

# COVID-19 Community Assessment Update

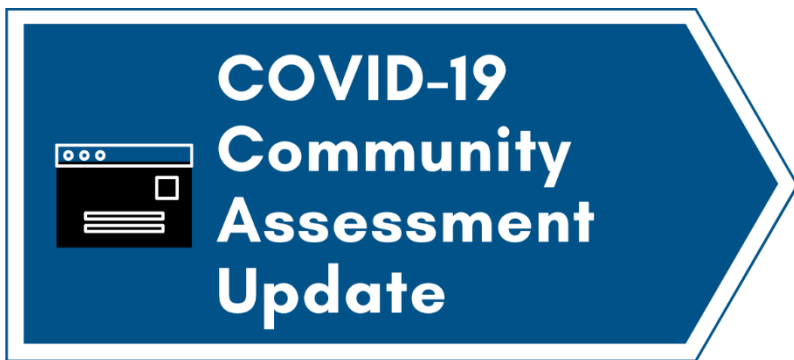
2020

WRIGHT COUNTY COMMUNITY ACTION

Board Approved on  
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*April 2020*

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***This update to the Wright County Community Action - Community Assessment was completed in the months of April and May of 2020 in response to the COVID-19 global pandemic.***

## I. Background

This Community Assessment Update is in response to a global health pandemic that has not only affected every community in the United States but has also led to the most significant economic disruption since the Great Depression. This assessment is an initial effort to capture some of the emerging needs in the community as well as to forecast how those needs may evolve over the coming weeks and months.

In December 2019, the novel coronavirus disease of 2019 (COVID-19) was discovered to be the causative agent for acute respiratory and flu-like symptoms and began infecting increasing numbers of people in the Wuhan Province of China. The first case in the United States was confirmed by the Centers for Disease Control and Prevention on January 22, 2020. Despite efforts to contain the virus, by March 11, 2020, the World Health Organization declared COVID-19 a global pandemic. By March 17, 2020, all 50 US States had confirmed cases of the virus.

Because of the highly contagious nature of COVID-19, the alarmingly high rate of fatalities associated with it and the lack of a vaccine or treatment, the only effective way to prevent mass illness is through restricted travel, physical distancing, frequent hand washing, coughing in elbows, not touching the face, and staying at home. By mid-March 2020, with the virus clearly past the stage of effective isolation and contact tracing, local, state and federal public health officials recommend extreme measures to minimize a public health catastrophe: mass quarantine, physical distancing, and a virtual lockdown of all public gatherings and economic activity.

While all types of people are getting sick from the disease, older adults and people of any age who experience serious underlying medical conditions, many that are more prevalent in African American communities, and, to some extent, Latinx and Native American communities, are at increased risk for severe symptoms from COVID-19. Persons of color, immigrants, and women are also disproportionately impacted by underlying health conditions linked to poverty, face discrimination in medical care, and are more likely to work jobs that require them to leave their homes. In addition, persons with disabilities or chronic conditions are more vulnerable to COVID-19 due to their inability to thoroughly isolate themselves (need for hands-on care), physical impairments, environmental barriers, or interrupted services. The following additional populations experience differential exposure and extensive corresponding implications because of the pandemic: frontline workers, persons experiencing homelessness, gig-economy workers, low-income communities under quarantine, especially in urban settings, rural communities, tribal communities, incarcerated persons and returning citizens.

Children, families, individuals, and Community Action Agency staff may experience heightened stress, anxiety, and trauma as a result of the COVID-19 crisis. Loss of income, growing childcare needs, heightened food insecurity, housing and energy instability, lack of access to transportation, lack of basic supplies, and increased domestic violence are growing factors as the crisis unfolds.

**Because of the urgent and widespread needs affecting all sectors of the community, this Community Assessment update is intended to provide some initial information to describe the scope of this crisis on our community and to support the many different responses that will be required to address emerging, evolving needs. It is likely that as needs evolve, some of those needs will not be captured in this update and therefore some necessary community responses may not connect to the needs identified in this document.**

The *community* assessed in this document, related to the below information, is defined as all communities in Wright County. However, our service area also includes the following communities in western Hennepin County: Rogers, Greenfield, Corcoran, Medina, Orono, and Mound. Qualitative data may include information from these communities as well.

The needs assessed will inform services to those affected by the crisis. It is significant to note that Congressional action will permit FY20 and special supplemental CSBG funding to serve families at or below 200% of the federal poverty level (as defined by [the US Census Bureau](#)). Specific programs or strategies will target the demographic groups most affected. Given persons of color are being disproportionately affected by both the health crisis and by the resulting economic disruption, an equity lens must be used to view current and emergent needs related to this crisis.

## II. Local public health response

The first official news release about the novel Coronavirus was made by Wright County Public Health Department on February 28, 2020. The official statement included guidelines such as limiting going out in public for non-essential necessities, staying at home if sick, when out in public maintaining six feet distance between themselves and others, wearing face coverings, etc. Also, the guidelines indicated utmost precautionary measures for individuals over the age 60 or those with underlying health conditions such as blood disorders, chronic kidney disease, chronic liver disease, compromised immune system, late-term or recent pregnancy, endocrine disorders, metabolic disorders, heart disease, lung disease, neurological conditions.

Two weeks from the first official news release, Wright County reported its first case of COVID-19 on March 13, 2020 in a person in their 80's who apparently had a history of out of state travel. Subsequently, on April 9, 2020 Wright County registered its first death because of COVID-19, caused by the novel Coronavirus in an individual in their 80's.

Due to the increase in the number of COVID-19 cases, the Governor of Minnesota, Tim Walz imposed stay at home orders effective at 11:59 pm of March 27, 2020. Due to the further spike in cases on May 1, 2020 the Stay at Home order was extended until Monday, May 18, 2020. Therefore, the order still holds the regulations in place directing the residents of Minnesota to continue limiting social interactions and engagements outside of their homes beyond essential needs to reduce the spread of COVID-19.

Wright County Department of Health and Human Services has been prompt in responding to the Coronavirus Pandemic. They are working in partnership with the Sheriff's Department for Incident Command and opened an Emergency Command Center to safeguard the health and well-being of the residents in Wright County.

Furthermore, Wright County Department of Health and Human Services has been focusing more on migrant population, incarcerated, homeless, farm workers, and certain business communities, by providing consultations and doing specific outreach to manufacturing sectors, especially the food processing industry as they are at risk population for COVID-19.

