Latinx COVID-19 Health Equity Action Recommendations for Austin/Travis County

The Latinx COVID-19 Health Equity Strike Force respectfully submits the following recommendations to address the <u>disproportionate and inequitable burden of COVID-19</u> on Austin/Travis County's Latinx community. These recommendations reinforce and build upon the substantive, ongoing efforts of countless community groups, Austin Public Health, and the City of Austin more broadly. While all outlined strategies are vital to improving health in this population, the Strike Force emphasizes four top priorities:

- The City of Austin should increase direct financial cash assistance to help those impacted by COVID-19 to support lost wages, increase food security, ensure housing stability, and meet other needs. Resource distribution should occur through multiple avenues such as the City of Austin (RISE funding) as well as trusted community organizations. In addition, the duration of financial assistance should correlate with individual circumstances. Receipt of financial assistance should not be tied to immigration status.
- Increase funding to hire and train trusted outreach and contact tracing partners such as community health workers.
- Empower city units responsible for building and construction code enforcement with more resources to ensure that workers' health and rights are protected.
- Require employers to educate workers about their rights to safety and wage protection and provide employees with the resources they need to protect themselves.

The Strike Force believes it is imperative for the City to convene a community advisory board representative of the area's Latinx population to review, amend, and prioritize the enclosed strategies for immediate implementation. To promote success and collaboration and to avoid duplications of efforts, there should be a robust exploration of work already happening in this space as well as the success of these initiatives. City leadership, in partnership with the community advisory board, must provide careful direction as implementation occurs to ensure accountability and, ultimately, the success of this action plan.

While charged to focus on the Latinx community, the Strike Force recognizes that this population is one of many carrying the burden of COVID-19 – and other inequities – disproportionately. While the focus of this document is the Latinx community, most of the recommendations could and should be adapted and tailored to other groups that experience COVID-19 related disparities, including Black and other refugee/immigrant communities.

In addition, though this plan focuses on immediate needs, the Strike Force recognizes the many systemic and structural forces in Austin and Travis County that contribute to the ongoing health disparities the Latinx community experienced before COVID-19. Our members strongly believe this is an opportunity for city and county leaders to develop a long-term community-led plan that addresses the systemic inequities magnified by COVID-19.

The Austin/Travis County Community Health Improvement Plan posits "healthy people are the foundation of our thriving community." To realize this vision will require us to bridge existing siloes and partner together in unprecedented ways. We all own this work. Thank you for helping us get there.

This plan encompasses a broad set of strategies which are built on the foundation laid out in the *City of Austin/Travis County COVID-19 Outreach Strategy* for the most vulnerable Austinites, which was developed by Austin Public Health (APH) with input from local voices, including members of the Latinx community.

The Strike Force Latinx COVID-19 Health Equity Action Plan for Austin/Travis County recommends a focus on four strategic areas:

- Outreach, Prevention, and Communication
- Testing and Contact Tracing
- Access to Quality Clinical Resources
- Economic and Employment Support

For each of these areas, we recommend goals, actionable strategies, and the partners needed to realize them. We also recommend that a community advisory board review progress and provide additional feedback on a frequent basis, no less than monthly.

Outreach, Prevention, and Communication

APH has identified the provision of in-person messaging from trusted partners as a top priority for the Latinx community. APH and community groups challenge us to have a laser focus on the channels through which the Latinx community receives and shares information. The messaging should be consistent, so that information is reinforced in multiple ways. <u>NOTE</u>: The Strike Force recognizes that many community and City efforts are underway in the areas of outreach, prevention, and communication. The strategies below intend to amplify the reach of those efforts – and suggest new ones – to ensure that needed information reaches everyone in the Latinx community.

