [Identification Number]: Volunteer Fire Departments – non 501(c)(3) [A6-604131-1]

Funding amount: \$45,325

Project Expenditure Category: [6.1, Provision of Government Services]

Project overview

- Beneficiaries are non-profit corporations, but not 501(c)(3)s. The County is authorized to provide fire protection in the unincorporated areas of the County. It does this by contracting for fire protection services with multiple Volunteer Fire Departments, the Beneficiaries, which provide, in effect, the government service of fire protection. Volunteer Fire Departments depend on fundraisers to keep themselves fiscally healthy and able to keep equipment maintained and members trained. During the COVID-19 Pandemic, fundraising could not be conducted resulting in losses. The Beneficiaries lost funding which reduces their ability to operate fully and efficiently provide fire protection services. The Beneficiaries agree that in return for this funding they will continue to provide fire protection services for the County at least at pre-Pandemic levels.
- Elk VFD
- Riesel VFD
- Speegleville VFD
- Valley Mills VFD
- West VFD
- Use of Evidence
- Goals are:
 - *To provide aid to a non-profit that provides Government Services.*
 - *To ensure fire protection services continue to be provided*
- <https://www.npr.org/2022/02/03/1077383009/calls-volunteer-fire-departments-few-first-responders>
- <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2021/11/09/pandemic-adds-stress-to-already-strained-rural-fire-departments>
- **Evidence Based Expenditures.**

The full amount of \$45,325 is for evidence based interventions. This is based on scholarly articles and other publications, review of the project, and knowledge of the Beneficiary's operations.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are

currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Is the VFD providing the same or higher level of fire protection service to the unincorporated areas as before the Pandemic? Review 12 and 24 months after receipt of the grant.

Project

Project [Identification Number]: Trinity Sports [A2-604161-1]

Funding amount: \$71,000

Project Expenditure Category: [2.34, Assistance to Impact Nonprofit Organizations]

Project overview

- Utilizing grant funds for needed repairs to Trinity Sport's facility to assist in providing educational and recreational opportunities for underserved, low income children. This includes a meals program. The Beneficiary has not been able to conduct fundraisers because of the pandemic, and operational costs have increased because of the pandemic. In addition, the condition of the building was inherited, and the plans for a meals service for the underserved requires significant work.

- Use of Evidence

- Goals –

- *To provide aid to a non-profit that suffered revenue loss and increased costs due to the pandemic.*
- *To increase opportunities for underserved children.*
- *Operating a meals program for underserved children.*

County staff has reviewed Princeton University's "Future of Children" collection of research and analysis aimed to promoting effective policies and programs for children.

<https://futureofchildren.princeton.edu/>

- Links to websites/articles which discuss childhood food insecurity and the pandemics impact on youth:
- <https://www.urban.org/research/publication/evidence-based-strategies-end-childhood-food-insecurity-and-hunger-vermont>
- <https://g4yd.nipissingu.ca/wp-content/uploads/sites/72/2021/03/Bruner-et-al.-2020-IRSEP-PYD-Meta.pdf>
- <https://www.trinitysportsorganization.org/>
- <https://www.psychiatrictimes.com/view/new-findings-children-mental-health-covid-19>
- <https://www.unicef.org/press-releases/impact-covid-19-poor-mental-health-children-and-young-people-tip-iceberg>
<https://www.washingtonpost.com/sports/2021/04/02/youth-sports-parents-poll-coronavirus/>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html>

- **Evidence Based Expenditures.**

The full amount of \$71,000 is for evidence based interventions based on our own review and investigation; our knowledge of the beneficiary or subrecipient's operations; information from the beneficiary or subrecipient; and scholarly articles and other publications. The need for this project in the demographic area where Beneficiary's operations are located is high. Allowing children to be nourished and to participate in

structured programs instead of wandering the streets is important to the health and welfare of the children and the community.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Number of children participating in the organization's programs;

Number of meals served;

Demographics.