For more information regarding the Public Health response, you may contact the Wright County Hotline at (763) 682-7607 or visit: <https://www.co.wright.mn.us/945/Coronavirus-COVID-19>

### III. Immediate impacts on the community

The immediate impacts of COVID-19 have been felt across all sectors of society. In particular, some of the greatest impacts relevant to the Community Action Network have been in the areas of health, education, employment, human services provision, and community resources. In this community, vulnerability is highest in the following areas:

**Blue** areas indicate populations with densities greater than 100 persons per square mile

**Yellow** areas indicate uninsured populations greater than 4%

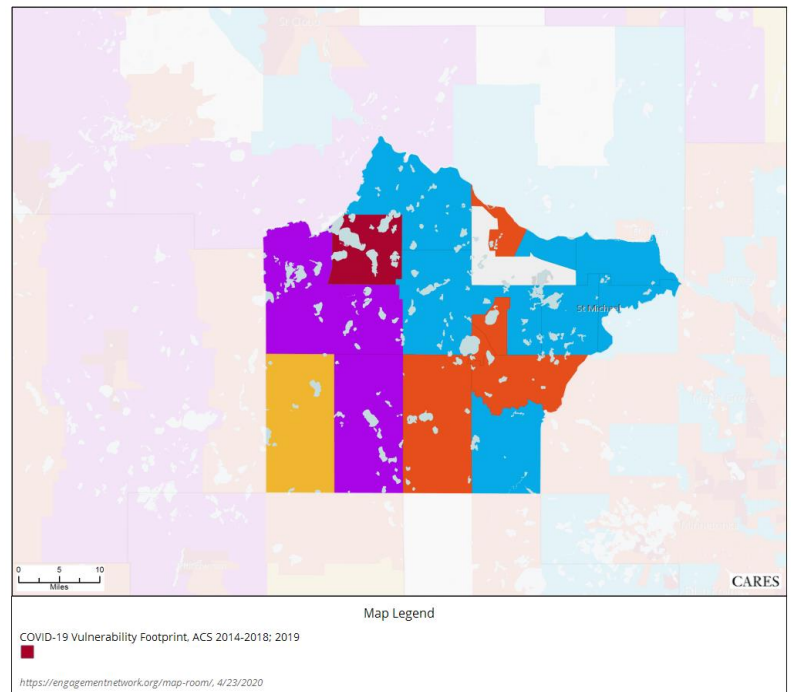
**Purple** areas indicate populations over the age of 65 is greater than 15%

**Orange** areas indicate populations that meet two of the above thresholds

- The area of Montrose meets the uninsured and population density thresholds.
- The area of Rockford meets the uninsured and population density thresholds.
- The area of southern Buffalo meets the age and population density thresholds
- The area of northern Buffalo meets the uninsured and population density thresholds.
- The area of Monticello meets the age and population density thresholds

**Dark Red** areas indicate populations that meet all three thresholds

- This include the area of Annandale and Corinna Township



- Nationwide, early data suggest that the following groups have experienced disproportionately higher rates of infection and/or complications/death as a result the COVID-19 pandemic:
  - Males
  - Individuals 60+ years old
  - People of color, particularly African Americans
  - People with underlying health conditions (especially, lung disease, asthma, diabetes, cardiovascular disease, kidney disease, liver disease, severe obesity, and individuals with immunocompromised conditions)

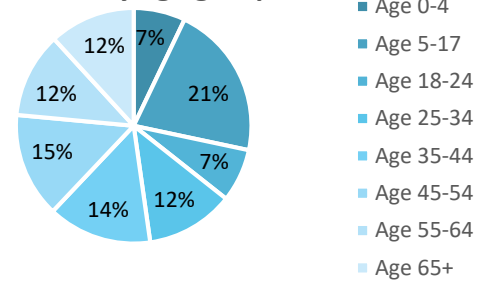
- An estimated 11.7% of the Wright County population have a commute to work for over 60 minutes. A lot of residents commute to neighboring counties for work thus increasing their risk of acquiring COVID-19.

In Wright County, there have been 253 total confirmed cases of COVID-19 as of May 26, 2020. The rate of confirmed cases per 100,000 population is 185.5 and 380.7 for Wright County, MN, and Minnesota, respectively.

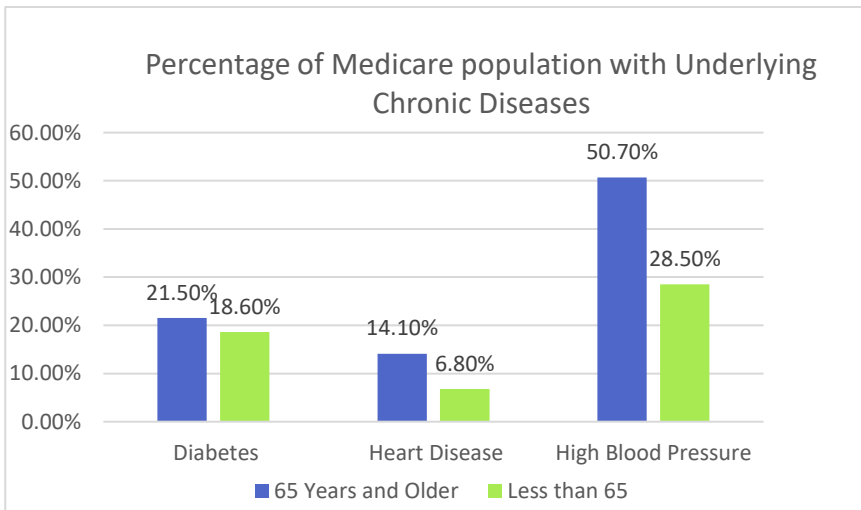
**Health Impacts:**

- **Individuals 65 and above, especially those with underlying health conditions have been shown to be at particular risk for severe health implications from COVID-19.**
  - Older individuals (aged 65 and above) constitute around 11.8% of the total population of Wright County. As of May 13, 2020, there were 124 confirmed cases reported in Wright County with the average age being 47.2 years among the confirmed cases. Furthermore, 34% and 10% of the total cases were observed among the age groups 50-64 and ages 65 and above respectively indicating higher prevalence among older individuals.
  - Although children are comparatively at lower risk for severe disease and death, recent reports show that some children do require hospitalization and intensive care. Additional reports from WHO have described clusters of children and adolescents requiring admission to intensive care units with a multisystem inflammatory condition with some features like those of Kawasaki disease and toxic shock syndrome.
  - Irrespective of age, people with underlying chronic conditions are at an increased risk of acquiring COVID-19. Wright County has 10.0% Adults with Asthma, 18.6% and 21.5% Medicare population less than 65 years and 65 years and older respectively with Diabetes. Furthermore, 14.1% and 50.7% (65 years and older) of the Medicare population had Heart Disease and High Blood Pressure, respectively. Whereas, 6.8% and 28.5% (less than 65 years) of the Medicare population had Heart Disease and High Blood Pressure, respectively.

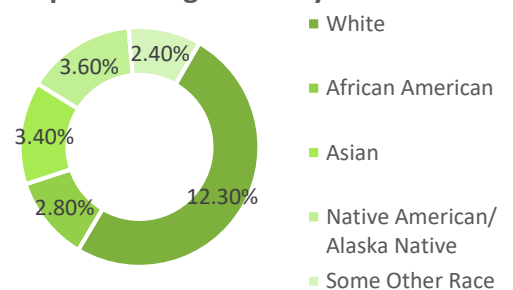
**Population by age group**



Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).



