Greater Cleveland COVID-19 Rapid Response Fund

American Rescue Plan Act Recommendations

The Greater Cleveland COVID-19 Rapid Response Fund convened five policy teams, widely representative of the Fund and its community partners, to identify priorities for investment of state American Rescue Plan Act (ARPA) funds. The groups consisted of over 100 people from local government, philanthropy, non-profit, and community-based organizations—tasked with developing recommendations addressing childhood well-being, food security, housing stability, public health, and workforce development. All the recommended investments are consistent with Coronavirus State and Local Fiscal Recovery Funds guidance released by the U.S. Department of the Treasury. Some might also be supported with funds Ohio will receive through other provisions of ARPA. In many instances, these recommended investments reflect areas where the Greater Cleveland COVID-19 Rapid Response Fund, Cuyahoga County, and the City of Cleveland have already made similar private and public investments.

CHILDHOOD WELL-BEING

TOP STATEWIDE PRIORITY: MODERNIZE LEAD POISONING PREVENTION, SCREENING AND TESTING. The package of lead-safe policy and financial investments in Governor Mike DeWine's as-introduced version and remaining in the House version of the state fiscal year 2022-23 budget moves the state toward a system of true prevention, with the goal of keeping our youngest Ohioans from ever being exposed to lead in their homes. It also expands the SCHIP lead program for high-risk children. ARPA funds should be put towards creating a childcare lead safety and screening pilot program and support mitigation in early care and education settings. These efforts can be initiated with ARPA funding and then possibly augmented by additional federal funds as those become available. Significant local public and private dollars have been invested in this priority.

TOP STATEWIDE PRIORITY: EXPAND OHIO'S CAPACITY TO PROVIDE EARLY CHILDHOOD MENTAL HEALTH SERVICES. The pandemic has exacerbated the already urgent need for greater capacity to meet early childhood mental health needs—particularly clinical interventions and treatment modalities by ADAMHS Board providers. ADAMHS Boards can support safety net mental health services for this population but need state investment to increase the number of trained providers and develop a workforce pipeline to grow the number of skilled mental health professionals, especially young professionals of color. Professional fellowships, ongoing training, and career pathways programs are urgently needed to prepare future professionals to meet the needs of young children and families statewide.

TOP STATEWIDE PRIORITY: EXPAND PUBLICLY FUNDED CHILDCARE TO 200% OF THE FEDERAL POVERTY LEVEL (FPL). Employers and economists have identified the lack of affordable childcare as a leading reason why women are not returning to the workforce as quickly as expected. Restoring state aid to former levels will help stabilize families emerging from the pandemic. The cost of boosting eligibility to 200% of FPL statewide is estimated at

\$220 million a year for children 0-6 years of age. Significant local public and private dollars have been invested in this priority.

FOOD SECURITY

TOP STATEWIDE PRIORITY: MAKE A ONE-TIME INVESTMENT IN REDESIGNING THE OHIO BENEFITS SELF-SERVICE PORTAL TO CREATE A MOBILE-FRIENDLY, EASY-TO-USE ACCESS POINT FOR APPLICATION AND RENEWAL OF SNAP, MEDICAID, TANF, AND CHILDCARE ASSISTANCE. Ohio will receive \$34 million in SNAP administrative funds through ARPA, some of which could be earmarked for this project, which would result in more efficient user interfaces and reduced administrative burden for state agencies. This project would also relieve county JFS offices of a significant administrative burden.

TOP STATEWIDE PRIORITY: MAKE A ONE-TIME INVESTMENT IN TRANSITIONING OHIO'S WIC PROGRAM FROM A PAPER-BASED "OFFLINE" TO AN AUTOMATED, WEB-BASED SYSTEM. WIC benefits could then be loaded onto a card, similar to commercial debit and ATM cards, without requiring families to come in-person to a WIC office every 4 months. Less than 50% of eligible Ohio mothers and children participate in the program because of administrative barriers, many of which would be resolved with a web-based system.

