Polk County, IA Recovery Plan

State and Local Fiscal Recovery Funds 2025 Report

2025 Recovery Plan

Table of Contents

General Overview	2
Executive Summary	
Uses of Funds	
Promoting Equitable Outcomes	
Community Engagement	7
Labor Practices	7
Use of Evidence	7
Performance Report	7
Project Inventory	8
Project Inventory	8

GENERAL OVERVIEW

Executive Summary

Polk County has utilized ARPA funds to implement several measures to respond to the COVID-19 pandemic. Throughout 2021 the Polk County Board of Supervisors underwent a strategic planning process to ensure that initiatives were created around four key areas, including affordable housing, mental health, water quality and economic stability. The planning assumption were that funded initiatives would provide a long-term impact, promote collaboration, examine system changes, demonstrate scalable interventions, and address social disparities. Polk County expended funding in the following categories:

Near future intended uses

Projects are underway to address the immediate impacts of COVID-19 in our community, meet public health and safety needs, and initiate efforts around water quality, mental health, economic stability and affordable housing issues. These initiatives include:

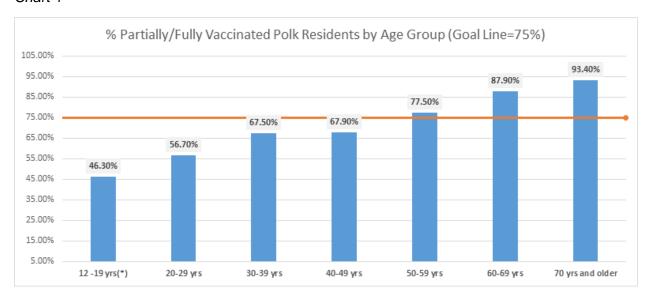
- Ongoing efforts to maximize vaccination rates among Polk County residents. Upon receiving the first round of ARPA funds on May 20, 2021 Polk County initiated a series of vaccine incentives h with the goal of reaching a 75% county vaccination rate by Labor Day Weekend of 2021. During that timeframe vaccination rates rose from 61.2% to 73%. Through June 30, 2022 Polk County's vaccination rate is hovering at 75% of the total population receiving at least one dose. A key focus of the county's targeted vaccine outreach has been and will continue to be to residents residing in underserved census tracts. See Chart 1 below.
- The Polk County Emergency Operations Center was the central hub for the COVID-19 response and was utilizing original technology. An RFP was created and bids were received to upgrade the technology available in the emergency operations center and installation of the equipment is substantially complete.
- Training has been conducted with local 911 operators and police departments to better response to mental health calls to 911.
- The State of Iowa provided \$5 million of matching funds to assist Central Iowa with a merger
 of the Public Safety Answering Points' Computer Aided Dispatch systems into a single
 system. The goal of this initiative is to reduce response time for fire and police who are
 responding across multiple jurisdictions.
- Polk County has recouped lost revenue in conformity with U.S. Treasury rules.
- Polk County has invested in the tourism and hospitality industry by funding select operational and capital expenditures at the lowa Events Center and the Hilton Hotel.
- Polk County provided \$15,150,000 to address affordable housing needs in our community.
 The funds were obligated via a subrecipient agreement with the Polk County Housing Trust
 Fund with the intention to provide gap funding for permanent supportive housing
 developments that target those at 30% AMI and under. The Polk County Housing Trust
 Fund's Development Committee began receiving applications in June of 2022 and received
 \$42 million worth of requests.
- Polk County has engaged a third party local research firm to study rent assistance recipients and their long-term needs. This concept would include interviews of individuals receiving Emergency Rental Assistance Program (ERAP) funds that are currently being administered through our local Impact Community Action Network with the goal of learning more about

the circumstances that have led recipients to need assistance. This data would be used to make informed and strategic decisions about how to invest ARPA funds to impact affordable housing.

Long term intended uses

Polk County has undergone a strategic planning process that included stakeholder discussions and public input sessions around four categories of work that will address human services and equity in our community. These four categories include affordable housing, mental health, water quality and economic stability. Criteria will be developed that seek proposals which go above and beyond current operations and plans. Proposals will be sought that address gaps in human services, equity issues and sustainability issues and that promote collaboration.

Chart 1



Uses of Funds by Expenditure Category

a. Public Health (EC 1)

Polk County is committed to a strong and equitable recovery by empowering the Polk County Health Department to prioritize the importance of a robust vaccination effort and to devote the resources to ensure this message is delivered to residents of Polk County, especially the hard to reach communities, such as the recently immigrated, the transient and the non-electronically connected citizens of Polk County. Tactics that will continue to be deployed include targeted marketing, a senior call center, and funding health navigators in immigrant and refugee communities to assist in vaccination education campaigns.

b. Negative Economic Impacts (EC 2)

Strategic planning is underway to address negative economic impacts at the household level. Current recipients of housing assistance dollars through ERAP will be surveyed to identify long-term, systemic issues around housing so housing initiatives funded by ARPA can address long-term housing instability and economic opportunities for low-income residents. Additionally, lowa

State University Extension conducted a multi-county survey of small businesses and non-profits to assess current needs and gaps. This information will be used to inform decision making on future assistance to small businesses and non-profits.

Polk County intends to use ARPA funds to address the negative economic impacts of the pandemic on the County-owned Iowa Events Center and associated hotel. Financial assistance will be provided to offset revenue losses experienced by this facility and to invest in capital improvements, thereby allowing continued operations in a safe and sustainable manner.

- c. Services to Disproportionately Impacted Communities (EC 3) When applicable, programs and policies will be informed by relevant census tract data and previously gathered economic data to ensure all Polk County residents can participate in a strong and equitable recovery. Inclusion, diversity and community wide participation will be priorities of all programming.
- d. Premium Pay (EC 4) N/A
- e. Water, Sewer, and Broadband Infrastructure (EC 5)

Polk County is participating in several regional projects that are underway to address these issues. The Central Iowa Water Trails project is an initiative that aims to increase access to Iowa's rivers while using the recreational interest in water to generate momentum on critical water quality projects. The Greater Des Moines Partnership is currently undertaking a survey on regional broadband access.