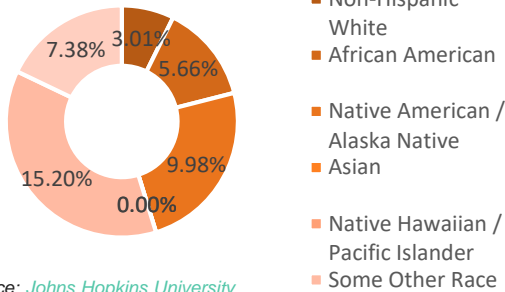
**Population aged 65+ by Race**



Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).

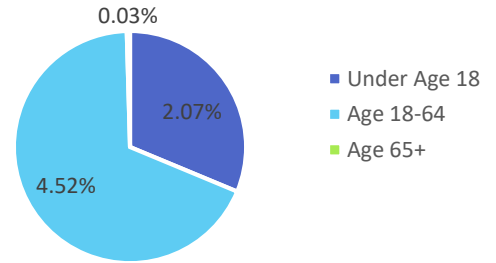
- Wright County has a total estimated population of 3.27% without insurance. 4.52% of the age group between 18 and 64 are uninsured. Lack of health insurance acts as a primary barrier to accessing quality health care. Low-income families and people of color are believed to be at greater risk of being uninsured. Furthermore, Wright County also has an estimated 1.38% of the population with limited English proficiency thus, acting as an additional barrier to access healthcare, provider communications and health literacy.

**Uninsured Population by Race**



Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).

**Uninsured Population by Age Group**

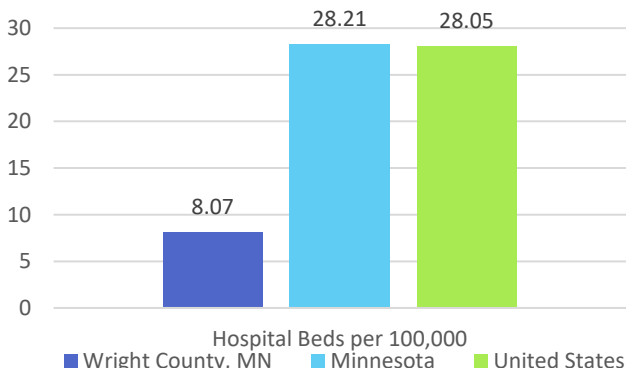


Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).

- Community health resources will be stretched thin as resources devoted to those sick with COVID-19 will limit resources available to others.**

- As there is a surge in COVID-19 cases across the nation, the demand for hospital beds will overwhelm national capacity, placing severe burden on the health care system and curbing access to necessary care. Furthermore, ICU capabilities differ from hospital to hospital and certain communities and hospitals are well prepared to tackle the intensity than others. Above all, ICU beds are particularly important now because they are equipped to treat patients with respiratory ailments that require ventilators.

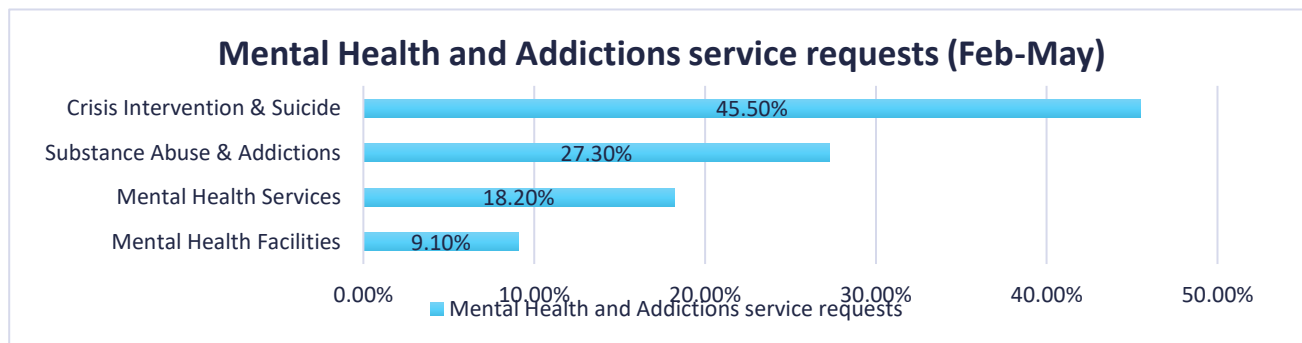
**Hospital Beds (rate per 100,000 population)**



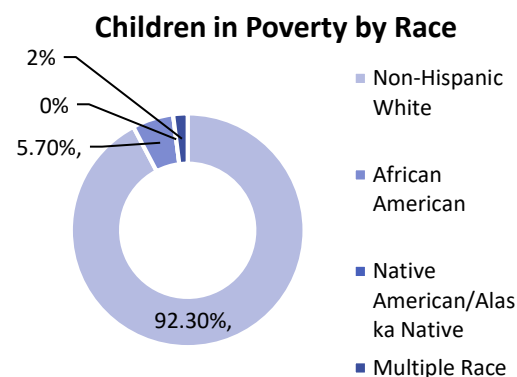
Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).

- The rate of Intensive Care Unit (ICU) hospital beds per 100,000 population in Wright County was recorded at 8.07 whereas the state and national ICU beds per 100,000 population were recorded at 28.21 and 28.05, respectively. Although the rate of hospitalizations due to COVID-19 in Wright County is not high, it is advisable that the existing hospitals be equipped and prepared to treat vulnerable populations as the number of COVID-19 cases multiply.

- **Mental health resources will need to be available in new and increased ways to deal with the many different stressors/traumas caused by the pandemic, especially its impact over an extended time period.**
  - Longer durations of quarantine and increase in the number of COVID-19 cases can be stressful thus, increasing fear and anxiety among people. Mental health burden is expected to escalate as the actions undertaken to reduce the spread of the virus, such as social distancing, non-essential service closures (schools, restaurants, businesses etc.), and shelter-in-place orders, result in greater seclusion and financial suffering.
  - Wright County has an estimated 22.1% of the Medicare fee-for-service population with depression. The prevalence of depression among Medicare population by age suggests an estimated 40.55% and 15.17% for less than 65 years and 65 years and older respectively.
  - Based on the service requests made to the 211 hotline, there were an estimated 5.5% Mental Health and Addiction requests made between the period of February and May in Wright County. Out of 5.5% requests, crisis intervention & suicide and substance abuse and addictions, constituted 45.5% and 27.3% of the requests, respectively.



