

St. Louis County, Missouri

Recovery Plan

State and Local Fiscal Recovery Funds

2022 Report



St. Louis County, Missouri

2022 Recovery Plan

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GENERAL OVERVIEW

Executive Summary

St. Louis County accepted its share of the American Rescue Plan Act (ARPA) Coronavirus State and Local Fiscal Recovery Funds (SLFRF) on July 17, 2021. Since then, in coordination with the St. Louis County Council, the Page administration has worked to appropriate funds to programs with an equitable impact for our residents.

The 2022 SLFRF Recovery Plan covers St. Louis County's expenditures for the period covering July 1, 2021 – June 30, 2022. In that time, \$118,690,908.50 of its \$193,112,666.00 total award has been allocated by the County Council and signed into ordinance by the County Executive. These allocations represent just over 61% of the total award that St. Louis County received, with \$74,421,757.50 remaining to be appropriated. The County Council, working with the County Executive and County departments, plans to work together to strategize how to best allocate the remainder of the total award.

From July 1, 2021, through June 30, 2022, St. Louis County government has been busy at work to allocate these funds to address both the immediate public health response needs in the community, while also looking forward to best achieve a strong and equitable recovery from the impacts of the COVID-19 pandemic. This report will go into detail about the status of each of those projects, including the required metrics, data, and goals.

St. Louis County has focused our recovery efforts thus far in four categories:

- **Public Health: \$9,736,259.00 allocated through June 30, 2022**
 - Funds in this category can be used to address the most direct public health impacts of the COVID-19 pandemic, as well as the broader health impacts of COVID-19.
 - St. Louis County has placed a priority on utilizing SLFRF dollars in this category, allocating funds to items including testing, vaccination, vaccination incentive programs, and other eligible public health expenses.
- **Negative Economic Impacts: \$7,000,000.00 allocated through June 30, 2022**
 - Funds in this category can be used to address the negative economic impacts of the COVID-19 pandemic, including services to households, small businesses, non-profits, and other impacted industries.
 - St. Louis County has placed a priority on utilizing SLFRF dollars in this category, allocating funds to projects including the GrandPads tablet program and St. Louis County's Emergency Rental Assistance Program (ERAP).
- **Public Health Sector Capacity: \$2,098,699.50 allocated through June 30, 2022**
 - Funds in this category can be used to support public sector workforce, including payroll, rehiring of public sector workers, and building of public sector capacity.
 - St. Louis County has placed a priority of on utilizing SLFRF dollars in this category, allocating funds to our Public Health Payroll costs, addressing the need created by the COVID-19 pandemic for Public Health services in our community.
- **Premium Pay: \$5,746,108.00 allocated through June 30, 2022**

- Funds in this category can be used to provide pay increases to eligible workers, prioritizing low-income workers and those who face an increased degree of risk as a result of working during the pandemic.
- St. Louis County has placed a priority on utilizing SLFRF dollars in this category, allocating funds to eligible public sector employees throughout St. Louis County government.

In addition to the four categories and projects above, St. Louis County remains committed to utilizing these SLFRF dollars in a fiscally prudent, responsible, and transparent manner. With these goals in mind, St. Louis County has also chosen to allocate funds toward Revenue Replacement (\$91,109,842.00) and to cover the required Administrative Expenses (\$3,500,000.00). The funds set for Revenue Replacement are used to partially compensate for the incredible loss in revenue that St. Louis County experienced as a result of the pandemic. These funds are essential in allowing St. Louis County to continue providing the same excellent level of service our residents are accustomed to, without requiring revenue increases through other avenues. SLFRF guidance also recommends utilizing a portion of these funds for administrative expenses, including legal responsibilities, compliance, program design, auditing, reporting, and other important components required in administering the programs funded by these SLFRF dollars.

St. Louis County is committed to transparency throughout the course of allocating and spending these SLFRF dollars. The County created an [online tool](#) in March of 2021 which allows residents to track up-to-date and easily understandable data on how these SLFRF dollars are being administered. We are also proud of our efforts in reaching out to the community, through town halls, virtual events, canvassing, and a county-wide community needs survey, all conducted in the spring of 2021. In particular, our [Community Needs Survey](#) attracted the attention of many throughout the county, receiving 3,346 responses, with respondents providing feedback from every single zip code in St. Louis County.

St. Louis County is incredibly proud of the progress that we have made by using these SLFRF dollars. We are committed to using these funds in a manner that will make the most impact, listening to our residents and businesses, and remaining transparent throughout the process from ideas to implementation. Working collaboratively and with the help of these federal dollars, St. Louis County is poised to build back from the pandemic in an even stronger position than before.

Uses of Funds

Though June 30, 2022, St. Louis County has appropriated \$118,690,908.50 of its \$193,112,666.00 total award, with \$74,421.757.50 remaining to be appropriated, following the guidance required by the Department of Treasury.

Public Health (EC 1)

St. Louis County, being the most heavily populated County in the State of Missouri, faced numerous health impacts as a result of the pandemic. To best respond to those impacts, St. Louis County is allocating a substantial portion of the SLFRF monies to address public health impacts.

Using SLFRF dollars, St. Louis County allocated \$10,959,958.50 to the Department of Public Health for the immediate use on COVID-19 related expenses, including testing supplies, community health clinics,

corrections medicine, inventory management, and both new County positions as well as contracted clinical staff to assist in these efforts.

St. Louis County also allocated \$875,000.00 for the support of a COVID-19 Vaccination Incentive Program, administered by the Department of Public Health and the Department of Human Services. Under this program, \$500,000.00 was allocated for the purchase of \$100 grocery store gift cards, \$250,000.00 for \$50 gasoline gift cards, and \$125,000.00 in \$50 gift cards to support local restaurants, coffee shops, and other local businesses. These gift cards were distributed to county residents who became fully vaccinated against COVID-19 at a DPH vaccination event and applied during the designated period.

Negative Economic Impacts (EC 2)

St. Louis County has allocated \$7,000,000.00 in SLFRF dollars toward this category to two projects which address rental assistance and internet access programs.

\$2,000,000.00 has been allocated to the GrandPads program, which provides free tablet computer devices to eligible seniors in St. Louis County. Partnering with St. Louis County libraries, these easy-to-use devices are distributed to our senior residents to allow them to access the internet and stay connected with their loved ones as well as friends and health care providers. With this program, the St. Louis County Library is hoping to award around 1,500 devices to area seniors.

\$5,000,000.00 has been allocated to our Emergency Rental Assistance Program (ERAP), which provides funds to landlords of people who are suffering an income reduction and are unable to afford their rent. A summary below includes the amount of both Utility and Rental assistance we have been able to provide to our residents.

ERAP Rental Assistance	
Number of Households Funded	604
Total Paid to Households	\$3,516,150.67
Mean Award Amount	\$5,824.33
Median Award Amount	\$4,735.78

ERAP Utility Assistance	
Number of Households with Utilities Funded	359
Total Utilities Paid to Households	\$200,004.09
Mean Award Amount	\$557.11
Median Award Amount	\$360.22

Public Health – Negative Economic Impact: Public Sector Capacity (EC 3)

Ensuring the continuation of Public Health services to our residents and businesses throughout the County has been vital. Because of this need, St. Louis County has allocated \$2,098,699.50 to our Department of Public Health to cover payrolls costs of those employees providing public health services.

Premium Pay (EC 4)

County services did not stop as a result of the pandemic, and certain employees are required to interact directly with the public. St. Louis County implemented a premium pay program for eligible employees across our Departments of Justice Services, Transportation and Public Works, Revenue, and Administration with an allocation of \$5,746,108.00 to cover those costs.

Water, Sewer, and Infrastructure (EC 5)

While to date St. Louis County does not yet have an approved spending plan for this expenditure category, we intend to consider those items when making future funding allocations.

Revenue Replacement (EC 6)

St. Louis County expended \$30,000,000.00 of Revenue Loss Replacement to fund 2021 Department of Public Health's (DPH) operating costs. This support ensured that the necessary functions of DPH continued, in addition to COVID-19 testing, vaccinations, and staffing for neighborhood clinics and costs related to COVID-19 treatment and prevention in the Corrections Medicine Program. It also ensured continued staffing for primary care, mental health, substance use, and co-morbidities care, and resources to support the opioid strategy plan.

Similarly, St. Louis County expended \$50,000,000 of Revenue Loss Replacement to fund 2021 Public Safety and general government service operating costs. This support ensured that public safety and general government service functions continued uninterrupted in the face of continued COVID-19 variants; allowed for needed resources to address additional staffing needs and recruitment; and allowed funding of a St. Louis County five-year comprehensive land use plan.

As of June 30, 2022, St. Louis County appropriated an additional \$11,109,842 of Revenue Loss Replacement to fund 2022 general government operating costs. With this additional source of funding in 2022, available general fund balances were appropriated to fund: 1) a new updated police Computer Aided Dispatch (CAD) System to track and management public safety incidents and resources; 2) additional staffing needs within the Prosecuting Attorney office; and 3) costs needed to demolish Jamestown Mall.

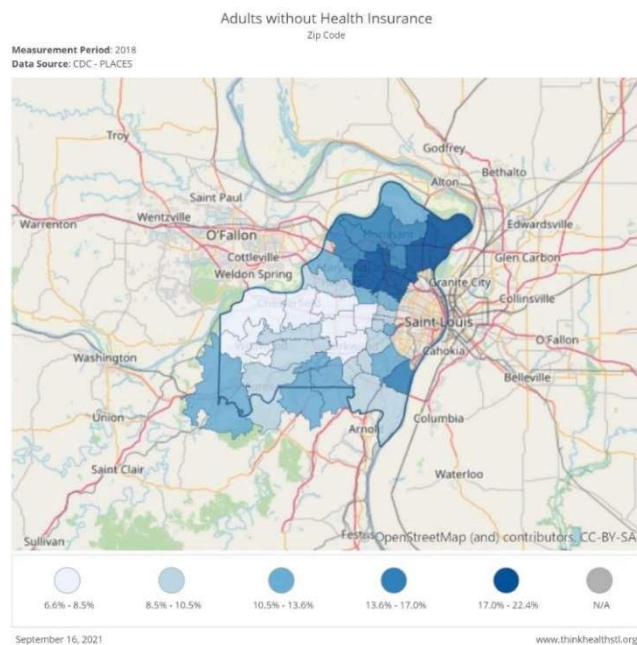
Promoting equitable outcomes

St. Louis County is dedicated to ensuring that all SLFRF dollars are utilized in ways that promote equitable outcomes that tackle systemic issues that predate the pandemic. In St. Louis County, one of our biggest focuses remains access to health care services.