Principles

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

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ¹
Continue to enhance current messaging to reach and engage the Latinx community. Suggested Timeline: Many of these efforts are already in place; the priority would be to expand and invest more resources as necessary to meet this goal. Target to meet = 4 weeks	 Enable greater coordination between the APH Health Equity Office and the Public Information Office to ensure appropriately tailored communications. Find and refine currently available messaging (in Austin and beyond) with input from community partners. Reinforce messaging on testing – to reduce stigma and encourage everyone to take the assessment, esp. those with chronic conditions, those working outside the home, those with limited English proficiency.* Map all testing sites, including mobile sites to encourage testing. Include a "Find Nearest Test Site" feature to direct individuals and families to most convenient sites. Include operating hours and anticipated wait time.* Clear, culturally sensitive instructions on all elements of quarantine: childcare, food, rent, space, multi-generational homes, pregnancy, chronic disease, symptom monitoring, hygiene, school, etc. Enhanced communication in Spanish for resources for those individuals experiencing domestic violence. Employers should provide their employees with information as to how to protect themselves in the workplace.** 	 Austin Public Health Communications & Public Information Office Austin Latino Coalition Hispanic/Latino Quality of Life Commission GAVA Other community orgs as identified Faith-based organizations Businesses and business organizations** SAFE and other domestic violence organizations
Expand breadth and reach of Community Health Workers/Instructors (CHW/I) Suggested Timeline: Some of these efforts are in place but need expansion and time to put more resources and processes in place to meet this goal. Target to meet = 6 weeks	 Increase funding support for the APH Health Equity Unit to expand the employment, training, and reach of community health workers and other trusted entities. To do this: Provide free training to Community Health Workers, Community Health Paramedics, community organizations, and the general public on contact tracing, COVID-19 testing guidelines, and other crucial areas of practice; Offer CHW/I trainings in multiple languages; Support ongoing efforts to establish a Community Health Worker Network; and Offer permanent employment opportunities to Community Health Workers/I with job descriptions that reflect the work being done in the community. See "Testing and Contact Tracing" section for additional recommended CHW contributions. 	 Austin Public Health Community Partners Austin/Travis County EMS Central Health- Medical Management Dell Medical School, Population Health People's Community Clinic- Health Promotion and Community Advocacy Community Care Health Centers- Care Management Department of State Health Services (DSHS), CHW Program DSHS, Chronic Disease Prevention Branch El Buen Samaritano

¹ Before pursuing new work in this space, please collaborate with the entities listed to avoid duplication of effort.

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ¹
 Provide alternative messaging methods: Low technology literacy Low technology access Limited availability due to work Suggested Timeline: Many of these efforts are already in place; the priority would be to expand and invest more resources as necessary to meet this goal. Target to meet = 4 weeks	 Continue to advance APH's work in this space. Allow for self-assessment and enrollment in testing, and receipt of results via phone.* Create mobile-site messaging and testing focusing on identified clusters and potential areas of high risk (homeless shelters, public housing, construction sites, priority zip codes based on concentrated poverty).* Stagger messaging and testing to accommodate working people (e.g. lunch hour, after 6pm). For those with nonstandard hours of work, offer late night or late morning messaging and opportunities for testing.* Provide hotline in Spanish that is answered within 3 min. of calling. Sufficient resources will be necessary to ensure the successful operation of this line. Provide resource materials to work sites. 	 Austin Public Health Preferred TV and radio stations El Reporte Austin (Facebook Page) Austin Latino Coalition
Provide resources needed to quarantine if exposed or self- isolate, regardless of documentation. Suggested Timeline: As noted, this is a top priority, and not as many resources are currently in place. Target to meet = 2 weeks	 Prioritize City Social Services funding for individuals that have tested positive and express financial need to ensure they are able to isolate and continue to support their families.* (See "Economic and Employment Support for more detail.) Do not tie assistance to immigration status and/or other paperwork that would disincentivize/delay enrollment.* Impose penalties on landlords who violate CARES Act Guidelines. Provide access to isolation facilities, with support staff that speak Spanish. 	 City of Austin University of Texas at Austin (for assessing needs) United Way

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ¹
Evaluate outreach efforts and	Bolster research on messaging for Latinx communities in Austin .	Austin Public Health
continuously improve them.	 Collect and share anonymous demographic data on age, gender, employment, nativity, language, race/ethnicity, sexual preference).* 	• The University of Texas at Austin
Suggested Timeline: This should		
be ongoing, and some processes are already in place.		
Target to integrate and enhance efforts = 4 weeks		

*Taken and/or adapted from Hispanic/Latino Quality of Life Commission (City of Austin) recommendation passed unanimously on May 29th, 2020. Recommendation number 20200527-003c) **More detail provided below in Economic and Employment Support **Testing and Contact Tracing--** How do we assure that all symptomatic people and contacts can be tested quickly and without fear? Success of testing is directly related to lowering the prevalence of COVID-19 in this population.