- **Nutrition for school-aged children previously accessing free/reduced breakfast, lunch, and snacks is impacted as many are now removed from that food source due to school closures.**
  - School closures due to COVID-19 have greatly impacted the children who have relied on school meals for their daily dose of nutrition. Furthermore, the current pandemic situation would exacerbate the health conditions and academic performances of children who are already at an increased risk for poorer health due to the nutritional deficiencies.
  - Wright County has an estimated 20.4% of the children enrolled in public schools that are eligible for free or reduced-price lunch. Besides, 3.76% children aged 0-17 are living in households with income below the Federal Poverty Level (FPL).
  - Among the estimated 3.76% children, 92.3% of them are Non-Hispanic, 5.7% of African American children and 2% children belonging to multiple races are in poverty.



Data Source: [Johns Hopkins University](#). Accessed via [ESRI](#).



- Following are the schools providing meals for students following school closure due to COVID-19:
  - Annandale: [Foodservice@isd876.org](mailto:Foodservice@isd876.org) or call 320-274-0632
  - Buffalo-Hanover-Montrose: [khinrich@bhmschools.org](mailto:khinrich@bhmschools.org)
  - Dassel-Cokato: 320-286-4105
  - Delano: [kris.larson@delanoschools.org](mailto:kris.larson@delanoschools.org)
  - HLWW: [foodservice@hlww.k12.mn.us](mailto:foodservice@hlww.k12.mn.us) or call 320-543-461
  - Maple Lake: see survey on district website
  - Monticello: [businessoffice@monticello.k12.mn.us](mailto:businessoffice@monticello.k12.mn.us)
  - Elk River/Otsego/Rogers/Zimmerman: [michelle.jones@isd728.org](mailto:michelle.jones@isd728.org) or call 763-241-3409
  - Rockford: [wrowskia@rockford.k12.mn.us](mailto:wrowskia@rockford.k12.mn.us)
  - STMA: 763-497-6537

### **Employment Impacts:**

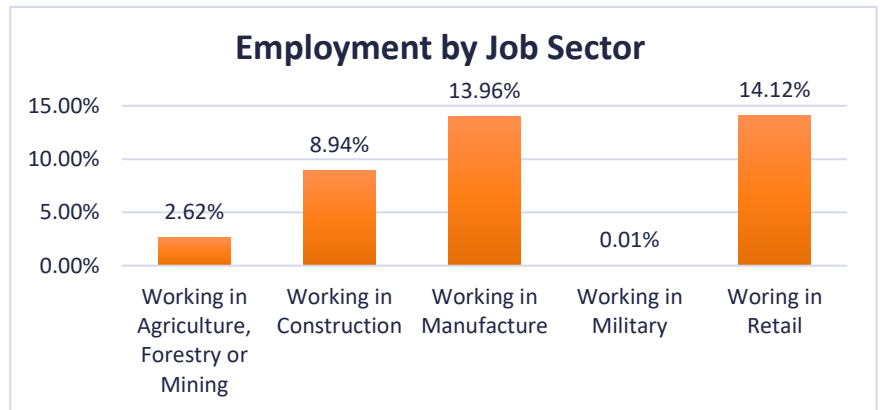
- ***Individuals in the health care field are at high-risk of exposure to COVID-19 and are under tremendous stress due to additional work hours and challenging work conditions. In particular many of those workers with close, frequent contact with vulnerable individuals are lower-wage individuals.***
  - There is an increased need for health systems and health care organizations to create and warrant a substructure and resources to support healthcare professionals and many other care workers who are at greater risk of exposure. Moreover, due to the increase in the number of cases, healthcare workers are working extra shifts and putting longer hours than usual, further intensifying both mental and physical strain.
  - According to CDC, a healthcare worker is defined as ‘all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or their infectious secretions and materials (e.g., doctors, nurses, laboratory workers, facility or maintenance workers, clinical trainees, volunteers).’
  - Hospital personnel, including caregivers, support staff, administration, and preparedness teams, all will be strained by the challenges of a continued response to COVID-19. The nature of the job puts health care workers at a greater risk of acquiring many communicable diseases. If healthcare workers contract the illness, it magnifies the existing high levels of strain on the health care system. Therefore, it is extremely important that they have access to protective equipment in order to reduce the spread among healthcare personnel.
  - Furthermore, health-support workers (ex- nursing assistants or personal care aides) are a relatively less well-educated, relatively low-wage group. Reports suggest that, women represent an even larger proportion of health support workers (86%). People of color (54%, including 25% African American and 19% Hispanic) make most of the health-support workers.
- ***Unemployment Insurance Statistics across Wright County***
  - For the week of May 18, 2020, the total number of applicants for Unemployment Insurance was 14,154. For the following week (week of May 25, 2020) that number has gone up again to 15,088.
    - This is an increase from 18.7% to a 20% share of the 2019 annual workforce in Wright County
  - Females outnumber males for Wright county applicants with 8,545 (56.6%) being female to 6,543 (43.4%) being male.



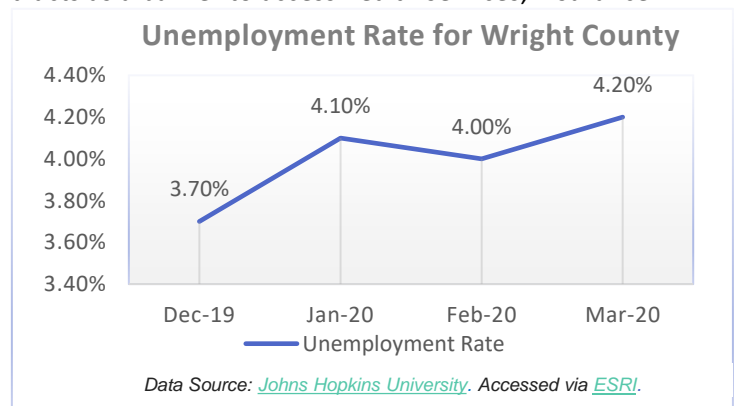
- Here are the top 5 occupation categories applying for UI in Wright County
  - Construction Trade workers with 1,181 (7.8%)
  - Food Beverage serving workers with 1,046 (6.9%)
  - Retail Sales Workers with 886 (5.8%)
  - “Other” Health Care Support workers with 619 (4.1%)
  - Personal Appearance workers with 574 (3.8%)

○ **Individuals in many sectors of the economy – but particularly the service sector, the retail sectors, gig economy, and others most affected by quarantine policies – are currently experiencing sudden and unexpected unemployment. Some are unaware of resources available to them and their families as they are experiencing unemployment for the first time.**

- Wright County has an estimated 2.62% working in agriculture, forestry, or mining and 14.12% in retail. Even during these hardship situations farmworkers along with other workers such as truckers and grocery store employees cannot shelter at home as their services are considered essential.