Access to care is the ability to get health care when and where you need it at a price you can afford. Lack of access is of most concern in North St. Louis County compared to other regions of the County due to factors such as lack of health insurance, relatively high levels of poverty, limited health care facilities in the geographical region, and transportation challenges. Inadequate access to care can contribute to limited or delayed utilization of primary and preventive care, delayed identification of illness, preventable emergency department and hospitalization utilization, and ultimately worse health outcomes.

St. Louis County has identified key indicators which show the scale of the issues impacting North St. Louis County.

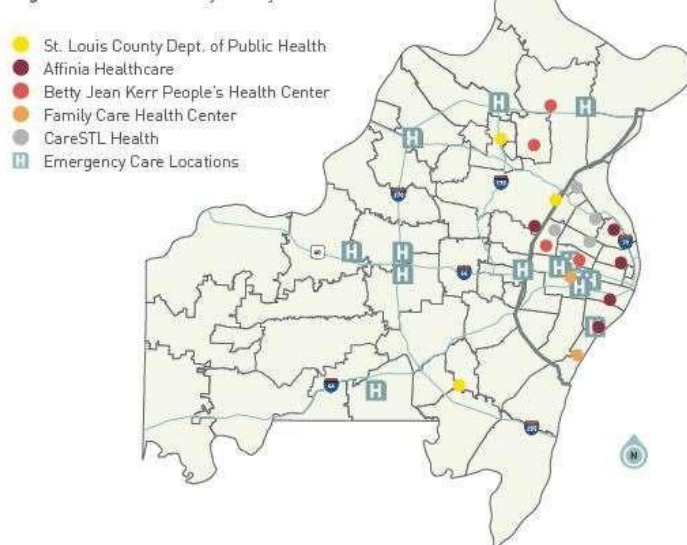
LACK OF HEALTH INSURANCE



North St. Louis County has the largest proportion of residents without health insurance in the County. These zip codes with many uninsured residents are also the zip codes where a high proportion of residents live in poverty.

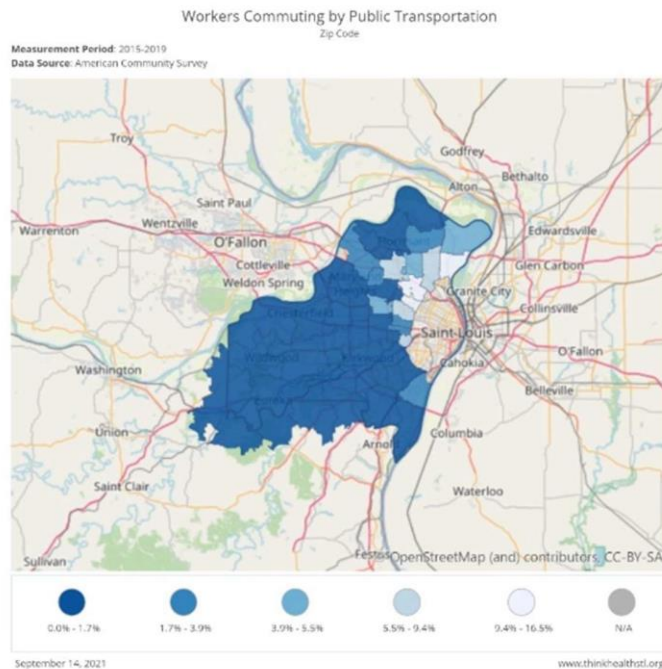
FEW HEALTH CARE FACILITIES

Figure 1: St. Louis Safety Net System



Underinsured and uninsured residents most often utilize safety net facilities because the cost of utilizing services at other facilities is not affordable without insurance. Many areas in St. Louis County with high levels of uninsured residents, particularly areas furthest north such as Florissant, Spanish Lake, and Black Jack, have few safety net health care facilities.

TRANSPORTATION BARRIERS

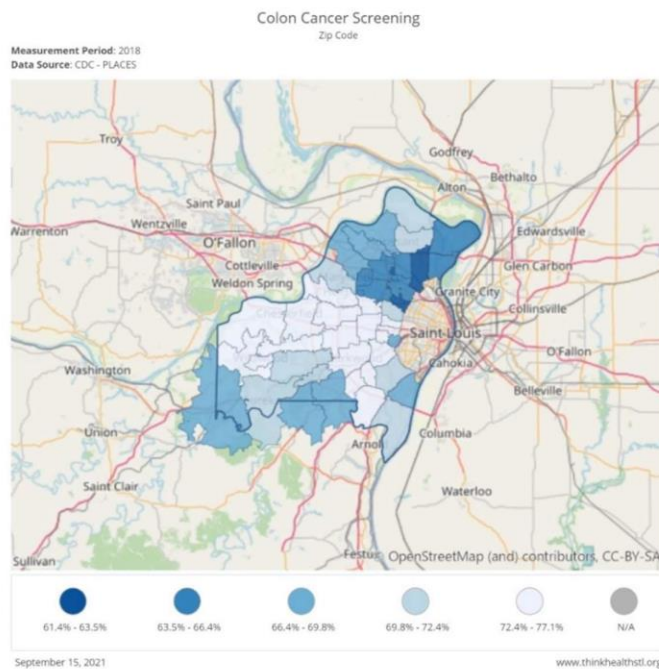


Transportation is a significant barrier to accessing safety net health care services for uninsured individuals in the St. Louis region. North St. Louis County zip codes have the highest rates of workers traveling by public transportation, which can be undependable and time intensive.

Residents are less likely to access needed medical care the longer it takes to reach a facility.

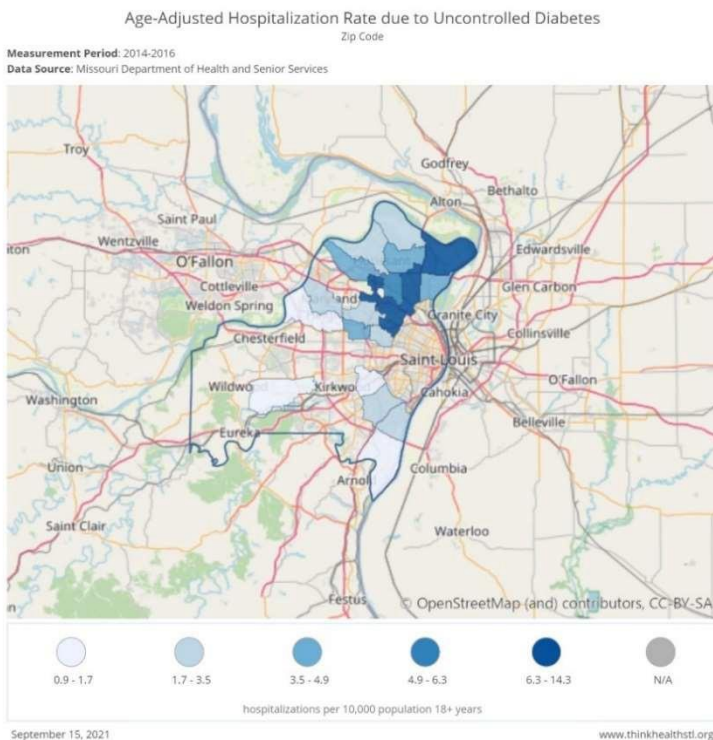
Adding to the time investment to reach services, wait times have increased at most safety net providers.

LOWER UTILIZATION OF PREVENTATIVE CARE



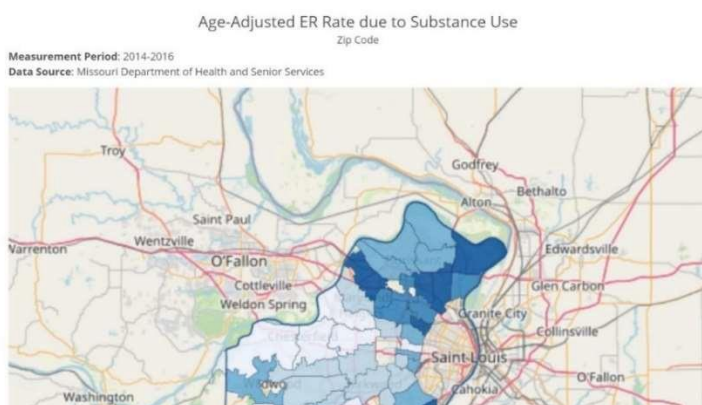
These access challenges are reflected in relatively lower utilization of preventive services and delayed care utilization. For example, proportionately fewer residents in North County get routine colon cancer screenings relative to residents of other parts of the County.

PREVENTABLE ER VISITS AND HOSPITALIZATIONS



Limited or delayed utilization of primary and preventive care can lead to delays in diagnosing and treating illnesses. When illnesses are not treated in a timely manner, they can become more serious and require higher levels of care. This can lead to high levels of preventable emergency department visits and hospitalization.

This pattern is seen in North County, where preventable ER visits are substantially higher than for residents of other areas in the County.



There are high levels of emergency department use and hospitalization for illnesses that could be better treated earlier in a primary care setting if patients had access. For example,

there is a high hospitalization rate due to uncontrolled diabetes in North County zip codes. When chronic diseases are not managed, severe and preventable health consequences can result.

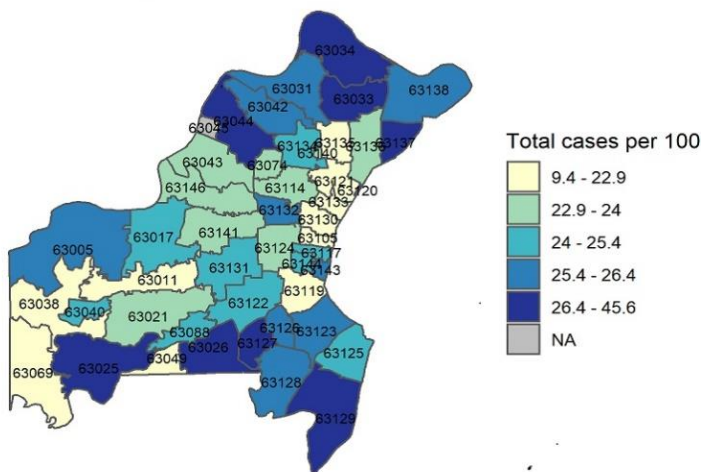
Behavioral health concerns (mental health and substance use) can also often be managed in primary care. However, if not well-managed, behavioral health crises can lead to life-threatening consequences and frequent Emergency Department utilization.

Knowing that certain regions of our County have unequal access to services and as a result have had worse health outcomes is foundational to our understanding of how to best utilize SLFRF funds.

Additionally, DPH is tracking a number of COVID-19 metrics which also show disparities in COVID-19 case and vaccination rates.