Additionally, Polk County has begun an extensive infrastructure project that will connect 150 rural residences to a city water main. These homes have been utilizing sand-point wells that were unsafe and unreliable. During a recent large storm, these homes were cut off from a potable water source. Polk County's financial commitment to this project was \$600,000

f. Revenue Replacement (EC 6)

Polk County has completed a comprehensive review of all lost revenue and will continue to utilize U.S. Treasury guidance in compiling future projections. The current amount of this revenue replacement calculation is approximately \$75,857,072.57.

g. Other Federal Recovery Funds.

Polk County has been a leader in administering Emergency Rental Assistance Program (ERAP) funds that were distributed from the CARES Act. Both Polk County and the City of Des Moines requested these funds directly from the State of Iowa and administered them through IMPACT Community Action Partnership. IMPACT has delivered assistance to households more efficiently than the state and was able to provide up to three months rental assistance without requiring the renter to first become delinquent on payments. We are currently working with the State of Iowa to access an additional \$30 million to be administered in our community. Additionally, at the beginning of the pandemic Polk County committed \$800,000 for rental assistance that was administered at the Polk County Courthouse by staff from Iowa Legal Aid and the Polk County Housing Trust Fund. Staff worked with landlords who were at the Courthouse for eviction proceedings. In almost all

cases, a direct payment to the landlord was made in lieu of evicting the tenant, and the landlord was connected to additional resources to mitigate future eviction efforts. Polk County provided additional funds and helped leverage private contributions. These funds were not ARPA funds but this narrative has been included in this report as an example of how ARPA funds could potentially be expended and to illustrate the collaborative and creative nature of our community.

Polk County and IMPACT are currently implementing a non-mandatory study of rental assistance recipients to assess ongoing housing needs.

Promoting Equitable Outcomes

Polk County will promote equitable outcomes throughout the ARPA process. This will be accomplished by conducting open meetings, soliciting input, publicizing the target area of concern. A 2020 report by One Economy found that African Americans and Africans comprise 7.1% of the total population in Polk County, representing 27% of all African Americans and Africans living in the state of Iowa. However, the median household income for an African American or African household was \$33,816 compared to the \$63,530 median household income for all of Polk County. On nearly every economic measure examined, including banking, housing and employment, racial wealth disparities were evident. Addressing these disparities will be a primary focus of Polk County's use of ARPA funds to address economic stability and utilizing current data to establish benchmarks.

- a. Goals As plans are made for utilization of ARPA funds, Polk County will add additional focus on historically underserved, marginalized or adversely affected groups or areas, such as the historically "redlined portion of Des Moines." This includes African Americans, immigrants and refugees and the Latino community.
- b. Awareness Polk County has a strong group of community, civic, fraternal, service and neighborhood organizations that will be utilized in the dissemination of information regarding ARPA services. The One Economy report outlines disparities in our community and includes a Blueprint for Action that will be used to implement COVID-19 recovery strategies equitably. The priority topics in the report include financial inclusion, employment, education, health and housing. These priority topics align with several of the priority topics identified by the Polk County Board of Supervisors.
- c. Access and Distribution Polk County is committed to an open and transparent process that ensures equal access to benefits and services for all residents of Polk County. As part of the COVID-19 recovery process Polk County will examine the administrative requirements of all of the assistance programs available to the community specifically to address disparities that negatively impact disadvantaged and underserved communities.
- d. Outcomes Polk County's ARPA plan and process is rooted in the belief that closing gaps and achieving universal levels of service and eliminating any equity disparities is an essential focus of ARPA funding efforts. The Board of Supervisors will host a series of workshops with subject matter experts and community members for each identified priority area. The goal of these sessions will be to identify areas where ARPA funding can be strategically used and establish benchmarks and outcomes. Each priority topic will include outcomes related to resolving racial inequity.

e. Equity Strategy by Expenditure Category

Negative Economic Impacts (EC 2): Refer to paragraph above regarding data collection and public input.

Services to Disproportionately Impacted Communities (EC 3): The Polk County Health Department has worked extensively with local neighborhood and community groups to reach as deeply as possible into disproportionally impacted communities. Additionally the Polk County Community, Family and Youth Services Department has worked collaboratively with the City of Des Moines to coordinate all aspects of rental housing assistance. Local funds have been used to create a "health navigator" program that pays leaders of immigrant and refugee communities to participate in COVID-19 mitigation training and conduct outreach in their respective communities. Additionally, COVID-19 vaccination rates are available by zip code and current Polk County data shows that a disproportionately lower number of people are vaccinated in underserved communities. Vaccination incentive campaigns will be tailored this fall to reach these neighborhoods.

Directing the use of ARPA funds towards establishing affordable housing, addressing mental health issues, and promoting economic stability specifically support the goal of providing needed services and opportunities for disproportionally impacted communities.

- f. Data Polk County established a process for public input in our four strategic areas. Qualitative and quantitative data was sought from the public and from key stakeholders and subject matter experts.
- g. Geographic Distribution of Funding To date the largest amount of ARPA funding has been directed at incentive programs to increase vaccination rates. These education efforts have been targeted to the general population in Polk County. Additional investments have been made to fund vaccine promotion through Latino and African American media. Grassroots outreach efforts have also been made to reach immigrant and refugee communities.

Community Engagement

Polk County has proactively reached out to as many traditionally underserved groups as possible through various means including: community meetings, visiting neighborhood associations, and implementing a paid and free media strategy. Additionally, funds have been expended to hire health navigators from immigrant and refugee populations. They completed a training session with the Polk County Health Department and are now paid to host community education sessions.

In the creation of long-term strategic investments, Polk County is committed to expanding our outreach efforts to acquire this information and to ensure the public is well informed and has multiple avenues to provide this information. These efforts will include public input forums, requests for public written comments through regular mail, email and public surveys on the Polk County website. Outreach to civic

groups, community-based organizations and any other group or organization that responds to the county's request for invitations to make presentations and receive public input. Media outreach, both paid and through public service announcements will be conducted with a special emphasis to underserved communities to invite input and participation in addressing the strategic investment areas for economic recovery and building safe communities.