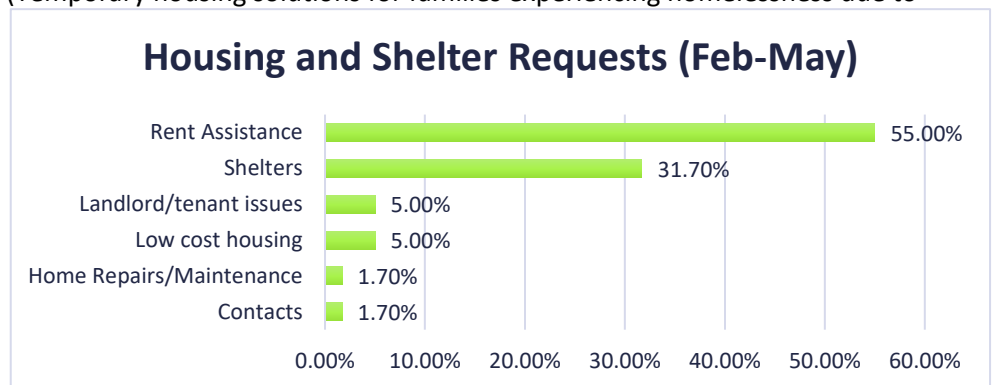


- Reports suggest that, farmworkers are susceptible to high rates of respiratory disease thus, making them vulnerable to illness. Likewise, farmworkers are predisposed to low rates of health insurance coverage, and below average living and working conditions endangering health and well-being of themselves and their families.
- Wright County reported an unemployment rate of 4.20% for the month of March. This increase in the unemployment rate disrupts financial stability and acts as a barrier to access health services, insurance coverage, healthy food, and other necessities that contribute to poor health status.
- Rising unemployment is expected to significantly modify the health insurance coverage backdrop as people who lose their jobs would become uninsured. Therefore, joblessness will likely affect uninsurance rates across the county.



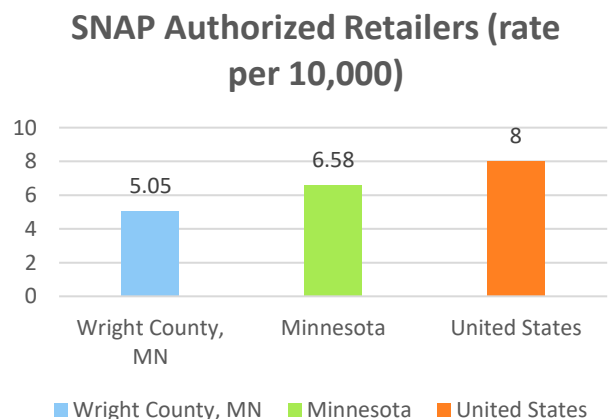
## Housing Impacts

- Unexpected furloughs and layoffs due to COVID-19 have resulted in unemployment in residents across Wright County. With unemployment and social distancing measures came many other issues for those experiencing homelessness and insecure housing.
- The pandemic has reportedly increased the cases of domestic and elder abuse. Women, children, and elderly are particularly vulnerable to abuse and the pandemic has further made it harder for victims to acquire help. Women and children are disproportionately at higher risk for domestic violence and incidents of elder abuse range from financial scams to incidents of family violence. Reducing the increasing rates of domestic and elder abuse arising due to the stay at home orders and physical distancing measures by-
  - Increasing awareness by using social-media platforms, use text-message based reporting (particularly helpful for the elderly) and mobile applications to report incidents.
  - Developing community-based services to increase awareness regarding the available protective services
  - Providing additional care and resources to the elderly and expanding shelter options
- People living in congregate settings and unconventional housing arrangements (multifamily dwelling, couch-hopping, living in campers or RVs) which is not just limited to long-term care but also people who are supported through human service labor programs such as group homes etc. will be impacted unduly and are at high risk for COVID-19 as following social and physical distancing measures is unfeasible.
- Wright County has an estimated 22.2% of the population living in housing units with one or more substandard conditions. Rental assistance (Financial assistance for rent, rental deposits, homeless rental vouchers etc.) and Shelters (Temporary housing solutions for families experiencing homelessness due to violence, illness, crisis etc.) constituted the top requests at 55.0% and 31.7% respectively. Other requests included Low cost housing and landlord/tenant issues at 5.0% and Home repairs /maintenance and Contacts at 1.7%

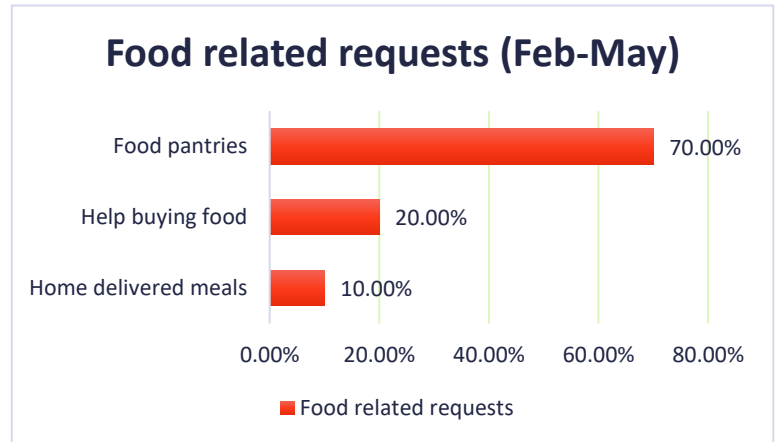


## Food Impacts

- Much of the economic suffering to low-income people has emerged in the food system through unanticipated job loss and changes to nutritional supplements which include school meals, food banks etc. resulted in dependence on Supplemental Nutrition Assistance Programs (SNAP). For many, the loss of school meals and other meal assistance programs has increased the effects of collapsing incomes, with immediate consequences on children and the elderly.

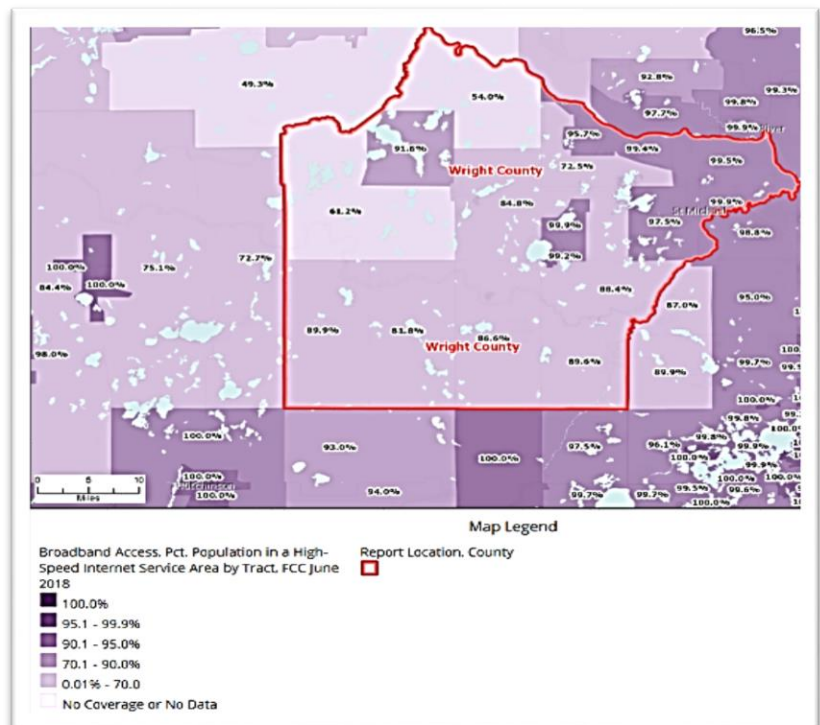


- Wright County has a total of 4.3% population receiving SNAP benefits. The rate of SNAP-authorized food stores per 10,000 population is 5.05 whereas the state and national SNAP authorized retailers' rate per 10,000 population is at 6.58 and 8.0.
- Also, 23.4% of the population suffers with low food access (living more than ½ mile from the nearest supermarket, supercenter, or large grocery store). Besides, 4.5% Food requests were made to the 211 hotline. Among the 4.5% requests, Food pantries constituted 70.0% whereas, Help buying food and Home delivered meals constituted 20% and 10% respectively.