Principles

(1) Testing should be accessible without a car/using public transportation.

(2) Testing should be free.

(3) Results should be available within 3 days.

(4) Individuals should be able to protect their friends, family, co-workers if they are COVID +.

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ²
Focused, safe testing Suggested Timeline: Many of these efforts are already underway: The priority would be to expand and invest more resources as necessary to meet this goal; however, the documentation issue should be addressed immediately. Target to meet = 2 weeks	 Continue to support APH static, walk-up testing sites located in target areas. Complement static testing sites with mobile, walk-up sites with hours tailored to community need (e.g., at churches). Publish widely these testing sites (CUC has made their sites publicly available). Establish transparent, data-informed daily testing goals alongside actual testing achieved. Eliminate ID requirements for testing. 	 Austin Public Health CommUnityCare Dell Medical School Churches Community organizations

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Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ²
Scale testing and reduce test result turnaround time. Suggested Timeline: Access to testing and results in a timely manner for high-risk populations is critical. Target to meet = 2 weeks	 Source lab vendors who can meet the testing demands. Mandate prioritization of testing: those from highest priority groups get high-priority turn around time. Expand rapid POC SARS-CoV-2 testing as able. Consider using a a pooled testing strategy (where one test is done on pooled blood within a work unit or family) if testing resources continue to be limited. 	 Austin Public Health Dell Medical School CommUnityCare AIT Laboratories
Adopt a common contact tracing platform. Suggested Timeline: Many of these discussions and collaborations are already in place; the priority would be to finalize the adoption of a common method. Target to meet = 2 weeks	 Adopt an effective contact tracing method. Make sure all cases and contact tracing data are efficiently populated into one database for ease of tracking/measurement of equity. 	 Austin Public Health CommUnityCare/Central Health Dell Medical School/UT Health Austin
Reach 70% of cases and their contacts. Suggested Timeline: Many of these discussions and collaborations are already in place; the priority would be to finalize the adoption of a common method. Target to meet = 2 weeks	 Provide contact tracing in Spanish through collaboration with a non-governmental agency (eliminate language and cultural barriers; build trust) Hire and train community health workers to serve in a contact tracing capacity, as they are a trusted resource. (See "Outreach, Prevention, and Communication" section for more strategies related to Community Health Workers.) 	 Austin Public Health CommUnityCare Central Health Dell Medical School El Buen Samaritano

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

Principles

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

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ³
Timely access to medical and mental health care for patients with COVID-19, those most vulnerable to COVID-19, and/or those who are most likely to develop anxiety/depression as a result of COVID-19-related financial and social stresses. Suggested Timeline: Many of these efforts are already in place; the priority would be to expand and invest more resources as necessary to meet this goal. Target to meet = 2 weeks except unless noted as 4 weeks	 Provide clinician-staffed, extended-hours, multi-lingual telemedicine resource for COVID-19 +patients; patients should be able to get advice without waiting longer than 5 min. on the line. Sufficient resources will be necessary to ensure the successful operation of this line. Continue to support bilingual clinic for COVID+ patients. (CUC operates such a clinic 7 days/week already). Expand and integrate insurance-eligibility assessment capacity for the un- and under insured. Mental Health Hotline in Spanish available a minimum of 12 hours a day. Prioritization of initial primary care visit for Latinx patients at risk for hypertension, diabetes, and other chronic diseases. Prioritize access to care and medication for those individuals with chronic conditions that make them more susceptible to severe and fatal manifestations of COVID-19. Flu and pneumococcal immunizations clinics for adults, in context of COVID complications (4 weeks). Immunization clinics and bilingual outreach for families with young children – given decreased access due to COVID. Advocate for parity of reimbursement based on services provided rather than type of visit (e.g., telephone, video, in-person). 	 CommUnityCare Central Health Lone Star Circle of Care El Buen Samaritano People's Community Clinic Community Health Workers Dell Medical School / UT Health Austin Texas Medical Association Integral Care Hospital partners Austin/Travis County EMS

³ Before pursuing new work in this space, please collaborate with the entities listed to avoid duplication of effort.