Examples of tactics that have been used successfully to date include paid media on Spanish language media outlets, community outreach, paid health navigators and a call center for seniors and individuals without internet access.

Labor Practices

Polk County strongly believes in paying a fair and living wage to all workers currently and for any future ARPA projects. Paying the Prevailing wage and complying with Davis Bacon are County policy on all federally funded construction and infrastructure projects.

Use of Evidence

As Polk County begins to create a strategic plan on how to invest ARPA funds, evidence-based benchmarks and evaluations will be determined.

Performance Report

Polk County is in the process of determining both overall performance measures and project-specific project measures. The intent is to collect data related to the impact of ARPA funds on equity, sustainability, climate and economic development. We anticipate developing core performance measures for the overall expenditure of ARPA funds layered with project specific performance measures. Options for consideration in publication of performance measures include a dashboard and a quarterly report issued to the public.

PROJECT INVENTORY

Project 1.1: Vaccination Incentives

Funding amount: \$619,549.26

Project Expenditure Category: 1.1, COVID-19 Vaccination

Project Overview

Polk County has initiated a cash and tuition scholarship incentive program to encourage all Polk County citizens to become vaccinated. From June 25 to August 27 a weekly drawing was held each Friday. Every Friday ten \$1,000 winners were randomly selected. In addition, every other Friday one \$50,000 winner and one \$5,000 scholarship winner were randomly selected. The vaccination lottery was an opt-in promotion that any Polk County resident who had received one J&J vaccination or both of the Pfizer or Moderna vaccinations was eligible for. Other promotions include:

- In the weeks leading up to the Iowa State Fair, Polk County provided two free state fair tickets
 and hosted state fair food trucks at the Polk County Health Department. Several radio stations
 participated in live remotes during these events. They successfully saw up to 215 new
 vaccinations per day.
- In order to encourage more community conversations about the importance of vaccination, Polk County sponsored a non-profit challenge in which a non-profit would receive \$50 per individual vaccinated at the Polk County Health Department on their behalf during the campaign. Youth organizations who work with youth 12 years of age and up were eligible for \$100 for each newly vaccinated youth. The goal of these campaigns was to serve as a conversation starter among trusted community leaders. The promotion ended on September 3, 2021.
- List of weekly winners https://www.polkcountyiowa.gov/health-department/2019-novel-coronavirus-covid-19/covid-19-vaccine-lottery-winners/

Use of Evidence

As the COVID-19 vaccination became widely available, it was clear that there were three categories of attitudes towards the vaccine: early adopters, those who strongly opposed to the vaccine, and those whose views were in the middle. Communities began to experiment with vaccination incentive campaigns to boost the number of undecided residents who chose to be vaccinated. A wide variety of incentive campaigns were reported daily during the summer of 2021. The Polk County vaccination incentive campaign consisted of several strategies as described above: a cash lottery, a scholarship lottery for those under 18, free state fair tickets, a non-profit and youth organization match program, and cash gift cards targeted to underserved populations. The evaluation of this program was not formal, it is simply comparing vaccination rates pre and post campaign.

Performance Report

- Polk County had continued to recognize the urgency of the COVID-19 pandemic and has been committed to the ongoing mitigation and vaccination strategies. The Board of Supervisors has continued to support investing ARPA funds to provide additional incentives that will encourage unvaccinated individuals to receive their vaccine. Polk County is currently at 68% vaccinated in the eligible population, with 74.1% having at least one dose. Reaching this level of vaccination has provided our community with the added protection, which is critical in protecting those who are unable to be vaccinated and in discouraging the spread of COVID variants. Polk County provided \$25 gift cards for vaccinations in underserved communities and neighborhoods to reach our goal of 75% vaccinated population.
- As of July 1, 2023 COVID vaccination has become part of daily operations and outreach at the Polk County Health Department. All incentive programs have been discontinued.

At least one dose

Age Group	Polk County residents with at least 1 dose	% of Estimated Census pop with at least 1 dose	Estimated Census Population(*)		
0-4	1,240	4%	34,212		
9-May	11,492	31%	36,508		
19-Oct	38,615	62%	62,295		
20-29	48,403	70%	69,065		
30-39	55,235	79%	69,982		
40-49	50,781	78%	65,361		
50-59	50,886	85%	59,727		
60-69	48,216	98%	49,269		
70 and older	48,526	111%	43,742		
Total	353,394	72%	490,161		

Race	Polk County residents with at least 1 dose	% of Estimated Census Pop	Estimated Census Population(*)
Asian	23,054	96%	23,959
Black or African- American	19,738	52%	38,150
White	294,325	72%	411,634
Hispanic or Latino	27,042	64%	42,477
All County	353,394	72%	490,161

Fully Vaccinated

Age Group	Fully vaccinated population (J&J/2nd dose)	% of Estimated Census pop fully vaccinated	Estimated Census Population(*)
0-4	NA	#VALUE!	34,212
10-May	10,376	28%	36,508
19-Oct	35,731	57%	62,295
20-29	44,092	64%	69,065
30-39	52,052	74%	69,982
40-49	48,894	75%	65,361
50-59	49,558	83%	59,727
60-69	46,889	95%	49,269
70 and older	46,528	106%	43,742
Total	334,120	68%	490,161

Race	Fully vaccinated population (J&J/2nd dose)	% of Estimated Census Pop	Estimated Census Population(*)
Asian	22,027	91.90%	23,959
Black or African-American	18,026	47.30%	38,150
White	282,766	68.70%	411,634
Hispanic or Latino	24,317	57.20%	42,477
All County	334,120	68%	490,161

1st Booster Dose

Date	6/28/2022
Eligible Population	326,554
Based on CDC guidelines	
by type of vaccine	
Population with 1st	180,469
Booster	
Individuals with a 3rd	
Percentage of eligible	55%

Age Group	Eligible Population	Population 1st booster dose	% of Eligible Population With 1st Booster
10-May	8,913	1,068	12%
19-Oct	34,226	11,207	33%
20-29	43,018	15,909	37%
30-39	51,277	23,905	47%
40-49	48,316	25,380	53%
50-59	48,985	30,054	61%
60-69	46,269	34,765	75%
70 and older	45,550	38,181	84%
Total	326,554	179,401	55%