**Educational Impacts:**

- **Closings of public schools throughout the state of Minnesota are having an immediate impact on children’s education. Children with less access to resources (broadband internet, computers/tablets, technology expertise, language barriers, etc.) are most at-risk for suffering learning loss during a potentially protracted period of school closure.**
  - Many parents are unwary of distance learning and homeschooling techniques. The schools across Minnesota moved to distance learning, which was first imposed on March 30, 2020 in response to the COVID-19 pandemic would remain in effect through the school year. This is particularly of concern for parents of low-income households who have limited education and resources. Also, as the access to education becomes uneven, interferences in assessments causes increased stress among test taking students and their families.
  - Clearwater and Silver creek township have an estimated 54.0% access to broadband.
  - Southside, French Lake and Albion township have an estimated 61.2% access to broadband.



### **Impacts on Human Services Provision:**

- **Services to vulnerable populations are being curtailed or drastically changed. Some service providers are not operating [Community based immunizations and health screenings, 60+ and Healthy Clinics, Meals on Wheels], leaving gaps in services to the community. Other service providers have had to alter their service provision in significant ways, leaving some family needs unmet [Fare For All]. Finally, for those service providers continuing to operate, the changed circumstances have required significant, immediate adaptations that will require additional resources to support over a longer period of time. At WCCA, we have identified the following needs:**
  - Personal Protective Equipment (PPE) is needed for client facing staff, as well as to provide our clients who are high risk
  - Monitor the level of internet access needs and purchase hotspots to fill this need

### **Community Resource Impacts:**

- **The impacts of COVID-19 on community resources are numerous and include a reduction in the availability of resources (access to group activities, commercial services), a scarcity of some resources (health care, food and emergency supplies) and/or needs for resources that have not previously been required in this community in any significant capacity.**
  - In order to reduce the spread of virus, many community services have been cancelled or providing limited services. **Fare For All**, an organization that provides fresh, nutritious food at a discounted price has limited its operations and is using a drive-thru model. Also, it has limited its sales to one sale per month and is currently only accepting cards as a method of payment. For people belonging to economically backward communities, paying through card may not be a feasible option further limiting their access to nutritious food.
  - Besides, health services such as **WOW program**, a service where Public Health Nurses (RNs) provide health services, education, and access to numerous community resources and the **60+ and Healthy Clinics** provided by Wright County Public Health which offers foot care for Senior Citizens and persons with access or functional needs in Wright County have cancelled their services until further notice.
- **The broad impacts of COVID-19 on this community have created an even more urgent need for coordination and collaboration of resources among the public sector, the public health sector, first responders, educators, the business community, the faith community and many others. Wright County Community Action plays an important role convening organizations, people, and resources to support families.**
  - School District partnerships should be utilized to promote services offered by WCCA to all local families regardless of income-level
  - Community Food Shelf drives through local churches can assist our Food Shelf in making the best possible use of each dollar and obtain products that are currently competitive through current suppliers.
  - TrailBlazer Transit can provide safe, clean and reliable transportation to clients in need – WCCA can partner with TrailBlazer to provide subsidized rides for clients via bus tokens
  - Cargill Foods donated over 17,000+ breakfast meals for our Senior Frozen Meal Program
  - Walgreens of Buffalo donated thousands of bags for packaging Senior Frozen meals

## IV. Anticipated Near- and Long-Term Impacts

The needs above are already established through initial data and anecdotal reports from customers, staff, board members and community stakeholders. Based on these already-observed events, it is likely that there will be near-term (1-3 months) and longer-term (greater than 3 months) impacts that that require immediate planning. A partial, but not complete, list of the anticipated impacts includes:

### ***Prolonged Service Disruptions***

The disruptions in the Agency's service delivery to customers are expected to continue for a substantial time. This is likely to lead to ancillary challenges for customers that may become long-term issues.

- Senior Transportation – staff can function as couriers in order to have clients fulfill their needs while remaining in their homes.
- Energy Assistance is continuing as business as usual. Clients are able to drop off documents in a secure lock box in the entry way of the Maple Lake office.
- Homebuyer Classes – classes shifted to a webinar model and the required documents mailed to client prior to the class. All documents available digitally for clients to sign and emails are secure.
- Foreclosure Prevention are processing foreclosure cases with no disruptions. Cases are expected to increase in approximately 6 months.
- Head Start and Early Head Start can continue to publish and provide activities and lessons for client families while monitoring progress remotely. They also continue to provide CACFP lunches for enrolled families throughout the program year.
- Food Shelf clients will require more access to protein, grain and produce options if food prices continue to inflate
- The Thrift Store space should be reconsidered during its disuse – the space may be reallocated for Food Shelf operations at this time.
- Weatherization guidelines for are being drafted now concerning client safety and worker safety and will be sent out from the MN department of Commerce shortly.
- MNSure will conduct meetings remotely as possible to help the increased number of residents who qualify for these programs
- VITA will finish the 2019 season remotely and rely on the US Postal Service for documentation needs.
- WIC's 2019 transition to the E-WIC platform and introduction of tele-health styled education has allowed the transition to remote work easier than other programs.

### ***Prolonged Employment Issues***

Sudden layoffs and other employment disruptions are being addressed by emergency response measures; however, it is anticipated that long-term recovery efforts will be required to help customers reconnect to the workforce, particularly those for whom employment assistance has not previously been required.

- Career Readiness opportunities for volunteers can be created as a certification of volunteer hours and skills utilized during their period of unemployment
- WCCA should assist CareerForce (Central Minnesota Jobs & Training) through staff awareness, social media and staff referrals.

### ***Prolonged Agency Capacity Issues***

Policies limiting in-person staff/customer interactions may be in place for an extended period of time and agencies will need to maintain remote work and remote customer-interaction infrastructure to be responsive to these needs in a more sustainable capacity.