Start Date of Construction: _____

Start Date of Operations: _____

Project

Project [Identification Number]: Greater Waco Sports Commission [A2-602108-1]

Funding amount: \$96,525

Project Expenditure Category: [2.34, Assistance to Impacted Nonprofit Organizations]

Project overview

- The Greater Waco Sports Commission seeks to encourage and develop local, healthful amateur sports and activities, while at the same time bringing in bigger competitions for qualified locals to participate in, and for others to enjoy watching in the fresh air of the outdoors. Beneficiary operates from 1) donations; and 2) revenue raised by the events. Unfortunately, the pandemic forced the cancellation of several events/benefits which caused the Beneficiary to lose a significant of revenue amount based on past events. These losses have hurt Beneficiary's ability to plan and stage new events and to provide for local competition, leagues, and spectator sports.

- Use of Evidence
- *Goal is to provide aid to a non-profit that suffered revenue loss and increased costs due to the pandemic.*
- <https://wacosports.org/>
- <https://www.sportstravelmagazine.com/sports-and-covid-19-what-happened-earlier-this-summer/>
- <https://www.un.org/development/desa/dspd/2020/05/covid-19-sport/>
- <https://www.tennessean.com/story/sports/2021/03/01/can-sports-fans-catch-covid-19-in-stands-nashville-predators-tennessee-titans/4547972001/>

- **Evidence Based Expenditures.**

The full amount of \$96,525 is for evidence based interventions based on our own review and investigation; our knowledge of the beneficiary or subrecipient's operations; information from the beneficiary or subrecipient; and scholarly articles and other publications.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

- Has the Greater Waco Sports Commission scheduled events for this area at a level similar or greater than it had pre-Pandemic? Review at 12 and 24 months. Documentation required.

Project

Project [Identification Number]: McLennan County Operational/Facility Project

- [A1-607106-1] McLennan County Court Cleaning Prevention \$146,815
- [A1-501000-1] McLennan County PPE \$14,065
- [A1-701000-1] McLennan County Air Purification \$363,249
- [A1-411960-1] BASE Security \$13,628
- [A1-411960-2] Nurses Administering County COVID Testing \$280
- [A1-601111-1] BASE Rental and Equipment Set up \$58,650
- [No ID Number assigned] HVAC Upgrade Est. Cost \$5,000,000

Funding amount: See above

Project Expenditure Category: [1.4, Prevention in Congregate Settings, 1.5, Personal Protective Equipment, 3.1 Public Sector Workforce Payroll and Benefits for Public Health, Public Safety or Human Service Workers, 1.14, Other Public Health Services]

Project overview

- This project is to enhance the health and safety of County operations at County facilities.
 - Operational - The County has expended funds for the purchase of PPE, cleaning/sanitizing Courtrooms and facilities, renting an office campus location to hold jury calls/trials, providing security at the off campus facility and overtime for nurses assisting in Covid testing for County employees.
 - Facilities – This project is being used to focus on enhancing County facilities and technology to ensure safe and healthy operations within its public safety and judicial functions.
 - i. This Project would allow the County to upgrade its existing HVAC units to newer units that allow the introduction of outside air into the facilities. Introduction of outside air would allow for better ventilation and better air quality in congregate settings, such as courtrooms and jails. The County's current units range from 10-18 years in age and do not have this capability. As an example, the historic McLennan County Courthouse was constructed in 1902. Its hallways are not air conditioned/heated.
 - ii. Air Purification Units. These units utilize proprietary technology shown to be highly effective in disabling the virus that causes COVID-19. Units would be deployed at jail(s), court facilities, high traffic areas like the Tax Office, etc.

Use of Evidence

- *Goals are:*
 - *To improve health/safety of working environment*
 - *To improve health/safety of County facilities for the public*
- Links to websites/articles which discuss solutions for bettering air quality in public locations:
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/ventilation.html>
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/office-buildings.html>
 - <https://www.epa.gov/coronavirus/ventilation-and-coronavirus-covid-19>

- https://www.cdc.gov/niosh/emres/2019_ncov_ppe.html

ActivePure Air Purification Units:

Active Pure is proven to reduce 99.8% of the SARS-CoV-2 virus on surfaces within 7 hours and is highly effective against the airborne virus. See

www.activepure.com

- **Evidence Based Expenditures.**

Based on scholarly articles and other publications, and results of published tests, these funds are being expended for evidence based interventions.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects, the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Levels of COVID-19 exposure in the workplace. Numbers of COVID-19 cases. Also, air-quality testing.