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ³
Ensure timely access to linguistically appropriate care. Suggested Timeline: Many of these efforts are already in place; the priority would be to expand and invest more resources as necessary to meet this goal. Target to meet = 2 weeks	 When needed, provide care via certified interpreter. Additional guidance: In emergency settings, certified interpreter services must be available within 1 minute. In palliative care scenarios, certified interpreter services must be made available within 5 minutes. In-person interpretation services are preferred whenever possible, as tele-delivery is not always reliable or of high quality. Sufficient partner resourcing will be required to realize this strategy. 	 Hospital Partners Dell Medical School/UT Health Austin CommunityCare Lone Star Circle of Care People's Community Clinic
Access to primary care services following hospital discharge Suggested Timeline: Many of these efforts are already in place; the priority would be to expand and invest more resources as necessary to meet this goal. Target to meet = 2 weeks	Ensure that COVID-19 positive patients can access a primary care appointment within 5 days of hospital discharge. Such appointments should be arranged, confirmed, and communicated to patients <u>before</u> discharge.	 CommUnityCare Central Health El Buen Samaritano People's Community Clinic Lone Star Circle of Care Hospital Partners

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

Principles

(1) Employees –including contractors and the self-employed – are vital to the health of our community and must be protected.

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

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ⁴
Address the economic needs of those who either need to quarantine due to exposure; self- isolate because they test positive for COVID-19; cannot work because of a pre-existing health condition that puts them in danger if COVID positive; or are caring for someone who is COVID positive.	 The City of Austin should increase direct financial cash assistance to help those impacted by COVID-19, support lost wages, increase food security, ensure housing stability, and meet other needs. Resource distribution should occur through multiple avenues such as the City of Austin (RISE funding) as well as trusted community organizations. The duration of financial assistance should correlate with individual circumstances. For example, monthly assistance may be needed for immunocompromised or other individuals who should not work outside the home during the COVID-19 pandemic. Receipt of financial assistance should not be tied to immigration status. Establish a dedicated bilingual phone line for access to economic assistance. (See "Outreach, Prevention, and Communication" section.) Establish Sick Workers Resource Center that would provide: 	 City of Austin Equity Office Philanthropists Workers Defense Project Other Trusted Community Organizations as Identified
resources in a timely manner for high-risk populations is critical and a top priority. Target to meet = 2 weeks	 Education and advice on worker rights, including paid sick time. Information on where and how to file complaints of employer violations. Training for teleworking jobs. Help applying for unemployment benefits and other assistance. 	

⁴ Before pursuing new work in this space, please collaborate with the entities listed to avoid duplication of effort.

Goal and Target Timeline	Recommended Strategies	Proposed Partner Entities ⁴
Require businesses to invest in employee health protections. Suggested Timeline: Access to these resources in a timely manner for high risk populations is critical and a top priority. Target to meet = 2 weeks	 Require employers that contract with the City of Austin – particularly those serving essential functions (e.g., construction, janitorial, health care) – to: Commit to tailored, bilingual outreach. Post sick time/Families First Coronavirus Relief Act (FFCRA) information at the worksite in English and Spanish. Send a letter (English and Spanish) to all employees explaining their sick time rights under FFCRA. Provide PPE and other supplies (e.g., hand sanitizer) to essential workers. Eliminate any requirement of a health clearance letter as a condition of employment. Levers of enforcement might include denying permits to and eliminating from future bid consideration those employers who do not comply. 	 City of Austin Development Services Department. Code Enforcement Emergency Operations Center (To help source PPE and other supplies if needed) Business Chambers (e.g., Hispanic Chamber of Commerce) Contractor Associations Workers Defense Project Austin Latino Coalition
Motivate trade associations and business organizations that work closely with the Latinx community to share COVID-related support services and information with their constituents. Suggested Timeline: Employer collaboration to protect their employees is critical. Target to meet = 2 weeks	 Provide messages and materials to share. Create an informal ambassador program – focused on the few most influential organizations that can help and have them disseminate the messages to other groups. 	 City of Austin Equity Office Hispanic Contractors Association Hispanic Chamber of Commerce Austin Public Health Day Labor Program Outreach (Derrick McKnight)
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