CUMULATIVE COVID-19 INCIDENCE BY ZIP CODE (UPDATED AS OF July 14, 2022)

Cumulative COVID-19 Incidence by ZIP Code
St. Louis County residents



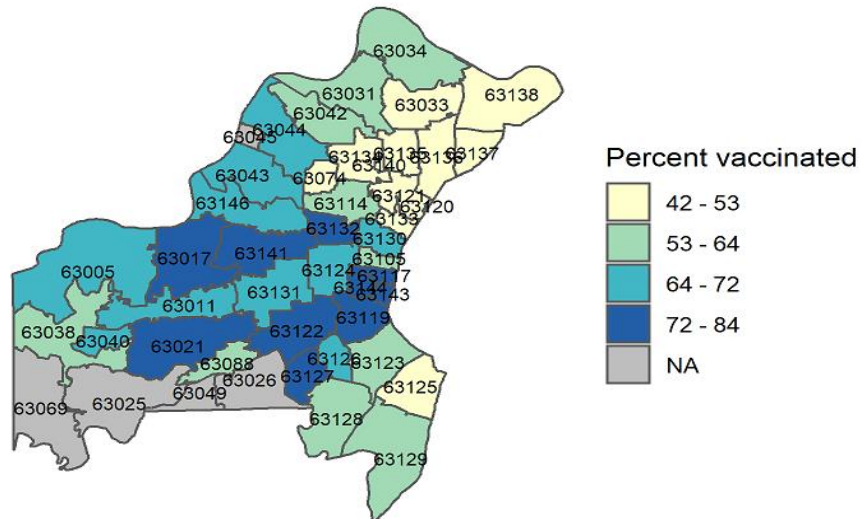
Data current as of July 14, 2022

DPH is tracking case rates by zip code. For much of the pandemic, case rates have been higher in parts of North County and South County. The darker blue zip codes have the highest cumulative incidence rates DPH has directed resources, including testing, PPE, vaccination clinics and education, toward areas with high case rates.

VACCINATION RATES BY ZIP CODE, REGION, AND RACE (UPDATED AS OF JULY 14, 2022)

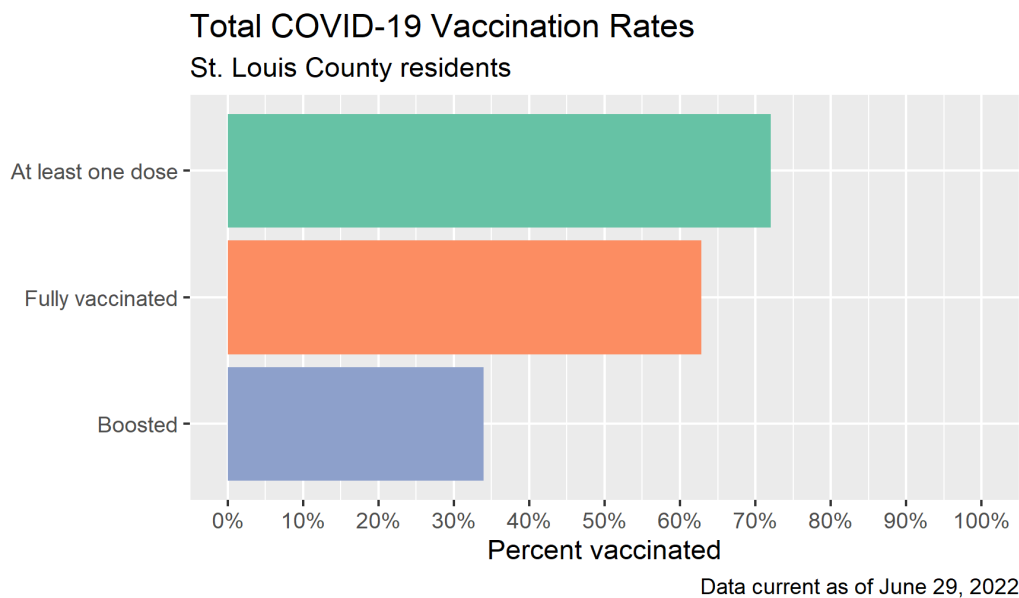
Vaccination Rates by ZIP Code

Fully vaccinated



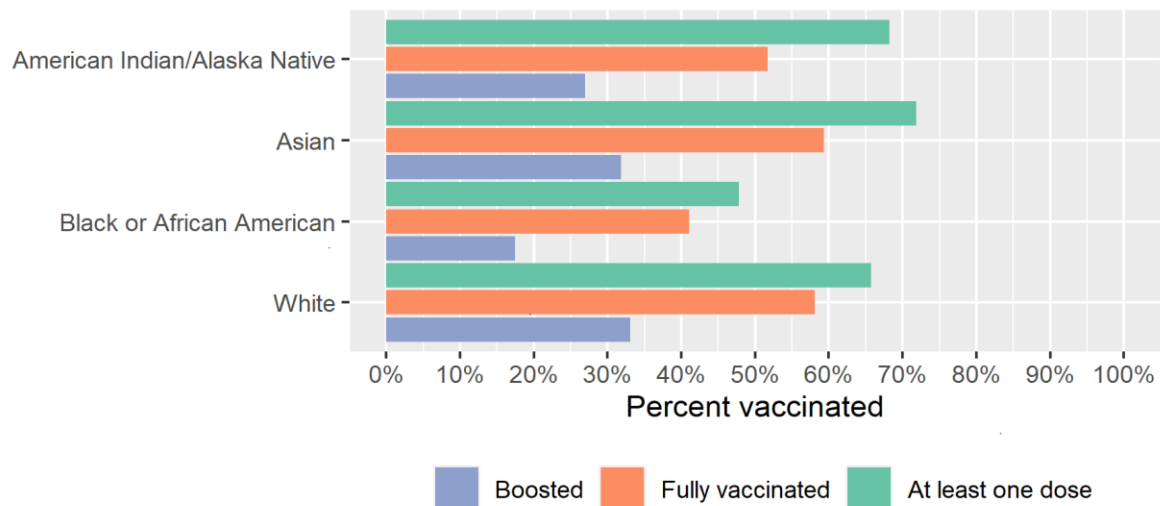
Data current as of June 29, 2022

DPH has also been tracking vaccination rates by zip code, region, and race in St. Louis County. There are existing disparities in vaccination rates in specific zip codes in North County, between certain age groups, in particular children, and among different races. DPH's vaccination strategy has been largely aimed at increasing vaccination rates in the six lowest zip codes in North County. To accomplish this goal, DPH partnered with community leaders in that area and hosted vaccination clinics and educational events for those residents. Additionally, DPH has closely partnered with school leaders to



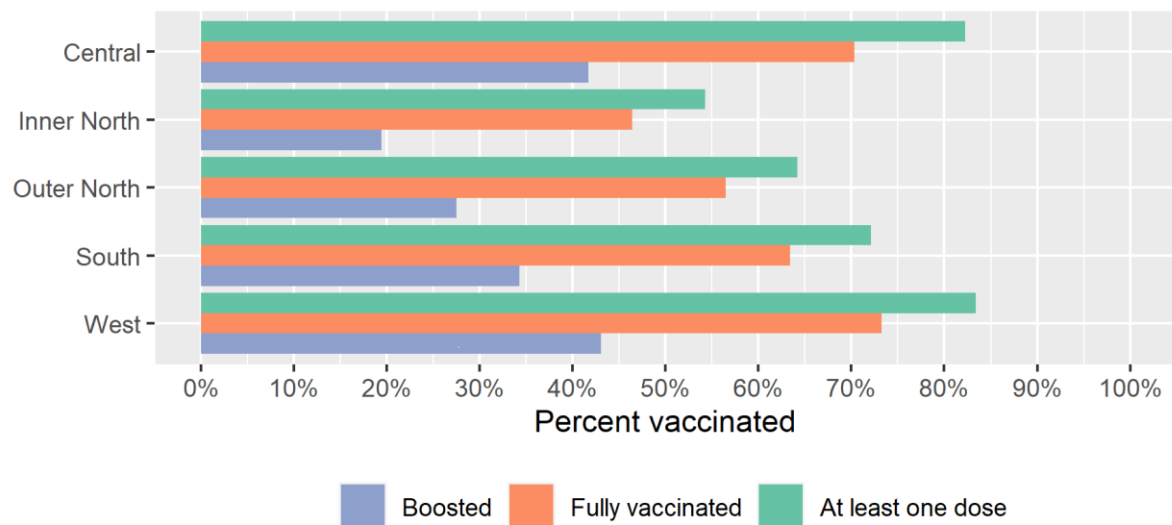
support more children receiving the COVID-19 vaccination.

Total COVID-19 Vaccination Rates by Race St. Louis County residents



Data current as of June 29, 2022

Total COVID-19 Vaccination Rates by Region St. Louis County residents



Data current as of June 29, 2022

DPH's entire COVID-19 response has been guided by health equity. Our permanent testing locations are accessible and located in areas where the people who need them the most can access them. We have evaluated our operations to ensure that there are no unnecessary administrative barriers to accessing a test, such as possession of a government ID. Testing is free and requires no proof of insurance. When possible, we do not require appointments and work hard to make sure our capacity can accommodate walk-ins.

Additionally, our lab evaluates how we process samples so that results are returned to residents as quickly as possible and has taken numerous steps to address these fundamental obstacles to public health in our community. DPH's three permanent, primary care clinics are in epicenters of need, and our existing patient population is largely uninsured and African American. DPH is committed to health equity as an organization and has imbued health equity into our COVID-19 response.

Because DPH has been providing these services for more than two years, we have established regular communication channels for announcements about our testing sites and how to access them. These sites are open to all, regardless of proof of insurance, residency, or appointment, when we can accommodate the volume. DPH has intentionally reviewed our operations and how residents access testing. DPH has carefully developed our operations to eliminate as many administrative requirements as possible so that access to testing, vaccinations, and other primary care services are as accessible as possible for all.

DPH currently monitors case and vaccination rates across gender, race, age, and region. There are existing disparities in case rates, with certain age groups and races testing positive for COVID-19, and there are disparities across these data points in who has been fully vaccinated. DPH is committed to addressing these disparities by providing free and accessible testing and vaccination.

While vaccination efforts have scaled down in scope, our vaccination clinics remain accessible and located at our three health centers in areas where the people who need them the most can reach them. We have evaluated our operations to ensure that there are no unnecessary administrative barriers to accessing a test or vaccine, such as possession of a government ID. Vaccination is free and requires no proof of insurance. We have partnered with community organizations to host vaccination clinics, in addition to providing vaccination clinics at our own primary care clinics. When possible, we do not require appointments and work hard to make sure our capacity can accommodate walk-ins. In our Corrections Medicine program, each person in custody at the Justice Center is offered opportunities to receive a COVID-19 vaccination; DPH also works to provide visitors to the Justice Center an opportunity to receive a COVID-19 vaccination.