- WCCA Server is due to be upgraded. This upgrade will provide access to more cloud-based resources that can enhance the remote work experience
- Technology Specialist needs to determine what software is included in the server upgrade and determine if other work from home programs are required
- Explore VPN options for remote access
- Updating the phones to VOIP will allow changes to happen much more efficiently and effectively
- Cloud-based Kaspersky updates will increase security without the technology connecting to the network.
- The fiscal system Orion needs to be transitioned to web-based
- Online webinar platforms to conduct board, team, and client meetings
- Document signing software to decrease the lag times while working remotely
- Explore options for a web-based intake system with demographic updating features
- Explore Jot Form options to enhance the virtual capability for client interactions on the website
- Upgrade the housing department hardware to meet the needs of the team
- Explore project management systems to increase team effectiveness
- Explore the options to implement the Employee portal that will increase efficiencies of all remote employees

### ***Prolonged Community Resource/Coordination Issues***

The short-term community coordination needs cited in this Assessment are presumed to continue into the long-term. Current conditions may persist for an extended period; recovery efforts will require coordination; ongoing community preparedness to guard against a future outbreak will also require ongoing convening and new community readiness strategies based on what is shown to be effective during the current crisis.

- Public Health will continue to work with general public as a referral system for recruiting volunteers for WCCA operations during COVID-19
- Individuals in the community continue to produce cloth masks for WCCA operational use
- Organizations who have contributed financially to our expansion of freezer space to meet demand on our Food Security operations:
  - Citizens State Bank of Waverly & Montrose, City of Waverly, City of Montrose City of Howard Lake, Howard Lake Lions Club, Maple Lake Lions Club, Montrose Lions Club, Waverly Lions Club, and the Monticello Lions Club.
- Waverly Café will continue to produce frozen meals for our Senior Frozen Meal Program.
- Organizations who have freezer space to meet demand on our Food Security operations:
  - J&B Group, Oriental Express of Buffalo (Buffalo Crossings), WCCA Food Shelf in Waverly, Annandale Food Shelf, Monticello Help Center, Waverly Café, Alleluia Luther Church of St. Michael, St. Mary's Church of Waverly, Waverly Knights of Columbus, Humphrey Elementary of Waverly, Uptown Bar of Waverly, Buffalo Community Center, and Delano Senior Center

## V. Addressing Equity Implications

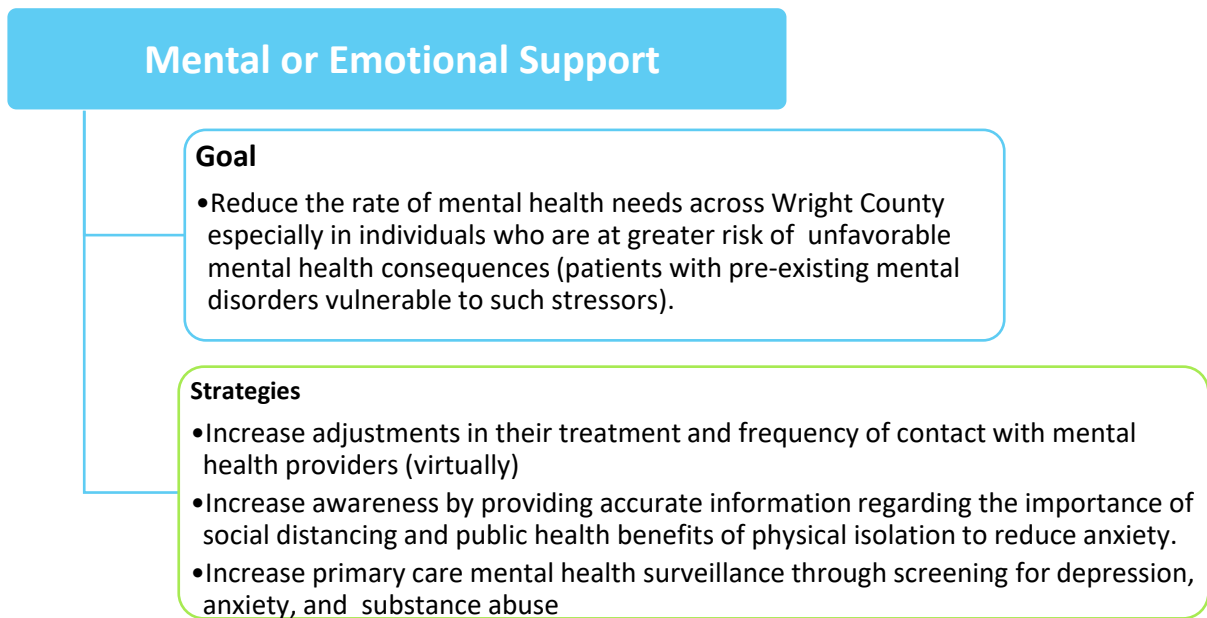
Though immediate data may not yet be easily obtained regarding the demographics of those most impacted by the COVID-19 epidemic, previous Community Assessments, as well as countless government and academic studies have established that structural racism, xenophobia, sexism, stigmatization and othering persist – and are often exacerbated – in times of crisis. Community Action recognizes the obligation to ensure that the barriers of structural race, gender, and other inequities are addressed during this time of crisis and beyond. Therefore, it is with this lens that communities are invited to use the equity lens and the question, “why”, to understand the specific needs of the diverse populations served.

## VI. Conclusion

The following priorities have been identified in Wright County, MN as a result of the current COVID-19 pandemic situation –

### Priority 1: Mental or emotional support

The mental health effects of COVID-19 are equally important to concentrate on as are the physical health effects. Due to the ongoing social distancing measures and the existing closures of many non-essential businesses, schools, prohibition of large gatherings, etc. the mental health needs among the residents of county have seen an upsurge.





## Priority 2: Food and Nutrition

The current pandemic situation has greatly impacted food security for low-income families, especially older adults and children. Additionally, school closures, social distancing and stay-at-home directives have increased the threats of hunger and malnutrition in children and the elderly population.

### Food and Nutrition

#### Goal

- Reduce the rates of food insecurities due to limited access, increasing unemployment and school closures among children and elderly.

#### Strategies

- Increase the number of food pickup stations and food banks which are offering services.
- Increase home-delivery and pre packaged meal services to seniors who are homebound, have disabilities or multiple chronic illnesses.

## Priority 3: Housing: Paying rent/eviction/rental assistance and Homelessness or housing instability

The spread of COVID-19 is totally worrisome for people experiencing severe housing cost burdens, housing instability (struggling to pay rent, moving or expulsion due to unpaid rents) and homelessness who cannot control their environments or isolate themselves as easily as others.