Race	Eligible Population	Population 1st booster dose	% of Eligible Population With 1st Booster
Asian	21,321	11,159	52%
Black or African American	17,039	7,325	43%
Hispanic	23,335	8,126	35%
White	277,665	162,357	58%

Countywide Vaccination Statistics

ZIP	Total Population	Estimate Households Median income (dollars)	At Least One Dose	Percentage AT Least One Dose	Fully Vaccinated	Percentage Fully Vaccinated	First Booster	Eligible 1stBooster	Percentage Booster Eligible Residents	Data by
50007	557	137,917	312	56.0	310	55.7	170	308	55.2	07/20/2022
50009	20,033	80,740	14549	72.6	13975	69.8	7611	13659	55.7	07/20/2022
50021	27,566	87,938	21552	78.2	20701	75.1	11659	20286	57.5	07/20/2022
50023	40,518	91,974	31069	76.7	29685	73.3	16279	29146	55.9	07/20/2022
50032	563	30,109	208	36.9	189	33.6	101	186	54.3	07/20/2022
50035	8,453	97,813	5493	65.0	5289	62.6	2482	5161	48.1	07/20/2022
50046	1,776	76,087	171	9.6	169	9.5	98	163	60.1	07/20/2022
50047	6,497	86,117	276	4.2	270	4.2	154	265	58.1	07/20/2022
50061	2,474	162,059	73	3.0	68	2.7	41	67	61.2	07/20/2022
50073	1,104	83,542	896	81.2	869	78.7	432	859	50.3	07/20/2022
50109	3,221	112,713	1071	33.3	1036	32.2	571	1026	55.7	07/20/2022
50111	15,510	100,589	11990	77.3	11448	73.8	6030	11217	53.8	07/20/2022
50124	4,259	109,931	36	0.8	35	0.8	24	34	70.6	07/20/2022
50131	21,907	89,625	18610	85.0	17675	80.7	10371	17337	59.8	07/20/2022
50156	4,856	75,440	252	5.2	245	5.0	149	243	61.3	07/20/2022
50161	2,033	80,583	243	12.0	245	12.1	126	233	54.1	07/20/2022
50169	2,954	68,654	2514	85.1	2419	81.9	1199	2375	50.5	07/20/2022
50226	7,197	126,708	4664	64.8	4474	62.2	2340	4382	53.4	07/20/2022
50237	3,105	93,690	1763	56.8	1739	56.0	942	1714	55.0	07/20/2022
50243	246	58,333	201	81.7	200	81.3	96	198	48.5	07/20/2022
50244	1,875	77,824	75	4.0	74	3.9	36	74	48.6	07/20/2022
50265	32,539	71,560	25150	77.3	23943	73.6	14202	23500	60.4	07/20/2022
50266	30,515	74,435	13460	44.1	12584	41.2	7172	12347	58.1	07/20/2022
50309	8,228	50,549	7769	94.4	7089	86.2	3697	6942	53.3	07/20/2022
50310	31,965	64,213	22834	71.4	21625	67.7	11971	21092	56.8	07/20/2022
50311	15,936	55,066	9985	62.7	9191	57.7	4965	8981	55.3	07/20/2022
50312	15,732	66,194	12456	79.2	11710	74.4	7686	11502	66.8	07/20/2022
50313	19,306	54,387	10833	56.1	10157	52.6	4860	9882	49.2	07/20/2022
50314	11,231	39,370	7282	64.8	6565	58.5	2573	6294	40.9	07/20/2022
50315	36,097	51,710	23214	64.3	21670	60.0	10445	21043	49.6	07/20/2022
50316	15,892	44,869	9691	61.0	8919	56.1	3886	8595	45.2	07/20/2022
50317	36,665	55,294	22624	61.7	21330	58.2	10201	20735	49.2	07/20/2022
50319	0	-	14	#DIV/0!	13	#DIV/0!	7	13	53.8	07/20/2022
50320	23,724	65,137	13958	58.8	13015	54.9	6038	12610	47.9	07/20/2022
50321	8,663	61,828	5510	63.6	5155	59.5	2866	5013	57.2	07/20/2022
50322	30,980	74,205	23994	77.4	22860	73.8	13347	22435	59.5	07/20/2022
50323	14,870	144,180	5871	39.5	5614	37.8	3212	5495	58.5	07/20/2022
50324	4,889	69,490	3945	80.7	3758	76.9	2282	3696	61.7	07/20/2022
50325	17,278	106,985	9974	57.7	9359	54.2	5541	9165	60.5	07/20/2022
50327	12,025	81,677	8322	69.2	8006	66.6	4388	7845	55.9	07/20/2022
Total	543,239									

Project 1.121: Mental Health Services

Funding amount: \$120,133

Project Expenditure Category: 1.12, Mental Health Services

Project Overview

Polk County, Polk County Sheriff's Office, and Polk County Health Services are partnering with the City of Des Moines, Des Moines Police Department (DMPD), and Broadlawns to create Crisis Advocacy Response Effort (CARE). As an expansion of mobile crisis response, a CARE clinician will be located at the DMPD Communications Center to answer mental health calls and dispatch a non-police mobile crisis team when appropriate.

Explanation of Expenses:

- <u>Training:</u> All 99 dispatchers in Polk County will be trained in Mental Health First Aid (8 Hours), Hearing Voices that are Distressing, Interactive Individual and Family Panels, and Community Diversion Services (8 Hours).
- Mobile Data Computers: Each of the CARE and Mobile Crisis Response Team (MCRT) vehicles need to be equipped with a Mobile Data Computer with connection to the DMPD CAD (Computer Aided Dispatch) application. This will provide real time GPS location of CARE and MCRT units as well as a discrete emergency button that displays to dispatch. It gives the CARE and MCRT units access to incident location history, safety flags and real time notes about the incident they are dispatched on. It also allows them to make notes for follow up, preview incoming trips in que and track their own times and dispositions.
- Communication Radios: MCRT and CARE employees will be dispatched by the DMPD Communications section and need radios for such communications. Our new radio system has emergency activation settings that give them priority service on the radio system as well as moves them to a dedicated radio channel to communicate with Dispatch without any interruptions of radio service. Each piece of equipment inherently has operational benefits, the most important functions are the safety features designed to protect our MCRT and CARE team members during emergency situations they may find themselves in.