Additional details of on how St. Louis County is promoting equitable outcomes are detailed individually for applicable projects in the Project Inventory section of this document

Community Engagement

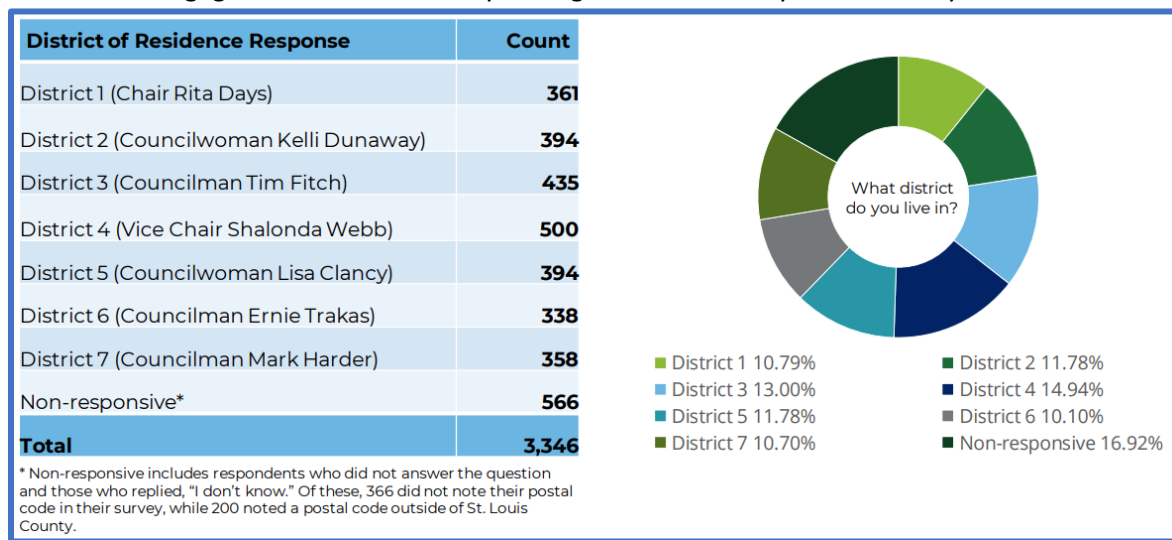
St. Louis County has worked throughout the pandemic to ensure that the community is continually updated on the efforts that the County is undertaking to combat this pandemic.

ARPA Community Needs Survey

At the end of February 2022, St. Louis County launched the ARPA Community Needs Survey. This survey was an effort worked on in collaboration with both the St. Louis County Council and the St. Louis County Executive's office. Our Community Needs Survey contained questions about what priorities those in St. Louis County have on how the County should allocate its ARPA funding allocation. In order to remain

accessible, we were able to make the survey available online in multiple languages. It was also accessible via screen reader technology for those with visual impairments. We made sure to make these surveys easily available through our St. Louis County libraries with an application on the home screen of all library devices as well as paper surveys and distributed those paper surveys upon request for those who did not have access or did not want to use our electronic version.

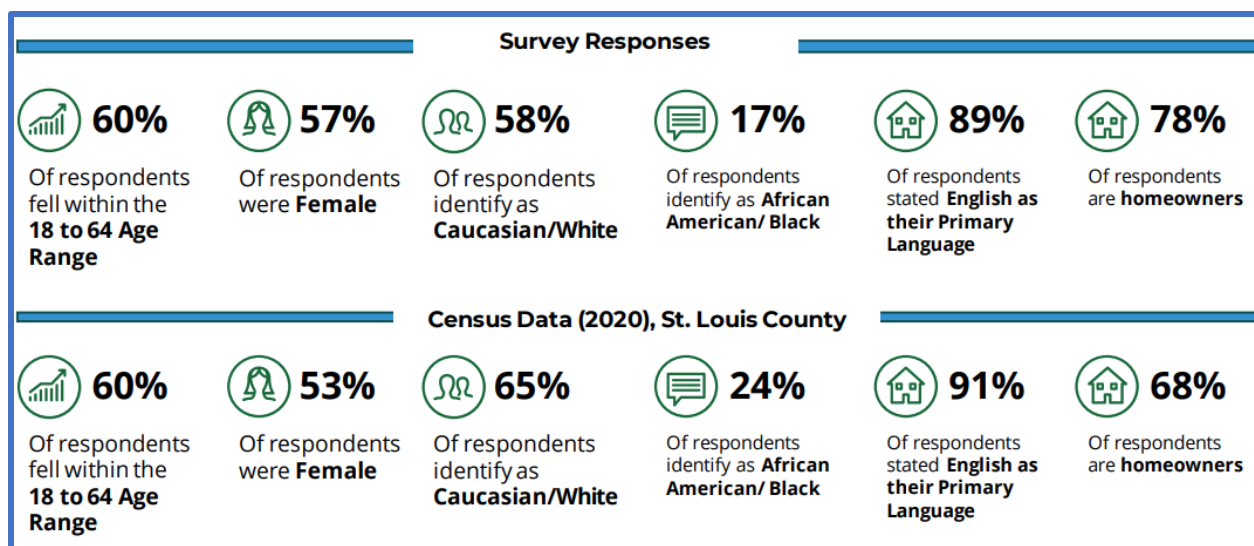
St. Louis County has been committed to public engagement throughout the process of allocating and spending the ARPA SLFRF dollars. An outreach team was created which was responsible for encouraging residents to engage with St. Louis County through the Community Needs Survey.



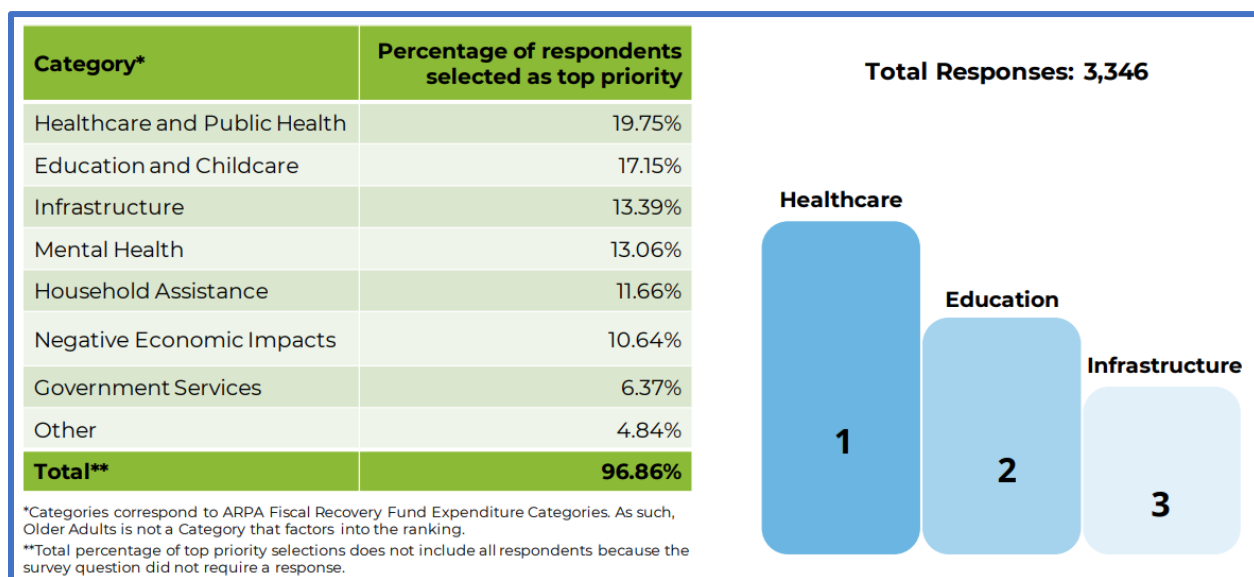
Our

outreach team conducted seven town halls throughout St. Louis County, both virtual and in-person. These events were advertised through social media campaigns, news and radio, public service announcements, and by working with our community partners to engage with stakeholders on the ground.

As a result of these efforts, for our survey period which ran from February 25, 2022 – March 25, 2022, we collected 3,346 responses from across St. Louis County. Additionally, we collected volunteered demographic data on those survey responses, and those responses closely reflected that of the most recently available census data.



Our survey collected valuable information which has been shared with the community and is being used to inform future decisions on how to allocate the remaining ARPA SLFRF dollars. [The full survey results are available online](#), but the snapshot below reflects the primary categories our survey respondents selected as their priorities.



St. Louis County is proud of the efforts made through the Community Needs Survey and will continue to engage with the public as we move forward in allocating these recovery funds.

Department of Public Health Advisory Committees

DPH has formed numerous advisory committees to help us connect with different sectors of the community during the COVID-19 pandemic. We work closely with school leaders, school nurses, youth sports leaders, and restaurateurs. Specifically for the vaccination effort, DPH formed a North County stakeholder group and a South County stakeholder group. Each group was comprised of leaders spanning local government, community organizations, religious organizations, and other service

providers. These groups not only were a sounding board for DPH as we adapted vaccination strategies and approaches but also were critical disseminators of DPH's public health message.

Human Services Rental Assistance Outreach

In our Emergency Rental Assistance Program (ERAP), we have taken steps to ensure that all who are eligible have a route to apply. Both tenants and landlords have been encouraged to apply, which can help bridge the digital divide. For those that lack the technology or the ability to navigate the application process, we will continue our partnership with local non-profits. Translation services are available in households for whom English is not their native language.

Additional details of our community engagement functions are detailed individually for applicable projects in the Project Inventory section of this document.

Labor Practices

Though to date St. Louis County has not yet allocated substantial SLFRF funding toward infrastructure projects, we continue to ensure that strong labor principles are adhered to. For all infrastructure projects, St. Louis County ensures employees and contractors comply with Federal and State of Missouri labor regulations. St. Louis County does have a prevailing wage program, which requires that we follow state rules and require prevailing wages for construction contracts over \$75,000 where the Department of Labor has established labor rates. Individuals can complain, making it self-enforcing, and there are penalties for contractors that do not pay the wages.

St. Louis County's Minority and Women-Owned Business Enterprise (M/WBE) Program promotes open and equitable participation by Minority and Women Owned companies seeking to do business with the County. M/WBE Program staff monitor participation goal achievement in construction and professional services contracts, good faith efforts, prompt pay, and workforce utilization. The M/WBE Program also encourages use of minority and women prime consultants/contractors on professional service projects through incentives in the evaluation process.

Potential use of SLFRF dollars on projects administered through a professional services contract will provide an incentive to M/WBE contractors during solicitation. St. Louis County requires contractors that work within County facilities to pay a \$15.00/hour minimum wage which is greater than the state's minimum wage of \$11.15/hour. Finally, through a recently signed bill, by the time SLFRF dollars are used on infrastructure projects, St. Louis County will require apprenticeship programs by prime contractors on all projects \$75,000 and higher.

Use of Evidence

St. Louis County has a strategy to ensure SLFRF dollars are used for well established, defined, evidence-based programs that have a documented history of effectively addressing issues they aim to solve. Use of evidence details are provided in the Project Inventory section of this report for projects which have relevant use of evidence components. The County will also commit to collecting data on relevant SLFRF projects which will inform future decisions, updates, or modifications to these projects.

