

Dear Subcommittee on COVID Relief:

Thank you for your work on the Kent County subcommittee on COVID relief. We are a group of representatives from Grand Rapids area congregations and community institutions working together to build relationships across lines that divide our community and engage families meaningfully in decisions that affect them. Recently we have conducted more than 500 conversations with a diverse array of community members within our institutions and neighborhoods about the challenges they are facing in the wake of the pandemic. Based on our conversations and subsequent research, we would like to bring to your attention key issues that have arisen and proposed allocations of funds from the COVID Relief Fund to address these.

As we understand it, the COVID County budget has \$12 million un-allocated dollars, with \$82 million already allocated and \$20 million to be put in reserve for a potential second wave. We respectfully submit the following proposal for additional allocations:

Workplace safety support: \$204,000

For County Health Department inspections to proactively ensure local businesses are following COVID safety precautions and understand what is required of them. We recognize that there are a number of new requirements to navigate. We have also heard from many frontline workers, especially workers in lower wage jobs, medical facilities, and nursing homes, who fear for their jobs if they register a complaint about workplace safety. These include a worker at Roskam Baking who has seen no sign of any screening and who has been told he may not take a leave for his safety concerns without a note from his doctor, and a nursing home attendant who has been ordered to remove her mask because it is scaring the confused residents. This also includes workers who are aware of MIOSHA and their right to make complaints. They have suggested that a proactive approach by the County Health Department would be of significant benefit.

Expenditure calculations are as follows:

10 staff inspectors at \$25/hour, 40 hours/week
2 weeks of training & preparation
12 weeks of inspection work
Total: \$140,000

2 supervisors at \$30/hour, 40 hours/week
2 weeks of training & preparation for themselves
2 weeks of training & preparation for inspectors
12 weeks of inspection work
Total: \$38,400

Equipment (12 laptops, 12 phones, etc.)

Total: \$20,000

Mileage (57.5 cents/mile, 50 miles/day, 14 weeks, 12 people)

Total: \$5000

Testing: \$11,300,000 (increase over current proposal: \$6,400,000)

According to modeling done by the Safra Center for Ethics at Harvard and its “Roadmap to Pandemic Resilience,” more funding than the currently proposed \$4,900,000 for testing would be needed for a county our size.* We note that the Grand Rapids African American Community Task Force is seeking additional funding for mobile testing and LatinxGR is also concerned about adequate testing funds.

Expenditure calculations for testing are as follows, per Harvard recommendations:

Number of tests/day = 2500 x number of COVID deaths/day

Testing cost = \$25/test including kit, processing, etc.

Assuming an average of 2 deaths/day:

(5000 tests/day x \$25/test) 90 days of testing = \$11,250,000

Per Harvard’s “Roadmap to Pandemic Resilience,” “Diagnostic tests are used for those who are symptomatic, for those with reasons to presume exposure based on community spread (e.g., health care workers), and for symptomatic and asymptomatic contacts of those in the first two groups, but also in broadly applicable mandatory employer, school, and benefits-based testing programs” (p.12).

We would urge the Health Department to make universal testing available at these levels, per this recommendation, and to ensure testing is made available at sites that are trusted in the most vulnerable communities.

Contact Tracing: \$5,200,000 (increase over current proposal: \$3,100,000)

Estimates by Harvard’s Safra Center for Ethics for funding for a county our size are more than twice as much as the currently proposed \$2,100,000.*

The recommended contact tracing level for areas with moderate case level, per Harvard’s Safra Center, is 60 teams of 5 tracers for every death/day.

Expenditure calculations for testing are as follows, per Harvard recommendations:

Assuming an average of 2 deaths/day:

60 teams of 5 tracers x 2 deaths/day = 600 tracers

600 tracers x \$18/hr x 40 hrs/week x 12 weeks = \$5,184,000

It will also be key to ensure that tracers are hired from the most vulnerable communities that are familiar with and deeply understand these communities to facilitate more effective tracing. Potential ideas for creating tracing jobs are partnering with the Kent County Jail's returning citizens and/or Family Outreach Center's "Seeking Safety" program for young men recovering from abuse. We recommend a living wage of at least \$15/hour and including some Spanish-speaking tracers to build trust with the immigrant community.

Supported isolation: \$5,250,000

This is an essential part of the Testing, Tracing, and Supported Isolation (TTSI) strategy for more effective containment of the virus going forward.*

Some individuals are unable to safely quarantine at home due to number of people in the home, family members with underlying conditions placing them at higher risk of infection, etc.

Expenditure calculations for supported isolation are as follows, assuming a 14- day quarantine period:

\$75/night hotel x 14 nights = \$1,050

Supported isolation for 5,000 people x \$1,050/person = \$5,250,000

Rent/eviction assistance: \$3,000,000 (increase over current proposal: \$2,000,000)

This need continues to grow as the economy contracts. Our proposal adds \$2 million to the currently allocated amount, recognizing how rapidly funds like Up Together Kent County have been expended and the growing number of people behind on rent/housing costs. Funds unexpended as community members return to work over the next several weeks could be made available for other uses.

Translation of COVID information materials: \$96,000

As LatinxGR also notes, information in languages other than English is sorely needed to reach the diverse populations within Kent County. Expenditure calculations are as follows:

10 translators x \$20/hour x 40 hours/week x 12 weeks = \$96,000

This includes captions for daily Kent County Health Department videos.

This proposal represents a total of \$17,050,000 in increased expenditures. The majority of this could come from the currently unallocated \$12 million. The additional \$5,050,000, if used from the proposed \$20 million reserve, could be significantly helpful in preventing a second wave and the need for such a reserve.

We appreciate your crucial work, and look forward to hearing your thoughts on this proposal. Thank you for this opportunity to voice our concerns and for your consideration of the needs and challenges faced by so many members of our community.

Respectfully,

The Grand Rapids Organizing Team

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*Sources cited:

Danielle Allen, et al., "Roadmap to Pandemic Resilience"

https://ethics.harvard.edu/files/center-for-ethics/files/roadmaptopandemicresilience_final_o.pdf

More information, including calculation formulas for numbers of tests and tracers, can be found at <https://www.pandemictesting.org/>

A shorter article can be found here:

<https://www.washingtonpost.com/opinions/2020/04/20/three-key-ideas-stake-post-coronavirus-future/>