TOP STATEWIDE PRIORITY: HELP FINANCE THE DISTRIBUTION OF HEALTHY FOOD IN OHIO. Healthy Food for Ohio is a grant and loan program designed to increase access to healthy food retailers in underserved rural and urban communities, managed by the Finance Fund. The program was established by the Ohio legislature in 2014 and received just \$300,000 in state funding in the 2020-2021 biennium budget. The program should be expanded to include smaller retailers (e.g., corner stores, food co-ops, pop-up markets and convenience stores) and set aside funds to issue Point-of-Service (POS) devices to small, independent food

HOUSING STABILITY

retailers so they can participate in nutrition incentive programs (e.g., Produce Perks).

TOP STATEWIDE PRIORITY: ALLOCATE \$100 MILLION TO THE OHIO HOUSING TRUST FUND (OHTF). The OHTF is an existing infrastructure that provides affordable housing opportunities, expands housing services, and improves housing conditions for low-income Ohioans in every corner of the state. The OHTF is flexible and supports a wide range of housing activities, including housing development, emergency housing, emergency home repair, handicapped accessibility modifications, and services related to housing and homelessness. The recommendation is for the state to distribute half of these funds, and for the other half to be distributed by local municipalities in accordance with locally identified needs.

TOP STATEWIDE PRIORITY: ALLOCATE CAPITAL FUNDS FOR NON-CONGREGATE EMERGENCY SHELTERS FOR CRISIS PREVENTION, INTERVENTION, AND EMERGENCIES.

The pandemic revealed the potential dangers of congregate emergency shelters, especially

for highly vulnerable and medically fragile populations. The state should invest in creating non-congregate emergency shelters or retrofitting existing shelters to serve as non-congregate settings, as well as creating non-congregate settings to serve the LGBTQ community. Non-congregate settings could potentially be converted into permanent affordable housing. An additional priority should be the provision of assistance for survivors of human trafficking and domestic violence with emergency transfers and moves. The pandemic has intensified both of these urgent challenges.

PUBLIC HEALTH

TOP STATEWIDE PRIORITY: FULLY FUND ADEQUATE LOCAL AND STATE PUBLIC HEALTH DATA WORKFORCE. COVID-19 has revealed the impact of inadequate investment over time in our country's public health infrastructure, particularly the public health workforce. An adequate local public health data workforce is defined by the Ohio Public Health Partnership as at least one FTE epidemiologist per 100,000 population; it provides \$0.67 per capita to local public health administrative entities (e.g., city, county, or other municipal boards of health). ARPA funds are needed to fully fund an adequate state public health guidance workforce, defined as an increase in the number of Ohio Department of Health staff dedicated to providing guidance to local health districts. Support a Regional Hub Task Force to develop an improved structure for state-local communication, shared resources, expertise, and workforce training. Wherever possible, public health data should be integrated with other data systems (e.g., education, workforce) that combined can create an in-depth portrait of human and community need and inform effective deployment of limited public funds.

TOP STATEWIDE PRIORITY: ESTABLISH A HARM REDUCTION FUND WITH A ONE-TIME INVESTMENT. The pandemic dealt a blow to Ohio's ongoing efforts to stem the tide of opioid addiction. As a result, greater investments in pandemic-related harm reduction are needed. A special harm reduction fund could support widespread and streamlined naloxone distribution, syringe services programs (SSPs), and other harm reduction activities in all Ohio counties. Ohio ranks 47th in drug overdose and has "administrative barriers to naloxone distribution", according to the Health Policy Institute of Ohio. This one-time use of funds could be complemented by other sources of funding (e.g., opioid settlement).

TOP STATEWIDE PRIORITY: INVEST IN A MULTI-FACETED TOBACCO CESSATION EFFORT TO REVERSE INCREASED SMOKING RATES RESULTING FROM THE PANDEMIC. This would include universal access to the Ohio Quitline and nicotine replacement therapy, a targeted communications campaign, partnering with FQHCs, local health departments, and Medicaid managed care organizations on a cessation campaign, implementation of Tobacco 21 (monitoring/compliance; start-up costs for vendor licensing), and restrictions on marketing targeting youth.