Of particular focus is our GrandPads and Emergency Rental Assistance projects.

GrandPads

GrandPads offer very detailed usage data that can be accessed as an aggregate report by the St. Louis County Library. These reports include information such as time spent on video calls and Zoom sessions and the time spent with GrandPad support on the phone. Internet usage data is also available to see how many searches and clicks users made while using the GrandPads. Another statistical report that is available is the number of contacts that GrandPad users add to their devices. This would be an indication of the social connections being made by the users. No funds will be required for evidence-based interventions because the data is readily available on demand. Additional information for this project is included in the Project Inventory section of this document.

Emergency Rental Assistance Program (ERAP)

One of the primary goals of our project was to provide emergency rental assistance to reduce family hardship, housing instability, and homelessness for low-income families impacted by the COVID-19 pandemic. [Evidence-based intervention research](#) has been performed with this desired outcome. Building upon the experience of previous iterations of the ERAP, St. Louis County conducted exercises to collect information directly from the community on where the need was. By partnering with the community, community-based organizations, and community leaders, the County was able to collect important data on where the need was, and learned more related to issues of evictions, illegal lockouts, utility struggles, and other challenges that were happening in the community. The feedback received ensured that the assistance was provided to those most at risk of eviction/disconnection as soon as possible and guided our strategy and priorities.

St. Louis County Department of Human Services (DHS) attended both weekly meetings, provided updates and adjusted based on the information shared. DHS dedicated a staff member to prioritize applicants facing eviction and/or disconnection of utility services.

Using the evidence collected, priority was given to communities with the highest number of eviction rates, unemployment, COVID infection rates and underserved communities of color. Additional information for this project is included in the Project Inventory section of this document.

Performance Report

Performance management is an integral part of St. Louis County's management of SLFRF dollars. St. Louis County [Department of Performance, Management, and Budget](#) (PMB), is responsible for the County's over \$800M annual budget, the County's annual business plan, and serves the County through its performance team by creating, analyzing, and evaluating key KPIs for County departments to use to improve upon existing operations. With SLFRF dollars, PMB operates in much of the same function, making sure to provide full and transparent information on how funds are being allocated and spent.

Through St. Louis County's [Open Finance](#) tools, data is made publicly available on how not only SLFRF dollars are spent, but also detailed information on every expenditure made using taxpayer dollars. In particular, this spring PMB rolled out their first performance dashboard related to SLFRF expenditures, creating the [ARPA-SLFRF Expenditures Dashboard](#). Following the example of previous transparency portals, this tool allows the public to access real-time data on how SLFRF dollars are being used.

St. Louis County has multiple projects underway utilizing SLFRF dollars, and where available, relevant performance data is included within each project inventory, with a few highlights included below.

Household Assistance: Rent and Utility Aid:

Full details of our Emergency Rental Assistance Program are included in the project inventory section of this document; however, we are proud that we have assisted 758 households with rental assistance, and 359 with utility assistance:

Rental Assistance	
Number of Households Funded	604
Total Paid to Households	\$3,516,150.67
Mean Award Amount	\$5,824.33
Median Award Amount	\$4,735.78

Utility Assistance	
Number of Households with Utilities Funded	359
Total Utilities Paid to Households	\$200,004.09
Mean Award Amount	\$557.11
Median Award Amount	\$360.22

Household Assistance: Internet Access Programs:

Partnering with St. Louis County Library, the County recently passed into ordinance the GrandPads program, which provides no-cost, easy-to-use tablets to eligible seniors within St. Louis County. These tablets are an important tool in bringing internet access to seniors, allowing them to stay connected with their loved ones, and accessing all that being connected to the internet allows them.

As of June 30, 2022, the project is still in the application phase. Because of this, no performance indicators or demographic information are available at this time. Once the award of 1,500 new GrandPad users are assigned and the renewal applications are fully processed, St. Louis County will be able to provide additional data. Additionally, once those tablets have been issued, GrandPad users will be sent a quarterly survey to gauge the impact of the GrandPad on individual users.

Public Sector Employees: Premium Pay

Throughout the course of the pandemic, certain public sector employees have faced an increased risk due to the nature of their work. Whether that be a corrections officer, mechanic, or public-facing customer service employee, these essential employees have worked throughout the pandemic despite the risk. The Premium Pay program provides an hourly pay increase over their existing wage to compensate for this increased risk. St. Louis County put a priority on this program, allocating over \$5M toward this program. Through this program, we have supported 341 employees.

Public Health: Vaccination

St. Louis County's Department of Public Health has consistently been a leader in the region when it comes to the public health response to COVID-19. This spirit of excellence has been continued through its vaccination program. Through community outreach, events, public awareness campaigns, incentive

programs, and other dedicated efforts, St. Louis County leads the state as the County with the highest percentage of total population fully vaccinated, per the [CDC data dashboard](#).

Through the vaccination gift card program, the County was able to incentivize residents to receive the vaccine at one of DPH's vaccination clinics. This program helped to increase the number of residents receiving vaccination in targeted zip codes.

Zip Code	9/4/21 Vaccination Rate (%)	6/30/22 Vaccination Rate (%)	CDC Social Vulnerability Index Scores*
63133	40.2%	52.4%	0.9231, 0.7972, 0.8137
63134	40.6%	55.5%	0.6542, 0.961, 0.7988
63135	41.4%	53.6%	0.5616, 0.3699, 0.7444
63136	41.7%	53.4%	0.6253, 0.7175, 0.6666
63137	36.5%	46.4%	0.6253, 0.7395, 0.6
63138	43.1%	56.0%	0.7946, 0.7468, 0.5321

*This is a selection of CDC Social Vulnerability Scores for census tracts within the zip code.

PROJECT INVENTORY

Project GH124: GrandPad Project

Funding amount: \$2,000,000.00

Project Expenditure Category: 2.4 – Household Assistance: Internet Access Programs

Project Overview:

- The GrandPad Project is an expansion and continuation of a very popular program through St. Louis County Library (SLCL) that began in 2021 to provide isolated, lower income, and technology-inexperienced older adults with access to a user-friendly tablet designed by and for seniors. The GrandPad tablet provides seniors with a connection to loved ones, friends, and health care providers just to name a few. During the pandemic, the isolation already felt by many seniors was intensified, leaving many cut off from outside contact. The cost for internet access and an internet-ready device, along with the steep learning curve for most technology were all barriers to keeping seniors connected. The GrandPad tablet addressed all of those by providing a built-in internet connection and an easy-to-use tablet with expert support. The \$2,000,000 allocation from ARPA funds will allow the 1,500 current GrandPad users to retain the tablet and the service for another full year. The ARPA funds will also provide GrandPad tablets for 1,500 additional users for a full year. In total, 3,000 seniors in St. Louis County, who were previously isolated and lacking internet access, will now be connected and able to access information, entertainment, and stay connected to friends and family.
- Upon receiving notice of the award of ARPA funding, SLCL developed procedures for existing GrandPad users to apply for a renewal of their current device. Renewal applications were collected starting on June 2, 2022. Renewal applications are being reviewed as they are completed to ensure the applicants meet all current eligibility requirements. A few weeks after

issuing the renewal application, an application for new GrandPad users was issued on June 22. The application period originally ran through July 13, but it was extended to July 18 to allow additional time to promote the service and allow more seniors to apply to receive a GrandPad. GrandPads will be awarded based on a ranked and prioritized list of the applicants. Applicants with lower income, who are isolated with lack of internet access and/or an internet-ready device will be prioritized.

- St. Louis County Library is collaborating with GrandPad, the company that designed and supports GrandPads, to procure the tablets. SLCL and GrandPad have closely coordinated the effort to make this project a reality. This is the first project of its kind in the country between a library and GrandPad, so many new procedures and workflows were discussed and considered to optimize the process and make it as efficient as possible. GrandPad prepares the tablets, which includes adding user accounts and email accounts for the specific user. GrandPad ships the tablets and all of the accessories directly to the SLCL location where the GrandPad applicant will pick it up. GrandPads are expected to ship to SLCL in the second week of August. Once they are received at the library branches, applicants will be notified and invited to pick them up.
- For more information visit www.slcl.org/using-the-library/grandpads

Use of Evidence:

- GrandPads offer very detailed usage data that can be accessed as an aggregate report by SLCL. These reports include information such as time spent on video calls and Zoom sessions and the time spent with GrandPad support on the phone. Internet usage data is also available to see how many searches and clicks users made while using the GrandPads. Another statistical report that is available is the number of contacts that GrandPad users add to their devices. This would be an indication of the social connections being made by the users.
- No funds will be required for evidence-based interventions because the data is readily available on demand.

Performance Report:

- Due to the status of the project, which is still in the application phase, no performance indicators or demographic information are available at this time. Once the award of 1,500 new GrandPad users are assigned and the renewal applications are fully processed, there will be additional information to share.
- Once the tablets have been issued, GrandPad users will be sent a quarterly survey to gauge the impact of the GrandPad on individual users.

Project HE662: COVID-19 Public Health Payroll Costs

Funding amount: \$2,098,699.50

Project Expenditure Category: 3.1 – Public Sector Workforce: Payroll and Benefits for Public Health, Public Safety, or Human Services Workers

Project Overview:

- These are staff conducting case investigation and contact tracing (CI/CT), data entry and data management in our Division of Communicable Disease Response (CDR); vaccine cold chain management, including managing existing supply, managing state required quality processes, gathering supplies in our Division of Health Services (DHS); managing and implementing COVID-

19 infection control protocols in our Corrections Medicine (CM) program; and community engagement around vaccine hesitancy in our Division of Health Promotions and Public Health Research (HPPHR). All staff may conduct other duties as assigned and as related to the COVID-19 pandemic; this is largely dependent on the needs of the department and the status of the pandemic.

- These staff are currently conducting these services and will continue to do so for most of 2022, depending on the direction of the pandemic.

Use of Evidence:

- As the status of the pandemic shifts, CDR staff conduct CI/CT for residents and data entry as DPH receives information about positive and negative tests. When St. Louis County is surging or the case rate supersedes staff capacity, CDR staff prioritize CI/CT for high-risk residents or high-density settings, such as schools or large businesses. The CM staff person will continue to protect the patients DPH is responsible for in the Justice Center, including reviewing, developing, and implementing infection control protocols for staff and people in custody. The DHS staff will ensure that our vaccination supply is able to be administered or deployed throughout the County. The HPPHR staff we have hired to address vaccine hesitancy are doing so through authentic and strategic partner engagement, community engagement, and presence at community events where there is opportunity to educate individuals on the importance of COVID-19 vaccinations and mitigation strategies.

Performance Report:

- This project supports 32 full time employees within the Department of Public Health, including salary and fringe benefits.