Use of Evidence

This project was modeled after the Austin Texas, Communications Center and Police Department.

Performance Report

This initiative was launched in the summer of 2022 and has begun collecting the following data:

- We are currently collecting from the Mobile Crisis Team Members:
 - 1. Total number of calls for service
 - 2. Date of Service
 - 3. First Name
 - 4. Last Name
 - 5. DOB
 - 6. Gender
 - 7. Address of Client
 - 8. Location of Intervention
 - 9. Response Time from Dispatch
 - 10. Length of call
 - 11. Result of Call
 - 12. 24 Hour Follow Up
- We are currently collecting from the Computer Aided Dispatch system:
 - 1. Total number of Mental Health Calls
 - 2. Number of calls transferred to mental health clinician located in dispatch
 - 3. Which Mobile Crisis Unit was dispatched, if any. (Co-responder (police/MH clinician or MH clinician/MH clinician)
- As of July 1, 2025 the CARE team had 6,313 total calls. 3,727 of the 6,313 were handled by the Crisis Advocate in Dispatch (over the phone) and 2,608 of the 6,313 were field responses

<u>Project 1.7</u>: Emergency Management - Emergency Operating Center technology upgrade Funding amount: \$579,781

<u>Project Expenditure Category</u>: 1.7, Other COVID-19 Public Health Expenses including Communications Enforcement Isolation/Quarantine

Project Overview

- Replacement of current outdated audio video and control system to current technological standards in Polk County's Emergency Management Operation Center. The Emergency Operation Center directly supports responses to public health emergencies by serving as a central command center for local responders. The COVID-19 pandemic highlighted the critical need for reliable and efficient technology that allowed partners to continue the prolonged response to the pandemic while social distancing.
- As of July 1, 2023 the installation of all equipment has been completed and been used in multiple joint jurisdictional and regional responses, including severe weather and large event coordination.

Project 1.14: Everystep - Healthy Homes Iowa

Funding amount: \$195,000

Project Expenditure Category: 1.14, Other Public Health Services

Project Overview

- Everystep helped fund home asthma remediation and home modifications across Polk County, prioritizing Impacted and Disproportionately Impacted communities based on census tract data. Healthy Homes Iowa (HHI) is a community partnership to improve child health and healthy home environment of children ages 2-18 diagnosed with an asthma or reactive airway disease. Services include home assessment, child asthma control assessment, education, and advocacy about asthma.
- https://www.everystep.org/provider-resources/healthy-homes

Use of Evidence

Healthy Homes Iowa (HHI) development included national guidance and technical assistance from BUILD Health Challenge and the Green & Healthy Homes Initiative, operating with and on behalf of families at the intersection of health, human services, housing, and community. The program has worked with over 250 Polk County families since its inception in 2015.

Performance Report

- Healthy Homes Iowa has served racially, ethnically, linguistically, and culturally diverse populations. For example, families speaking 11 different languages have been referred to HHI. Though the majority (84 percent) of families speak English as their primary language, nearly 1 in 10 speak Spanish as their primary language. Additional languages spoken include Arabic, Burmese, Karen, Nepali, Somali, Swahili, Tigrinya and Vietnamese. Of the families served, 46% are African-American, 35% white, 12% Asian, and 7% multi-racial. By age, 90% of referrals are for children age 2-12, with 10% being children over the age of 12. Most families referred to HHI rent (59 percent) rather than own (41 percent). Referrals have been received from 17 different zip codes but the majority (58 percent) were made for children living in four zip codes: 50315 (25 percent), 50314 (14 percent), 50317 (11 percent), and 50320 (8 percent). The ability of HHI to serve children and families from diverse backgrounds is critical to the program's success. Healthy Homes Iowa produces tangible results.
- An evaluation of the HHI program by Common Good Iowa indicated the impact of HHI on the management of asthma, the burden asthma places on the child's family, the perceived impact of the intervention and parental empowerment to manage their child's asthma can be evaluated by comparing "pre-intervention" and "post-intervention" assessments of the families referred to the program. The comparison of these two assessments found: The number of asthma-related emergency department visits dropped significantly. Prior to HHDSM, referred families reported an average of 0.5 asthma-related emergency department visits in the previous four weeks. After HHDSM, the average asthma-related emergency department visits dropped to 0. The reduction in asthma-related ED visits represents a savings of \$350 per member per month (or \$4,200 per child on an annual basis). For context, Iowa spends roughly \$2,200 per child enrolled in

Medicaid each year; The number of symptom-free days experienced by children referred to HHDSM increased. After participating in HHDSM children averaged an additional 6 symptomfree days per month. The number of days parents/caregivers had to miss work due to their child's asthma was reduced by 70 percent (from 1.42 days per month to 0.42 days per month). Similarly, the number of days children reported missing school was reduced by 64 percent (from 2.18 absences per month to 0.79 absences). The reduction in asthma-related school absences represents a savings of over \$620 per student each year and moves below the threshold for chronic absence (missing 10% or more of school days). Adult's rating of degree to which asthma is controlled improved from 2.54 to 1.82 on a scale of 1 to 5 where 1 = completely controlled and 5 = severe, persistent, out of control. The understanding of asthma care and management increased for both adults and children following HHDSM intervention. Parents/caregivers were asked to rate their understanding of their child's asthma care management on a scale of 1 to 5, where 1 = no understanding and 5 = very strong. The average rating increased for parents/caregivers from 3.75 pre-HHDSM to 4.68 post-HHDSM. The child's understanding of asthma care and management increased from 2.79 to 3.33 post-HHDSM; Adult's level of stress related to their child's asthma decreased post-intervention (from 2.78 to 2.19 on a scale of 1 to 5 where 1 = no stress and 5 = high stress). Parents and caregivers also reported a reduction in overall stress levels after participating in HHDSM (from 1.74 to 1.41). This could be attributed to the additional community resources families were connected to by HHDSM. The HHDSM program has been able to connect families to a diverse array of resources in the community to help improve the overall health, well-being, and economic security. To date, HHDSM has connected families with energy assistance programs (LIHEAP), employment assistance programs (ELL work group), early childhood development (1ST Five), community home visiting nurses, child development evaluation and intervention, and other home health improvement programs (lead remediation program, food pantry and reduction of food insecurity, safe sleep solutions including beds and mattresses, energy assistance programs, weatherization, family therapy, etc.); and families reported feeling empowered to maintain their homes in a way that manages their children's asthma. This strong confidence in their ability to maintain a healthy home environment could be reflective of HHIs' dual strategy of equipping families with both physical remediation to their homes as well as the knowledge and information to manage their children's asthma.