Project

Project [Identification Number]: Arsenic Mitigation [No project number assigned]

Funding amount: \$4,400,000

Project Expenditure Category: [5.13, Drinking Water Source]

Project overview

- The County has allocated \$4.4 million in funding to assist water service providers in meeting the EPA's arsenic standard for drinking water. The Commissioners' Court has determined that the most equitable way to distribute the funding is based on the number of meters located in McLennan County. Final details and implementation of this project are still being worked on.

- Use of Evidence

- Goals are:

- *To provide aid to ensure a clean drinking water source.*
- <https://www.epa.gov/dwreginfo/drinking-water-arsenic-rule-history>
- https://www.epa.gov/sites/default/files/2014-03/documents/arsenic_toxfaqs_3v.pdf
- https://www.epa.gov/sites/default/files/2021-04/documents/arsenic_april_2021.pdf

- **Evidence Based Expenditures.**

The full amount of \$4,400,000 is for evidence based interventions. This is based on scholarly articles and other publications, review of the project, advice and involvement of professionals, and knowledge of the water service providers' operations.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Has the Arsenic level been reduced to comply with the EPA standards?

Project

Project [Identification Number]: Tehuacana Creek Water Improvement District [A5-604162-1]

Funding amount: \$30,000

Project Expenditure Category: [5.13, Drinking Water Source]

Project overview

- This is a Baseline Water Quality and Environmental Health Survey of NRCS Reservoir 19. This project is to characterize baseline water quality and environmental health in NRCS Reservoir 19 located northeast of Waco in Hill County. Baseline water quality and environmental information will be used to evaluate causes of water quality and environmental changes resulting from construction of an adjacent municipal landfill. This landfill is proposed to be constructed north of the reservoir between Horse and Packwood Creeks which are tributaries to Reservoir 19.

- Use of Evidence

- Goals are:

- *To provide aid to conduct a study to ensure a clean water source.*

- <https://www.epa.gov/eg/landfills-effluent-guidelines>

- <https://www.cleanwateraction.org/tags/landfill>

- **Evidence Based Expenditures.**

The full amount of \$30,000 is for evidence based interventions. This is based on scholarly articles and other publications, review of the project, advice and involvement of professionals, and knowledge of the District's operations.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

*Is the water quality impacted by the construction/addition/operation of the landfill?
Review 12, 24 and 36 months after receipt of the grant.*

Project

Project [Identification Number]: Paul Tyson Field Demolition [No Project Number Assigned]

Funding amount: TBD

Project Expenditure Category: [6.1, Provision of Government Services]

Project overview

- This is the provision of Government Services to demolish an old football field that was involved in a land exchange with Waco ISD as part of a larger “Venue Project.” The overall project will bring outdoor recreational activities to an inner-City neighborhood.

- Use of Evidence

- Goals are:

- To provide recreational activities in an inner-City community.

<https://outdoorindustry.org/article/increase-outdoor-activities-due-covid-19/>

<https://extension.unh.edu/blog/2021/04/outdoor-recreation-impacts-community-economy-during-covid-19>

- **Evidence Based Expenditures.**

The full amount will be for evidence based interventions. This is based on scholarly articles and other publications, review of the project, advice and involvement of professionals, working with the City of Waco Parks and Recreations Department on the entire project, working with Waco ISD and knowledge of the existing neighborhood.

- **Performance Report**

Depending on the goals of the Project, performance indicators may change. However, in most instances performance indicators will relate to the number of people served or assisted and in some instances demographics. In longer term capital projects the performance indicators may be the construction itself where there is reasonably strong evidence that the construction of the Project itself will cause the goals to be met. We are currently working on refining performance indicators for each Project. In the interim, the performance indicators for this Project would appear to be:

Has the neighborhood been enhanced by the removal of the old structure?

Has the community had increased access to outdoor recreation in the area?

Review 12, 24 and 36 months after receipt of the grant.