Project HE553: PPE Inventory Management System

Funding amount: \$175,200.00

Project Expenditure Category: 1.7 – Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)

Project Overview:

- Funds for this project are used toward an inventory management system and warehouse for the PPE purchased for DPH staff and County Employees.
- DPH staff and County departments have received instruction on how to obtain access to this essential PPE.

Use of Evidence:

- DPH's services are driven by a health equity lens. By protecting our staff, we continue to protect the provision of those services.

Performance Report:

- This system and inventory management program are currently in operation for DPH.
- DPH is committed to protecting their staff conducting essential health services or serving in-person roles by providing them with reliable access to quality PPE.

- To support our community, populations, and individuals in St. Louis County, DPH does release PPE for community distribution whenever possible.

Project HE661: COVID-19 Testing

Funding amount: \$4,331,956.00

Project Expenditure Category: 1.2 – COVID-19 Testing

Project Overview:

- This request includes testing supplies, contracted staff, and a testing trailer for DPH to continue to provide free testing at our three permanent, primary care clinics and in our Corrections Medicine Program for the people in custody at the Justice Center and Juvenile Detention Center.
- DPH continues this work, as testing is still a necessary tool at this point in the pandemic.

Use of Evidence:

- DPH is also a major testing provider in the St. Louis region; our intended outcome for testing is to continue to provide free, reliable access to testing for COVID-19 for individuals who may not otherwise have access to testing.

Performance Report:

- For our community testing sites, these are located at DPH's three primary care clinics, and DPH opened an additional one in North County. DPH relies on our own lab to process samples, which is a significant cost savings for St. Louis County. As a high-density, congregate living setting, our Corrections Medicine Program is a priority for DPH, especially when it comes to providing access to COVID-19 testing, which is provided when a person in custody is symptomatic and upon intake at the Justice Center. DPH is the only medical provider in that space, and to date, our efforts have resulted in a positivity rate in our Corrections Medicine program that is less than 3%, significantly lower than community transmission levels. At this time, DPH is no longer a competitive employer for the medical professionals qualified to conduct COVID-19 testing, which is why DPH will be seeking contracted staff support.

Project HO660: COVID-19 Vaccination

Funding amount: \$4,354,103.00

Project Expenditure Category: 1.1 – COVID-19 Vaccination

Project Overview:

- This project covers staff conducting COVID-19 vaccinations at DPH-operated or DPH-sponsored vaccination clinics. DPH is providing COVID-19 vaccinations at our three primary care clinics and in our Corrections Medicine program for the people in custody at the Justice Center. DPH has also partnered with the St. Louis County Library system to conduct DPH-sponsored vaccination clinics at a number of library locations.

Use of Evidence:

- DPH is committed to increasing vaccination rates in areas of the County with low rates and addressing vaccine disparities, which cross race, age, and area of the County.

Performance Report:

- Many of these services are on-going and have been previously supported by other types of grant funding. DPH's current timeline is to continue these services in 2022 without a pause or impact to services. DPH intends to continue to provide these services at some level of availability until demand for them has abated or until the pandemic is no longer threatening St. Louis County.

Project GH123: Emergency Rental Assistance

Funding amount: \$5,000,000.00

Project Expenditure Category: 2.2 Household Assistance: Rent, Mortgage, and Utility Aid

Project Overview:

- In response to the COVID-19 pandemic, a state of emergency was declared in March of 2020 and Americans were ordered to stay at home. The ability to practice social distancing and remaining at home have saved countless other lives. Social distancing and/or adhering to stay at home orders depends solely on having adequate stable housing. For many households this remains a constant worry. Although the death rates have declined and a vaccine is readily available, the impact of COVID 19 remains.
- The need for eviction prevention is well documented. St. Louis County received over 16,000 ERAP1 applications and successfully dispersed \$27.4 million in assistance in less than 6 months. The money was used to provide rental arrears, past due utility payments, relocation assistance and forward rent. All were deemed as allowable costs under ERAP1. The service delivery rate of the St. Louis County surrogate, Nan McKay, exceeded the state rate of disbursement and resulted in St. Louis County being encouraged to apply for additional ERA funds. Ordinarily, this response would be cause for celebration but unfortunately the community need is simply too great. According to the St. Louis County Courts, there are approximately 4,000 households currently facing eviction in St. Louis County, MO. Those facing eviction continue to primarily be those adversely impacted by COVID for a myriad of reasons including but not limited to lack of employment, limited access to affordable housing, or membership in historically marginalized and under-resourced communities. The inability to acquire household necessities while remaining current with rental and utility payments was nearly impossible prior to the pandemic and has only increased. Consequently, there are many households still trying to recover physically and/or economically from the ravages of the disease.
- St. Louis County Department of Human Services (DHS) extended its partnership with Nan McKay to provide eviction prevention, utility arrears and housing stability services using the \$5 million in ARPA funding that has been awarded to the DHS. The continuation of this service to the community was vital. In addition to minimizing the COVID hardship for those in need of assistance, it was also necessary to assist those for whom income from rental property is their livelihood. The eviction moratorium was certainly helpful however, the consequence for landlords unable to absorb the loss of income would have been equally devastating. Not only

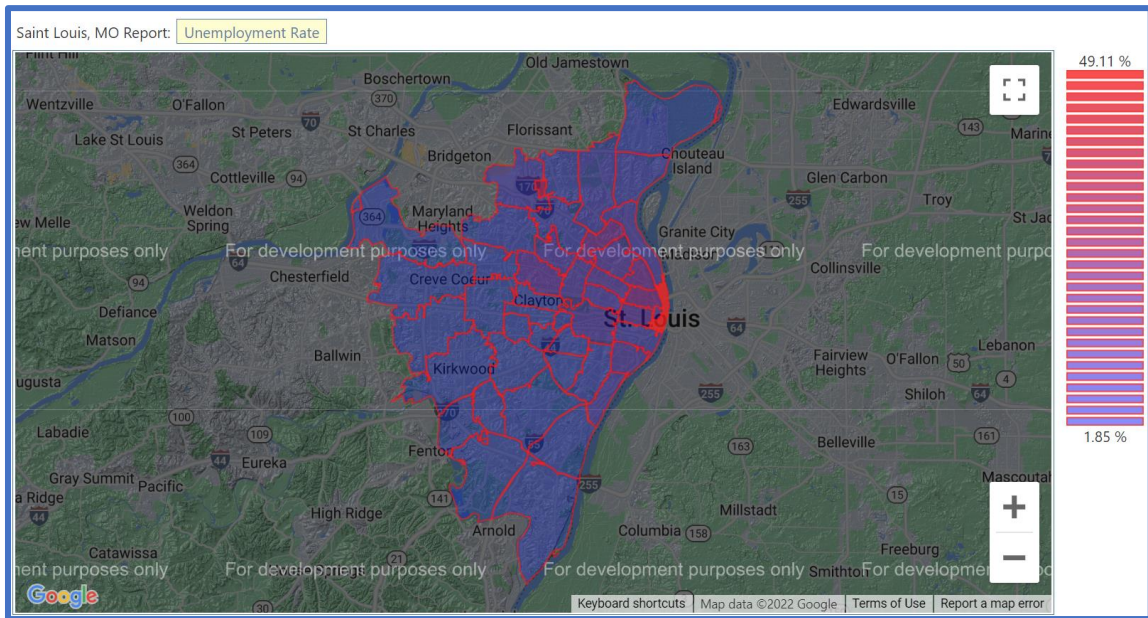
would the lack of rental income affect landlords, but it ultimately would also have impacted the local economy as those dollars are no longer circulated through spending.

- Nan McKay worked with DHS to refine and finalize the Program Guidelines. We used the lessons learned during our implementation of both CARES and ERAP1 to know how to quickly collect the required documentation and allow self-attestation whenever possible. Both tenants and landlords were encouraged to apply which helped bridge the digital divide. For those that lacked technology or the ability to navigate the application process, we continued our partnership with local non-profits. Households for whom English is not their native language, interpretation services were available. Consequently, implementation time was minimal. We added the necessary reporting mechanisms to meet ARPA requirements and made payments immediately. The continuity of using the same portal aided in advertisement and community familiarity and prevent duplication of services. Staff was already familiar with the state clearing house portal for assistance confirmation.
- Nan McKay updated the existing Program application (or pre-application), in form and content that was acceptable to the County and collected all relevant data as outlined by ARPA requirements, in both online and hardcopy formats that were emailed, mailed or faxed, and made amendments to accommodate the needs of non-native English speakers, the elderly, persons with limited access to technology, and persons with disabilities.
- Nan McKay developed documentation with County oversight, including agreements and contracts, applicable to the provision of financial assistance that incorporate any requirements deemed necessary and appropriate by the County to effectively administer the Program in compliance with ARPA requirements.

Use of Evidence:

- One of the primary goals of our project was to provide emergency rental assistance to reduce family hardship, housing instability, and homelessness for low-income families impacted by the COVID-19 pandemic. Evidence-based intervention research has been performed with this desired outcome (<https://www.cbpp.org/research/housing/research-shows-rental-assistance-reduces-hardship-and-provides-platform-to-expand>).
- Under CARES and ERAP1, we began exercises that encouraged strategic community engagement. Volunteers have been deployed to outreach communities with the highest demonstrated need based on eviction filings, assistance applications and public data centered on disparities and income levels.
- The local community service network was contacted throughout the process and continues to provide monthly feedback. Many of the community partners that were convened in response to the pandemic remain focused on resource provision and meet weekly. The legal advocacy community also met weekly to discuss trends, evictions, illegal lockouts, and challenges that were being encountered by frontline staff.
- St. Louis County DHS attended both weekly meetings, provided updates, and made adjustments based on the information shared during the meeting. DHS dedicated a staff member to prioritize applicants facing eviction and/or disconnection of utility services. The feedback received from the community, community-based organization, and community leaders ensured that the assistance was provided to those most at risk of eviction/disconnection as soon as possible and guided our strategy and priorities.