 With the assistance of the ARPA funding, HHI has set goals for the next year of programming to serve 100 families with Outcomes Measures: Achieve clinically significant improvement in postintervention asthma control indicators by 3 or more points for children 12 years and older; improve indicators by 2 or more points in children 11 years and younger; reduce emergency department visits by 10%; increase number of symptom-free days by 10%; and program satisfaction of 75% or greater.

Project 2.37: Polk County Financial Empowerment Center

Funding amount: \$600,000

Project Expenditure Category: 2.37, Economic Impact Assistance: Other

Project Overview

- Polk County Financial Empowerment Center provides individuals and small business owners
 free one-on-one financial counseling. This initiative was created in partnership with the Cities
 for Financial Empowerment Fund and is hosted at the Evelyn K Davis Center for Working
 Families in the heart of one of our most underserved communities. This free service has been
 crucial for supporting individuals and small businesses who were financially impacted by the
 COVID-19 pandemic.
- Website: https://www.polkcountyiowa.gov/community-family-youth-services/community-and-family/financial-empowerment-center-home/

Use of Evidence

Our counselors get their primary content training through the national association of certified credit counselors https://fcnonline.org/

- Then they receive their CFE Fund Financial Counselor certification based on additional requirements that include the data tracking part https://cfefund.org/overview-financial-empowerment-center-fec-counselor-training-standards/
- Each certification exam is written in accordance with The Standards for Educational and Psychological Testing developed by The American Educational Research Association, The National Council on Measurement in Education, and The American Psychological Association. All exams are monitored by testing and measurement experts (such as industrial/organizational psychologists) to ensure content validity, reliability, and non-discriminatory items for protected classes. Exams are administered through proctoring services offered at universities and community colleges, and libraries nationwide. NACCC offers webcam proctoring, please call our office or email exams@naccc.us to get more information on this service.

Performance Report

Our Financial Counseling Center model is heavily data driven, logging client information such as demographics, service plans and goals, then tracking such outcomes as increased utilization of safe and affordable banking, decreased debt and delinquent accounts, increased savings and assets, increased credit scores, establishment of budgets, etc. We get baselines, and track them over time both cumulatively and individually. Information about the three year evaluation process can be found here: https://cfefund.org/cfefund-releases-national-three-year-evaluation-of-municipal-financial-counseling-model/

Since the beginning of the pandemic, the financial empowerment center has accomplished the following:

- o 2,261 clients
- o 8,006 sessions
- \$5,820,320 non-mortgage debt reduction (credit cards, student loans, medical debt, lines of credit, payday loans, vehicles)
- \$974,015 savings increase
- 1,170 clients have resolved delinquent credit accounts
- 475 clients have increased their credit score by 35+ points
- 45% white/Caucasian. 39% black/African American. 65% female. 37% age 21-35. 27% age 36-45
- Income range 50% between \$15,000 and \$55,000. 18% between \$5,000 and \$10,000

Project 2.35: IEC Hotel Operating Expenses

Funding amount: \$2,376,759

Project Expenditure Category: 2.35, Aid to Tourism Travel or Hospitality

Project Overview

- The Hilton Hotel experienced negative economic impacts due to the COVID-19 pandemic.
 ARPA funds can be expended to aid in tourism and hospitality industries and 2.4 million is earmarked to support these operations on an as-needed basis until the facility stabilizes.
- As of July 1, 2023 the Iowa Events Center has returned to and exceeded pre-pandemic levels of business and is able to return to normal operations.

Project 210: IEC Hotel Corp - Lost Revenue

Funding amount: \$3,698,061

Project Expenditure Category: 2.35, Aid to Tourism Travel or Hospitality

Project Overview

- lowa Event Center-Hotel Corp experienced negative economic impacts due to the COVID-19 pandemic. ARPA funds can be expended to aid in tourism and hospitality industries and 3.7 million is earmarked to support these operations on an as-needed basis until the facility stabilizes. This is a grant to replace lost revenue for lowa Event Center Hotel Corporation.
- As of July 1, 2023 the Hilton Hotel performance has returned to and exceeded several key prepandemic performance benchmarks, including Average Daily Rate and group occupancy. Business travel has not reached pre-pandemic levels but is trending positively.

Project 2.371: IEC Public Facility Maintenance Surcharge

Funding amount: \$294,000

Project Expenditure Category: 2.37, Economic Impact Assistance: Other

Project Overview

 Iowa Events Center IEC managed facilitates experienced negative economic impacts due to the COVID-19 pandemic. ARPA funds can be expended to aid in tourism and hospitality industries and \$294,000 is earmarked to support these operations on an as-needed basis until the facility stabilizes.

Project 2.15: Affordable and Supportive Service Complex

Funding amount: \$1,000,000

Project Expenditure Category: 2.15, Long-Term Housing Security Affordable Housing

Project Overview

- A conversion of an under-utilized hotel into a 40 unit affordable and supportive service complex owned and operated by Anawim Housing. This investment successfully leveraged an additional \$3 million in federal funds to assist with this work.
- https://www.anawimhousing.org/

Use of Evidence

The Monarch Apartments will utilize Permanent Supportive Housing as an Evidence Based practice to support people exiting homelessness with housing and voluntary supports. Voluntary supports will be tailored to the individual and will focus on housing stability as the primary goal but secondary goals can include connection to mainstream services, education and employment, improved health and connection to community and family. These quality of life improvements can be measured through increased income or self-reporting assessments. Anawim Housing operates all of our Permanent Supportive Housing utilizing Stage Matched and person centered case management, Motivational Interviewing and Trauma Informed care. Program success is usually measured in housing retention or exits to other permanent housing. 100% of the funds allocated toward the project will be used towards evidence-based practices.