WORKFORCE DEVELOPMENT

TOP STATEWIDE PRIORITY: GET OHIOANS BACK TO WORK. Provide a one-time boost in flexible funding to Ohio Means Jobs Workforce Development Boards to address current barriers to going back to work in critical sectors, including services that support workers returning to the labor market (outreach, career navigation, supportive services), completing training, and securing jobs. Additionally, launch a statewide pilot to establish local, evergreen no- or low-interest loan funds for workers to weather unexpected expenditures and stay in jobs and/or finish job training. These funds would be designed to address gaps in supportive services as a "last in" resource for hard-to-cover expenses like vehicle repairs, medical bills, and legal fees; be administered locally by effective community-based loan servicing organizations (such as Hebrew Free Loan Association in Northeast Ohio); and could require local match. These strategies would require investments primarily focused on augmenting ODJFS budgets for local Ohio Means Jobs distribution via formula, with competitive award for the local, evergreen loan funds.

TOP STATEWIDE PRIORITY: EXPAND INVESTMENT IN SECTOR PARTNERSHIPS TO HELP COMPANIES EFFECTIVELY, EQUITABLY, AND EFFICIENTLY REBUILD THEIR EMPLOYEE

PIPELINES. Jumpstart new partnerships in sectors most impacted by the pandemic, such as retail/hospitality, construction, utilities, transportation and logistics, and public health, while scaling up investment in existing sector partnerships in critical sectors for recovery, such as manufacturing, health, and information technology. One-time funds would seed sector partnerships until they can be fully integrated into existing workforce systems and would scale up the impact of existing sector partnerships to cement the case for sustainability. Funds could be distributed via competitive multi-year grants. These strategies would require an investment to expand the Office of Workforce Transformation's sector partnership program and ensure every economic region of the state receives meaningful seeding and scaling support. They could also include investments in innovative alternatives to incarceration.

TOP STATEWIDE PRIORITY: HELP OHIO BUSINESSES COMPETE FOR TALENT AND HELP WORKERS ACCESS IN-DEMAND CAREERS. Invest in and scale supports for skills-based, earn-and-learn workforce development opportunities like pre-apprenticeships, apprenticeships, and internships in in-demand industries, with a focus on bringing historically underrepresented workers into these careers (especially Black and Hispanic/Latino workers). This priority includes expanding the ODJFS Apprenticeship Ohio program, scaling up TechCred to support training of incumbent workers, and expanding the Office of Workforce Transformation's Tech internship program for high school students to larger scale and additional in-demand STEM careers. This also includes providing specific supports to help historically underrepresented young adults (especially Black and Hispanic/Latino) and formerly incarcerated workers. These strategies would require an investment across ODJSF and the Office of Workforce Transformation.

OTHER IMPORTANT STATE PRIORITIES

The Greater Cleveland COVID-19 Rapid Response Fund's ARPA state policy teams identified other issues that also warrant state support.

Childhood Well-Being

Increase access to integrated school-based, community-connected health care. Since mid-2020, a statewide group of school-based health care experts and advocates has been developing strategies to expand school-based health care across the state in a sustainable way through a statewide pilot program jointly involving the Department of Health, the Department of Education, and the Department of Medicaid. The pilot would prioritize schools that serve children of color and children at highest risk of poor outcomes due to other systemic and structural inequities.

Extend Ohio's Public Preschool program to serve more children. Prioritize 3- and 4-year-olds equally and extend the time in classrooms to full-day, five days per week in an important step toward universal pre-K access.

Make a one-time investment in expanding the Ohio Healthy Program. The program uses high-impact nutrition and physical activity policies to improve childhood health. The state should also consider increasing the number of publicly funded early education programs meeting the nutrition and physical activity with Ohio Healthy Program expansion.

Comply with *D.O. v Glisson.* The U.S. Court of Appeals for the Sixth Circuit in Cincinnati found that Ohio children placed with approved, unlicensed relatives were eligible for federal foster payments on the same basis as children placed in licensed foster homes.

Fully implement enhanced funding for "economically disadvantaged" students in the new school funding formula in 2022 forward (Fair School Funding Plan), providing important support to Ohio's 21 urban districts.