- Priority was given to communities with the highest number of eviction rates, unemployment, COVID infection rates, and underserved communities of color. The charts below display these population locations within St. Louis County.
 - Unemployment Rates by Zip Code:



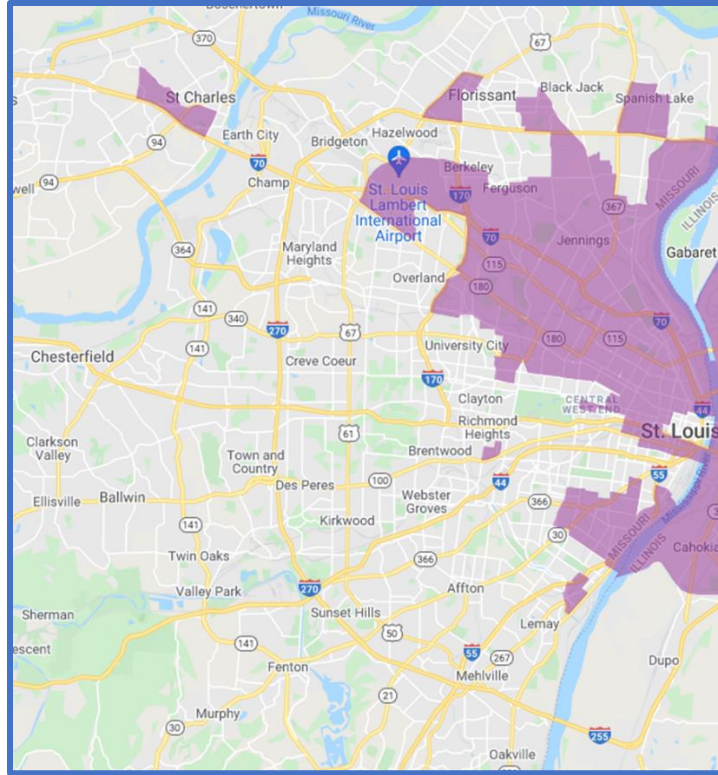
Unemployment Rate by Zip Code			
Zip Code	Population	% Unemployment Rate	National Rank
63102	1,311	49.11%	#69
63140	789	32.97%	#225
63106	10,553	25.14%	#472
63120	13,268	22.84%	#592
63107	16,313	22.08%	#646
63130	34,424	17.37%	#1,197
63103	4,603	17.17%	#1,222
63113	16,101	15.27%	#1,636
63115	25,238	15.06%	#1,678
63101	1,327	14.90%	#1,714
63112	22,678	14.24%	#1,900
63118	30,222	14.12%	#1,932
63110	20,163	13.68%	#2,078
63133	8,693	13.51%	#2,148
63108	20,890	12.87%	#2,378
63147	13,190	12.30%	#2,634
63111	21,583	10.98%	#3,413
63136	53,604	10.19%	#3,993

63134	14,982	9.94%	#4,225
63104	19,088	9.63%	#4,510
63121	29,172	8.29%	#6,132
63137	21,217	7.91%	#6,753
63135	21,532	6.49%	#9,761
63138	21,879	6.31%	#10,292
63116	47,017	6.11%	#10,873
63114	38,479	6.09%	#10,926
63139	24,364	4.93%	#14,880
63125	33,150	4.65%	#16,028
63132	13,731	4.41%	#17,085
63143	10,978	3.88%	#19,470
63105	14,490	3.53%	#21,117
63123	49,680	3.31%	#22,133
63109	29,264	3.21%	#22,642
63117	9,771	3.02%	#23,496
63126	15,386	2.98%	#23,667
63119	34,416	2.95%	#23,806
63141	20,025	2.81%	#24,424
63129	51,191	2.65%	#25,137
63124	9,819	2.53%	#25,658
63146	29,760	2.50%	#25,790
63122	38,653	2.38%	#26,214
63144	9,072	2.18%	#26,957
63127	4,852	2.02%	#27,494
63128	29,122	1.97%	#27,647
63131	16,396	1.85%	#28,002

Performance Report:

- The chart below displays the location of the population in need:
 - HUD's Qualified Census Tract, effective January 1, 2022, for St. Louis County:

2102.00 2103.00 2104.00 2105.02 2107.02 2107.04 2111.02 2112.01 2118.01
 2118.02 2119.00 2120.01 2120.02 2121.01 2121.02 2122.00 2123.00 2124.00
 2125.00 2127.00 2133.00 2136.00 2137.00 2138.00 2139.00 2141.00 2142.00
 2143.00 2160.00 2161.00 2169.00 2218.00
 - Shown Graphically Below:



ERAP Rental Assistance	
Number of Households Funded	758
Total Paid to Households	\$4,414,838.82
Mean Award Amount	\$5,824.33
Median Award Amount	\$4,735.78

ERAP Utility Assistance	
Number of Households with Utilities Funded	359
Total Utilities Paid to Households	\$200,004.09
Mean Award Amount	\$557.11
Median Award Amount	\$360.22

Project JSPAY: Premium Pay

Funding amount: \$5,746,108.00

Project Expenditure Category: 4.1 – Public Sector Employees

Project Overview:

- This project will provide premium pay to hourly staff who specifically work in jobs that involve regular in-person interactions or regular physical handling of items that were also handled by others.
- The premium pay compensates them for the elevated health risks they have faced and continue to face during the public health emergency.

- The timeline for this project is from February 15, 2022, through December 31, 2024, or such earlier date as the national emergency concerning the COVID-19 outbreak declared pursuant to the National Emergencies Act (50 U.S.C. 1601 et. seq.) is terminated.
- This program includes employees across multiple County departments, including:
 - Justice Services
 - Transportation and Public Works
 - Revenue
 - Administration
- In our Justice Services department (DJS), these funds:
 - Provide premium pay to hourly staff of DJS, who specifically work in jobs that involve regular in-person interactions or regular physical handling of items that were also handled by others.
 - This premium pay compensates them for the elevated health risks they have faced, and continue to face, during the public health emergency in their positions.
 - Being exposed to a constantly rotating group of new detainees every day for their entire shifts has exposed them to increased risk of infection. This work cannot be performed remotely as the jail residents live in the facility and must be supervised 24 hours a day, 7 day a week. Staff must perform and supervise sanitation and masking policies for the jail residents and follow social distancing measures that must be enforced constantly to mitigate the spread of the virus daily. Corrections Officer positions are difficult to fill during this public health pandemic as many potential recruits are fearful or hesitant to work in a jail environment as this is a nation-wide problem affecting all correctional agencies.
 - All staff in these job classes in the ordinance are eligible, from brand new hires to the most veteran employees, and will be compensated at the same amount and not based on seniority or a percentage of salary.
 - A well-trained and high-morale staff will benefit the jail residents and their families, many of which are County residents. A safe, secure, and humane jail is in the best interests of the County, state, and nation. Hiring and retaining a highly motivated and high-morale staff is an essential component of creating and maintaining a safe and disease-free facility.
- In our Transportation and Public Works department, these funds:
 - Compensate the Facilities Staff working at the Justice Center an additional \$3 per hour for the elevated health risks they have faced, and continue to face, during the public health emergency in their positions.
 - The funding for these employees totals \$150,596.00.
- In our Administration department, these funds:
 - Provide premium pay to hourly staff of the Department of Administration, who specifically work in jobs that involve regular in-person interactions or regular physical handling of items that were also handled by others.
 - The funding for these employees totals \$202,646.00.

Use of Evidence:

- In Transportation and Public Works, the goal of this project is to help retain Facilities Staff working at the Justice Center who are faced with working under these elevated health risks.

Performance Report:

- This project supports **341** County employees.
- In Justice Services:
 - Justice Services has **297** full-time positions eligible under the ARPA guidelines.
 - To improve recruiting of new employees and to retain existing employees are the goals of this program. Two key performance indicators are lowering turnover and the lowering of the number of vacant positions. Currently we have 78 vacant full-time Corrections Officer positions out of 198 budgeted positions. A year ago, we were near fully staffed, and we have experienced a progressively higher vacancy rate over the past year. With premium pay we expect to fill vacant positions so that our vacancy rate is 10% or lower. Our turnover rate for Corrections Officers is about 50% and we hope to lower it to 25% after the premium pay is implemented.
 - As of 6/30/22, we had 44 vacant full-time Corrections Officers, a reduction from the 78 vacancies since the beginning of the program. Turnover is about 10-15% currently.
- In Transportation and Public Works:
 - A list of employees and their classifications that have received this premium pay is included below. The premium pay has helped us to retain all but one of these employees. The amount budgeted was for a full staff but currently the Department has seven vacant positions in this Division

○

Employee Classification	Premium Pay Received Thru PPE 6/25/22
Building Systems Mechanic	\$2,160.00
Building Systems Master Mechanic	\$2,160.00
Building Systems Specialist	\$2,160.00
Structural Mechanic	\$2,160.00
Building Systems Foreman	\$2,170.50
Building Systems Mechanic	\$2,160.00
Building Systems Mechanic	\$2,160.00
Building Systems Master Mechanic	\$1,914.48
Building Systems Mechanic	\$2,160.00
Building Systems Specialist	\$2,160.00
Building Systems Master Mechanic	\$2,224.50

- In Revenue:
 - A list of employees and their divisions in Revenue receiving Premium Pay is included below.

Division	Number of	FTE	ARPA Hours Worked	ARPA Amount Paid
Collections	26	21.5	13850.95	\$ 41,552.85
Licensing	2	1	500	\$ 1,500.00
Recording	14	7.5	3610.1	\$ 10,830.30
TOTAL	42	30	17961.05	\$ 53,883.15

- In Administration:

- 24 Administration employees have received premium pay.

Project REVL5: Revenue Loss; Provision of Government Services

Funding amount: \$91,109,842.00

Project Expenditure Category: 6.1 – Provision of Government Services

Project Overview:

- St. Louis County Department of Performance, Management, and Budget (PMB) calculated its 2020 Revenue loss over the 2019 base as \$94,231,600.00. The calculation was made under Treasury provided guidance. Through June 30, 2022, the County Council approved the use of \$91,109,842.00 to address the loss of revenue experienced because of the pandemic.

Use of Evidence:

- ARPA SLFRF Performance Reporting does not identify costs under 7.1 as a project, and therefore no use of evidence is required.

Performance Report:

- ARPA SLFRF Performance Reporting does not identify costs under 7.1 as a project, and therefore no performance reporting is required.

Project 00000: ARPA Compliance and Legal Consultation

Funding amount: \$3,000,000.00

Project Expenditure Category: 7.1 – Administrative Expenses

Project Overview:

- Under Ordinance 28,290, the County Council appropriated \$500,000 from SLFRF for support of legal services authorized under SLFRF. The County then engaged outside legal counsel pursuant to authority under Ordinance 28,260. The legal services address and ensure compliance with legal, regulatory, and other requirements relating to the County's use of SLFRF dollars and address response to COVID-19 pursuant to the requirements outlined under SLFRF. These administrative services are critical to addressing COVID-19 and to the County's ongoing compliance with the applicable law for use of SLFRF dollars. Legal evaluation is one component of the internal controls necessary for proper management and administration of federal funding.
- Expenditure amount as of 06/30/2022: \$321,386.25
- ARPA SLFRF Performance Reporting does not identify costs under 7.1 as a project, and therefore no performance reporting is required.