Performance Report

All Permanent Supportive Housing programs are required to participate in data collection and reporting to HUD (U.S Department of Housing and Urban Development) regarding every program participant served in Anawim Housing programs. This reporting ensures Anawim Housing is serving the most vulnerable individuals in our community and to provide challenging benchmarks for program performance and review. The following data points highlight the success Permanent Supportive Housing achieves when there is agency wide commitment to Housing First fidelity.

PROJECT STATUS:

- Through the design process we have been able to increase the total number of units being created to 42
- Project funding is now complete and the construction phase is underway.
- Construction continues at the Monarch Apartments, Anawim's latest Permanent Supportive Housing development.
- Demolition is complete and the mechanical, electrical and plumbing crews are almost done combining every two of the former hotel units into one new Monarch unit.
- Highlights of 2Q:
 - Anawim worked with Polk County to qualify the property as tax-exempt, which represents a savings of ~\$70,000+ per year in property taxes.
 - The general contractor found a "fire sale" deal on the flooring, securing high-quality Mannington brand luxury vinyl plank for 20% of the normal (budgeted) price.
 - The team updated the appliance package for each unit to a larger fridge (vs. a mini-fridge from the original plans) and oven with stovetop (vs. two-burner cooktop only).
 - The team qualified the building for free wifi through GoogleFiber's "Gigabit Communities" program; GoogleFiber will be in the Merle Hay neighborhood (and the Monarch) by 2Q25.
- o The project was completed in late 2024 and is currently 50% occupied.

PROJECT OUTCOMES:

- Reduce the unsheltered population in Polk County
- Maintain housing stability for those housed
- Tenants will be entered into Homeless Management Information System (HMIS). Data regarding race, ethnicity, gender, income, connection to resources and existence of a disabling condition is available.
- Number of affordable housing units preserved or developed 42 affordable housing units being developed

Project 3.4: Research Study Public Surveys

Funding amount: \$50,000

Project Expenditure Category: 3.4, Public Sector Capacity Effective Service Delivery

Project Overview

- Iowa State University conducted a qualitative and quantitative research study on the ongoing impacts of COVID-19 to small businesses and non-profits in the Central Iowa region.
- This small business and community organization ecosystem was conducted throughout a
 twelve-county region in Iowa (Boone, Story, Marshall, Guthrie, Dallas, Polk, Jasper, Poweshiek,
 Adair, Madison, Warren, and Marion). The first phase included stakeholder meetings and
 facilitated sessions to understand challenges and strengths related to community capitals
 (financial, political, social, human, cultural, natural, and built). This was followed by a business
 and community organization survey to understand further details of specific topics that were

identified from the stakeholder sessions. Based on survey and stakeholder session findings, an action planning session occurred to determine next steps and roles for partners to ensure action regarding needs and priorities.

- Core Values are inherent to our work that we want to accomplish:
 - i. Equity and Inclusion: intentional engagement with and support for minority owned and operated businesses and organizations
 - ii. Resilience: innovative strategies to increase business and organization survival rate
 - iii. Creativity: fostering dynamic and innovative thinking
 - iv. Networking: strategic and aligned partnerships to support regional development
 - v. Investment: deliberate support for access to capital and financing, information, and services

Performance Report

Two stakeholder meetings were hosted in July and August of 2021with over 60 participants in total. One intent of the study was to host public input sessions, however, while there were both virtual and in-person offering, there was no participation from the public. Additionally, a survey for businesses and community organizations was sent out in August with a total of 140 participants. Both stakeholder meetings and survey requested feedback on goals for the future regarding the small business and community organization ecosystem. The following is a synopsis from responses.

- Increase investment in community organizations and businesses, particularly for BIPOC/ female owned/ immigrant populations. This also includes increased support for partnerships and funding allocations.
- Support for small business start-up and entrepreneurship
- Increase business to business partnership
- Provide equitable Access to healthcare and insurance for all small businesses and organizations
- Increase and develop resilient strategies for small businesses and organizations
- Assess community and business needs, which may include sales, prices, workforce, client needs, etc.
- Developing COVID and general disaster preparedness plans

Project 5.6: Urban Ag Seeding Partnership

Funding amount: \$600,000

Project Expenditure Category: 5.6, Clean Water: Stormwater

Project Overview

 The Urban Ag Seeding Partnership aims at purchasing a specialized cover crop seeder that will be used to create a public-private partnership that builds an increased and sustainable cover

- crop program in Iowa. Polk County Public Works is helping with this initiative and this effort will be target upstream of the Des Moines metro to improve water quality and reduce flooding.
- Improving soil health on agricultural fields is vital to improving water quality and a recent study of the Des Moines Lobe from the Iowa Flood Center identified soil health as the key to reducing flooding. Cover cropping improves soil health, reduces nutrient loss, and improves waterholding capacity within agricultural fields. Cover crop adoption has been constrained by the traditional mindset of a planting window after harvest, considerably limiting success in Iowa. The best option is to overseed cover crops into standing row crops in August or September, resulting in better fall growth and earlier spring emergence. This increases nutrient retention and over winter cover, providing an improved return on investment for both farmers and government programs. A fully set up Hagie with a Montag Fortifier 2212 Cover Crop Seeder is the ideal machinery to increase the volume of acres seeded into standing row crops. These machines provide a better distribution of seed, improved seed to soil contact, and can navigate fields inaccessible to airplanes. Unfortunately, most growers do not have access to this equipment to appropriately seed cover crops and, when relying on alternate options, are often left with nominal cover crop success. This fact, paired with out of pocket costs and the long-term nature of achieving soil health benefits, has hindered adoption of cover cropping. In 2019, the Kansas Department of Health and Environment successfully launched a partnership program that purchased eight of these seeders that were leased to local ag retailers to increase cover crop adoption in targeted watersheds. Utilizing private ag retailers provides a unique opportunity to build a partnership with a trusted source in the agricultural community. This model is not "just another government person pushing conservation," rather it is experienced agricultural businesses providing an additional service to their growers. This Kansas model focuses on stimulating business to develop a conservation market that is mutually beneficial to businesses, growers, and environmental goals.
- Central Iowa Cover Crop Seeder Project will provide water quality and flood reduction benefits
 to meet local watershed goals. The Central Iowa Cover Crop Seeder Project involves the
 purchase of a fully operational cover crop seeder that will improve cover crop success within the
 Des Moines River watershed. Cover Crops provide benefits to soil health that correlates to
 improved water quality and reduced downstream flooding.