Food Security

Increase access to fruits and vegetables via Produce Perks, Produce Prescription, WIC Fruit and Vegetable Vouchers, and investments in community food distributors, food pantries, hot meal sites, and food recovery initiatives. Produce Perks and Produce Prescription programs incentivize the purchase of fruits and vegetables at farmers markets among low-income families. Coordinate with Senior Farmers Market Nutrition Program, WIC Fruits & Vegetable Vouchers, and other nutrition incentives to ensure fresh, local food is affordable. State support for WIC Fruit and Vegetable Vouchers could extend the program past its July expiration. Investments in community and neighborhood food distribution sites could provide needed resources (e.g., refrigerators and additional storage) to safely handle, distribute, and deliver emergency food, along with coordination for efficient distribution schedules.

Create a Nutrition Equity Fund to support local, community-led food security projects. This fund could be housed within a state agency (e.g., Ohio Department of Health's Health Equity Fund) or trusted and accessible third-party organization which can provide capacity building support to grantees and has a positive track record on diversity, equity, and inclusion in grant-making. Community leaders should have decision-making power in fund distribution and application processes should be designed to encourage participation by emergent and community-led groups and organizations.

Innovate school meal programs through the expansion of farm-to-school programs. This would result in economic investment in small- and medium-sized producers and food businesses in communities throughout the state.

Housing Stability

Create a flexible, shallow housing subsidy pool that provides a long-term partial rental subsidy to participants to help them achieve housing stability and prevent homelessness or reentry into homelessness. Shallow rental subsidy programs may be designed to respond to the particular needs of target populations such as seniors, veterans, persons with significant health or behavioral health needs, or people exiting institutions.

Create a pilot direct tenant assistance program. This program would provide participants with a set amount of money each month to support housing and related costs. Such a program would help individual households rather than subsidizing rental projects.

Create a landlord mitigation fund. A mitigation fund is an added protection for landlords willing to reduce screening criteria to rent to someone with limited income, a poor rental history, or a criminal history. If there are excessive damages to the unit, lost rent, or legal fees beyond the security deposit, landlords can be reimbursed for damages up to a specified amount.

Public Health

Establish a Public Health Data Advisory Council. The council should include the voices of public health professionals and data end users in planning and decision making that results in improved systems, buy-in among public health professionals, and more actionable surveillance data. Wherever possible, public health data should be integrated with other data systems (e.g., education, workforce) so that departments can collaborate more efficiently on issues related to the social determinants of health.

Develop Ohio's public health workforce pipeline. The pipeline should focus on underrepresented students, including Black, Indigenous and people of color. A representative public health workforce results in improved decision making and engagement with the community it serves.

Address violence as a public health issue. There were 177 homicides in Cleveland in 2020, 54 more than occurred in 2019. Similar increases have occurred in other Ohio communities. The U.S. Treasury regulations suggest investments in evidence-based community violence intervention programs to mitigate the increase in violence during the pandemic. The Ohio Department of Health should develop a grant program to support evidence-based community violence intervention programs that can make our communities safer.

Workforce Development

Make critical one-time investments in IT backbone upgrade and integration for workforce systems, starting with Ohio Means Jobs and local government systems, to ensure they are built to enhance navigation and ease of use for all size businesses (in addition to current focus on ease of use for job seeker).

Make training for in-demand careers an affordable option by expanding state investment in the evergreen Ohio to Work Reskilling Fund, boosting access to training programs through student-friendly Income Share Agreements (ISAs), and expanding scholarships for historically underrepresented workers in IT programs like Tech Elevator. In addition, expand programs eligible for Reskilling Fund ISAs to include up to two-year training programs, an expanded list of occupations critical to recovery (such as nurses, public health workers, and key construction and utility roles), use for up to the last two years of STEM bachelors' degree programs, and allow embedding of living expenses and program materials into ISAs, in addition to tuition.

Increase support for disadvantaged young Ohioans to enter the workforce by expanding summer and year-round work experiences for in- and out-of-school youth with limited family income. In particular, the State should invest in increasing the number of youths served through summer work experiences, especially those whose families have been adversely impacted by COVID-19.

Enhance the ability of small- and mid-sized businesses to attract workers by providing job design and workplace inclusion technical assistance. Enable them to compete with larger firms by designing jobs that will encourage workers to build skills in small companies. Focus on small and mid-sized companies in sectors significantly impacted by the pandemic (e.g., retail, services, hospitality, long-term care, and nursing facilities) as well as firms led by women and people of color.





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