Project H0550: Vaccine Gift Card Incentive Program

Funding amount: \$875,000.00

Project Expenditure Category: 1.1 – COVID-19 Vaccination

Project Overview:

- Includes purchasing gift cards and distributing them to individuals who complete a COVID-19 vaccination series (one or two shots, depending on the type of vaccine) at a Department of Public Health vaccination clinic.
- DPH delivered the gift cards via certified mail service upon completing an entire vaccine series. DPH also distributed gift cards in-person at select events at the discretion of the Director of the Department of Public Health. DPH did not rely on the support of any contracted staff to conduct this activity.
- To contribute to increased vaccination rates in zip codes with low vaccination rates. Additionally, part of DPH's strategy is to use incentives that address socioeconomic barriers of transportation and food insecurity (two basic needs of all households) to accomplish this outcome.
- The ordinance that authorized the program limited the categories of gift cards DPH can purchase, but the main types listed were related to basic needs, such as groceries and gas. A third category, focused on small businesses, was not implemented due to difficulty of procuring the gift cards. Finally, the dollar amount of the gift cards ranged from \$50-\$100, which DPH believes will significantly impact an individual and their household.
- DPH directed this resource and the bulk of our vaccination clinics toward areas with the lowest vaccination rates. There is a current correlation between zip codes with low vaccination rates and a history of systemic racism and disinvestment. Therefore, one part of DPH's strategy is increasing access and educating individuals in these zip codes while also relying on trusted community organizations to help support that. Another aspect of this strategy is to provide individuals an incentive that will also have an economic benefit to them.
- Supporting community, populations, and individuals in St. Louis County
 - These gift cards were distributed to individuals who received the direct benefit of the gift card's value. DPH intentionally selected vendors who are in the same areas where our patients reside, and vendors that provide necessities, such as groceries and gas, while maintaining compliance with Food Code standards. Food insecurity during the COVID-19 pandemic has worsened, and according to Feeding America, more than 42 million people may experience food insecurity because of the pandemic. The U.S. Department of Agriculture reported recently in their Household Food Insecurity in the United States report that more than 38 million people in the United States experienced hunger in 2020. In 2019, there were over 100,000 people in St. Louis County who were food insecure; in 2021, that number has likely increased due to the COVID-19 pandemic.
 - In addition, since individuals received these gift cards after receiving the complete series of the COVID-19 vaccine, they contributed to a safer St. Louis County with less community transmission of the virus.
- Community Engagement
 - DPH is implementing this program in response to a direct request from the County Council, which authorized this legislation. Additionally, DPH established two new stakeholder groups, one of North County leaders and another of South County leaders, who provided specific feedback and ideas on how DPH can increase vaccination rates. In addition to the other stakeholder groups DPH formed in March 2020 (restaurant advisory group, school

superintendents' group, school nurses' group, youth sports advisory group, and others), these groups suggested a similar, if not this exact, program.

Use of Evidence:

- Other communities, including governmental agencies and private companies, have implemented similar programs throughout the country and have seen some successes. Monetary incentives, such as cash and gift cards, are a growing tool for inducing health behaviors in the public interest. The value of these tools serves as both a positive influence and mediating for significant challenges experienced by many low-moderate income communities. Bradley and Neumark (2017) conducted a randomized controlled trial among newly enrolled uninsured patients of Virginia Commonwealth University Medical Center's Virginia Coordinated Care Program. Patients were randomly assigned to an incentivized group with three monetary levels (\$0, \$25, and \$50) or the non-incentivized group. Results showed those offered incentives were more likely to establish a relationship with a primary care physician instead of utilizing expensive services such as urgent care or the emergency room. Similarly, Schumacher et al. (2020) conducted a literature search in which 32 publications on influenza vaccination campaigns for healthcare workers were reviewed for key interventions and resulting vaccination coverage. Among key interventions analyzed, mandatory vaccination policies or multifaceted campaigns including a "vaccinate or wear-a-mask" policy as well as mandatory declination reached vaccination coverage in healthcare workers of over 90%. Although campaigns solely based on education and promotion or on-site-vaccination did not regularly exceed an absolute vaccination coverage of 40%, those which included cash incentives as part of a multi-faceted approach saw an increase of 8.2 percent.
- Australia's nationwide vaccine incentive program was created based on a review of similar programs finding that those offered any incentive had a 17% higher vaccination rate than those not offered incentives (Achat et al., 1999). One of the most remarkable examples is the experience of the H1N1 vaccination roll out. Due to incentive programs offered in homeless shelters and other at-risk communities, vaccination reached a rate of 46% in those communities relative to only 10% in the public at large (Wood, 2012).
- Machingaidze & Wiysonge (2021) identified that hesitancy around the COVID vaccination stems from many places. DPH is anticipating that one of the most common reasons for low-income people, including the patient population that we are targeting, is monetary, with many individuals worried about needing to take time off work for the appointments or because of the possibility of side effects. Similarly, Serra-Garcia & Szech (2021) identified that among hesitant Americans, appropriate monetary incentives could significantly increase vaccination uptake. While this study is not yet peer-reviewed, the authors found that low monetary compensation of \$20 reduced vaccine demand compared to no compensation. Compensation of at least \$100 significantly increased vaccine demand. Data shows that compared to no compensation, about 1 in 6 people can be motivated to take the vaccine for \$500. If prevention of infection and outbreaks is a major goal, this investment could pay for itself.
- DPH key staff involved in this program will meet on an every-other-week basis to discuss the program's progression, successes, and failures. These staff will be responsible for determining,

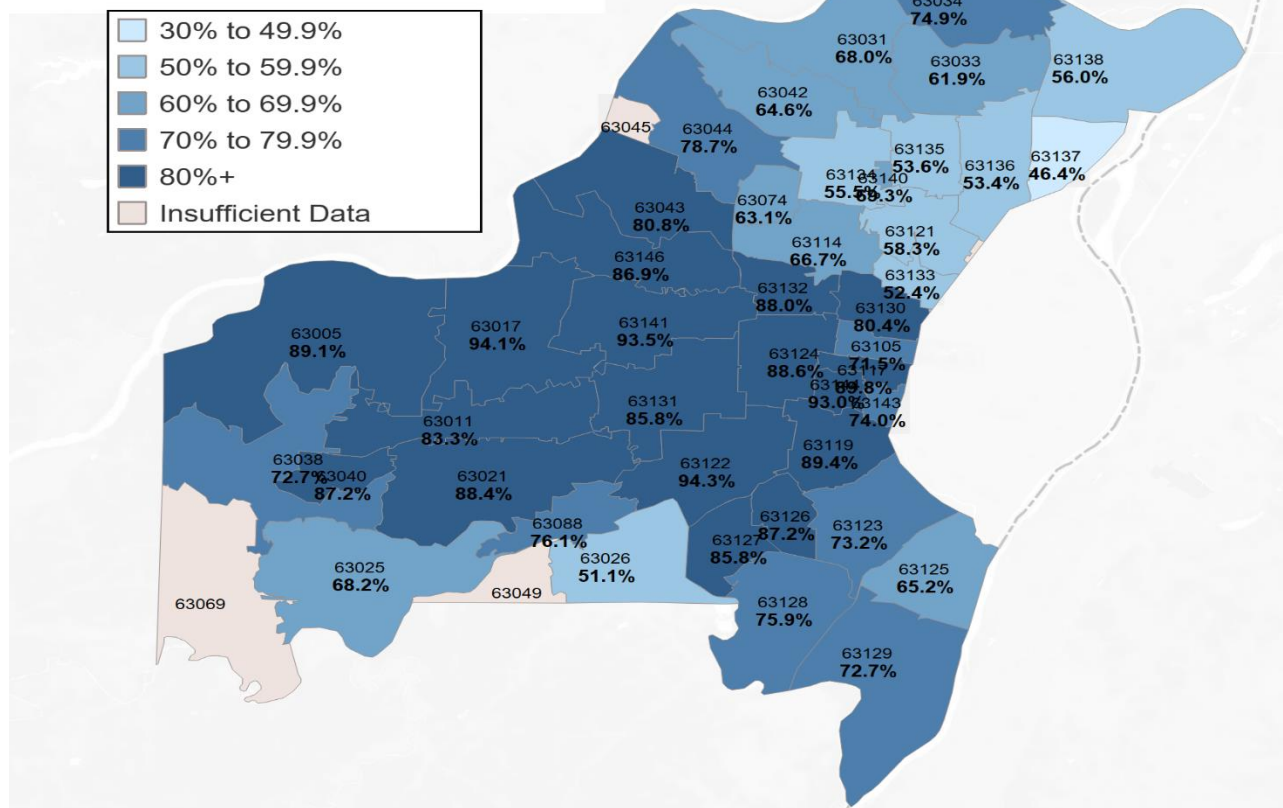
to the best of their ability, the impact of the program, when additional gift cards should be purchased, and when other operational adjustments are needed. Some questions that may be considered by this group are below:

- Is this program contributing to increased vaccination rates in the areas we are targeting?
 - Is the delivery model for gift cards working?
 - Has this program been properly communicated to the audience we are trying to reach?
 - What are the current operational impacts of this program?
 - What problems have arisen from this program that have not yet been addressed?
 - What feedback are we receiving from individuals who receive the gift card and/or staff who are working at the clinics?
- DPH purchased these gift cards on a rolling basis so that as staff distributed them, DPH could evaluate our distribution methods and the vendors we purchased gift cards from.
- DPH tracked vaccination rates per week per zip code in order to follow any correlation between increased vaccination rates and the distribution of vaccine incentives.

Performance Report:

- DPH identified six zip codes with the lowest vaccination rates and concentrated our access points and educational efforts in those zip codes. Therefore, incentives will broadly align with those access points. Additionally, DPH has used other funding sources to support efforts to educate and transport individuals to these clinics. Our goal was to align existing strategies to distribute as many gift cards as possible. The map below shows vaccination rates by zip code; the zip codes in the lightest blue color are where DPH currently is directing the bulk of our resources.

Percent of Individuals Vaccinated with at Least One Dose



- Below is a table of DPH's targeted zip codes with the vaccination rate before the launch of the gift card incentive program and current vaccination rates.

Zip Code	9/4/21 Vaccination Rate (%)	6/30/22 Vaccination Rate (%)	CDC Social Vulnerability Index Scores*
63133	40.2%	52.4%	0.9231, 0.7972, 0.8137
63134	40.6%	55.5%	0.6542, 0.961, 0.7988
63135	41.4%	53.6%	0.5616, 0.3699, 0.7444
63136	41.7%	53.4%	0.6253, 0.7175, 0.6666
63137	36.5%	46.4%	0.6253, 0.7395, 0.6
63138	43.1%	56.0%	0.7946, 0.7468, 0.5321

*This is a selection of CDC Social Vulnerability Scores for census tracts within the zip code.

- DPH hosted dozens of mobile vaccination clinics in collaboration with churches, non-profit agencies, community groups, and other community partners mainly focused in the six priority zip codes. As the vaccine became widely available, DPH scaled down its mobile vaccine clinics. As of April 5, 2022, DPH hosted 410 events at 148 distinct locations county-wide.