Use of Evidence

The Iowa Nutrient Reduction Strategy, is the state's science based plan to achieve our water quality goals. This plan specifically calls out Cover Crops that provide a 30% reduction in nitrate loss on agricultural fields. The NRS has incorporated extensive research to support this practice. https://www.nutrientstrategy.iastate.edu/sites/default/files/documents/NRSfull-130529.pdf

Performance Report

This initiative was launched in July of 2022 and will be documenting the number and location of acres seeded. Our goal is 40,000 acres which would equate to a reduction of an estimated 240,000 pounds of nitrates from entering lowa's water. The cover crop seeder gives farmers a better chance of seeing the expected benefits which improves the chance of long term adoption. As of June 30th, 2025 there have been over 27,132 acres of farmland (which includes 99 different properties) that have benefitted from the use of the cover crop seeder.

Project 6.11: Iowa Events Center

Funding amount: \$1,635,108

Project Expenditure Category: 6.1, Provision of Government Services

Project Overview

 Iowa Events Center IEC managed facilities experienced negative economic impacts due to the COVID-19 pandemic. ARPA funds can be expended to aid in tourism and hospitality industries and 16 million is earmarked to support these operations on an as-needed basis until the facility stabilizes.

Project 6.1: Lost Revenue

Funding amount: \$75,857,072.57

Project Expenditure Category: 6.1, Provision of Government Services

Project Overview

 The amount of lost revenue through fiscal year 22/23 has been calculated at \$\$75,857,072.57 and Polk County may use ARPA funds for the provision of government services to the extent of this revenue reduction.

<u>Project 2.15</u>: Polk County Housing Trust Fund - Affordable Housing

Funding amount: \$15,150,000

Project Expenditure Category: 2.15, Long-Term Housing Security Affordable Housing

Project Overview

- \$12,000,000 to support the acquisition, conversion, and/or construction of permanent housing with an emphasis on supportive housing for underserved populations targeting lifestyle intervention with options for education and workforce training.
- \$3,000,000 revolving loan fund to provide short-term bridge loans acquisition loans and/or funding for due diligence and pre-development expenses. Funded projects will meet the same qualifying purposes of the capital funds.
- \$150,000 for a two year pilot program to hire two community advocates that are not tied to a specific homeless service provider.
- https://www.pchtf.org/about-us/recent-news/pchtf-opens-applications-for-special-allocation-of-american-rescue-plan-act-housing-funds/

Performance Report

a. As of July 1, 2025

4th Q 2022									
Project Name	# 0f 30% AMI	# of 31- 40% AMI	# of 41 - 50% AMI	# of 51 - 60% AMI	#of 61%+ of AMI	Total units in Project	Amount allocated	Paid this Quarter	Paid to date
Johnston Crossing II	8	15		22	5	50	\$940,000.00	\$473,274.67	\$473,274.67
Spire Scattered DSM Sites	0	33	0	0	0	30	\$3,859,772.00	\$3,859,772.00	\$3,859,772.00
								\$4,333,046.67	
1st Q 2023									
Primary Health Care (Community Caseworker)							\$150,000.00	\$18,750.00	\$18,750.00
Tree House Partners, LLC	10		4	10	69	93	\$511,000.00	\$511,000.00	\$511,000.00
								\$529,750.00	
2nd Q 2023									
Primary Health Care (Community Caseworker)							\$150,000.00	\$18,750.00	\$37,500.00
Johnston Crossing II	8	15		22	5	50	\$940,000.00	\$466,725.33	\$940,000.00
								\$485,475.33	
3rd Q 2023									
Hawthorne Pointe (a/k/a The Crossing)									
	0	22	0		14	0	\$1,500,000.00	\$1,500,000.00	\$1,500,000.00
Lyn Crossing (DSMIA, LLC)	0	15	0		30	50	\$393,750.00	\$303,826.01	\$303,826.01
Primary Health Care (Community Caseworker)							\$150,000.00	\$18,750.00	\$56,250.00
								\$1,822,576.01	

4th Q 2023									
Monarch Apartments	40	0	0		0	0	\$1,611,188.00	\$1,611,188.00	\$1,611,188.00
AHEPA 192- IV	90	0	0		0	0	\$1,125,000.00	\$1,125,000.00	\$1,125,000.00
Primary Health Care (Community Caseworker)							\$150,000.00	\$18,750.00	\$75,000.00
								\$2,754,938.00	
1st Q 2024									
Lyn Crossing (DSMIA, LLLP)	0	15	30		0	0	\$393,750.00	\$89,923.99	\$393,750.00
Primary Health Care (Community Caseworker)	0	0	0		0	0	\$45,000.00	\$18,750.00	\$93,750.00
								\$108,673.99	
2nd Q 2024									
Primary Health Care (Community Caseworker)	0	0	0		0	0	\$150,000.00	\$18,750.00	\$112,500.00
								\$18,750.00	
3rd Q 2024									
Primary Health Care (Community Caseworker)	0	0	0	0	0	0	\$150,000.00	\$18,750.00	\$131,250.00
4th Q 2024									
Primary Health Care (Community Caseworker)	0	0	0	0	0	0	\$150,000.00	\$18,750.00	\$150,000.00
(Star Apartments)	6	0	0	0	0	20	\$500,000.00	\$500,000.00	\$500,000.00
								\$518,750.00	
1st Q 2025									
Townhall Apartments	3	0	0	26	0	29	\$529,128.00	\$379,999.00	\$379,999.00
Monarch Apartments	0	0	42	0	0	42	\$267,746.00	\$267,746.00	\$267,746.00
								\$647,745.00	