### Housing Instability and Homelessness

#### Goal

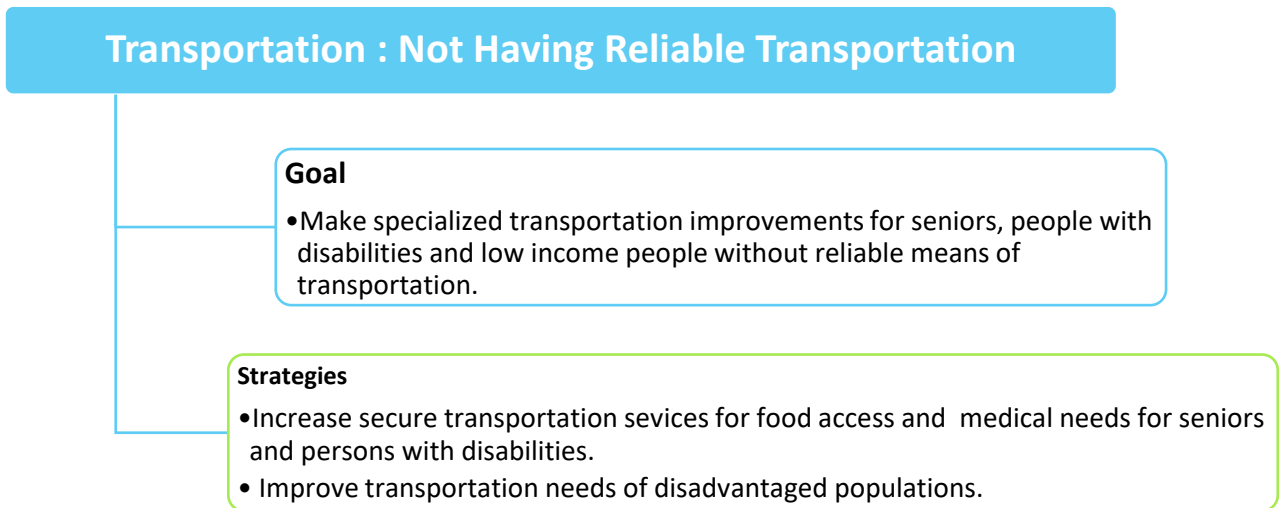
- Reduce the increasing rates of uncertainties arising as a result of housing instability (paying rent, eviction etc.) and homelessness in Wright County

#### Strategies

- Improve assistance and access to information for populations experiencing housing instabilities regarding existing resources related to rental assistance and flexible payment options.
- Provide alternate housing options for people suffering from homelessness.

#### Priority 4: Transportation: Not having reliable transportation

COVID-19 situation has affected the transportation means for elderly, people with disabilities and people belonging to low-income backgrounds. Without reliable transportation, access to food and medical facilities has been impacted. Furthermore, access to employment has become an issue for low-income individuals. Wright County has 3.73% of the households with no motor vehicle access and an estimated 11.7% of population commuting to work for over 60 minutes.



## VII. Resources

**Below are data source options for corresponding sections of the Community Needs Assessment Update Template.** Although there are suggested sources for each section, others may be applicable as well and general resources to also explore are listed below. State and local data sources may also be available on many of these topics. It is best to provide both quantitative (statistics) and qualitative (stories) as the information is available. Including a variety of numbers, graphs, charts, and maps is encouraged to visualize the data, as available. Given the rapid emergence of this crisis, it is also important to cite local news reports, local government activities, and any direct information from customers, staff or other key community stakeholders, since the underlying quantitative data may not yet be available.

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*Note: Real-time data is not available for many of the noted impact areas. However, recent data **can** be used to provide a case for the number of people of a particular demographic or employment group that were affected in a certain way by the COVID-19 Pandemic.*

*For example, related to nutrition impact for children in schools most recent county-level data available is from 2018 and therefore, an agency could say, “Based on the 2017-2018 data from the National Center for Education Statistics through County Health Rankings and Roadmaps, 49% of students in Cole County, Missouri were eligible for free and reduced lunch. Therefore, approximately half of the 10,732 students in Cole County had a direct impact to their nutritional needs by the closure of schools and the lack of availability of free/reduced lunches...”*

#### General Data Resources to Explore:

- CAP Engagement Network\*, Online Community Needs Assessment Tool:

<https://cap.engagementnetwork.org/>

- CARES Engagement Network COVID-19 Tools & Resources:

<https://engagementnetwork.org/covid-19/>

*\*note – the Engagement Network is the platform for the Community Action Online Community Needs Assessment Tool – this was previously known as “Community Commons”. The functionality is the same, with some enhancements. A username and password are required; however, access to this tool is free for the Community Action Network. Email [ckohler@communityactionpartnership.com](mailto:ckohler@communityactionpartnership.com) for troubleshooting.*

- County Health Rankings & Road Maps: <https://www.countyhealthrankings.org/>
- Prosperity Now Scorecard: <https://scorecard.prosperitynow.org/>
- Kids Count Data Center: <https://datacenter.kidscount.org/>
- CDC Cases & Latest Updates: <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/index.html>
- National Equity Atlas: <https://nationalequityatlas.org/indicators/Poverty>

#### Data Resources for Section I, Background:

The following tools can be used to identify how many people in a given area are within **200% of the Federal Poverty Level**:

- **CAP Engagement Network Map Room:** <https://cap.engagementnetwork.org/cap-map-room/> (click +Add Data, search “200% Poverty Level”)
- **CAP Engagement Network, CNA Online Tool Assessment Report:** <https://cap.engagementnetwork.org/assessment-tool/> (select state and county; then select population profile, Poverty Rate 200%)
- **Data Table:** Selected Characteristics of People at Specified Levels of Poverty – 2018 ACS, 5-year estimates: <https://data.census.gov/cedsci/all?q=s1703&hidePreview=false&tid=ACSST1Y2018.S1703> (then filter by the desired geography). This table allows users to access poverty data by level – i.e. 200%, 125%, 100%, <50%, etc.

#### Data Resources for Section II, Local public health response:

- State government health department will generally have this information. State sites can be accessed through the CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>

#### Data Resources for Section III, Immediate impacts on the community:

- Overall Impact (to include after opening paragraph):
  - [COVID-19 Vulnerability Footprint](#)
  - [COVID-19 Starter Map – Demographic Vulnerability](#) (can add or remove data from mapping layers)
- Health Impacts:
  - [Engagement Network COVID-19 Report](#): Vulnerable Population Indicator - Population Age 65+
  - [Engagement Network COVID-19 Report](#): Health System Capacity Indicators – Hospital Beds, Hospitals, Primary Care Providers
  - [Engagement Network COVID-19 Starter Map: Hospitals, Confirmed Cases, and ICU Beds](#)
  - [County Health Rankings & Roadmaps Free & Reduced Lunch Eligibility Data](#)

- Employment Impacts:
  - Utilize local examples for health care workforce challenges
  - Utilize local examples on closures for school employment and childcare challenges
    - School District Data (includes number of teachers, students, demographics): <https://nces.ed.gov/ccd/districtsearch/index.asp>
  - Utilize local examples on shut down of large employers or related employment challenges
    - Local Area Unemployment Statistics: <https://www.bls.gov/lau/>

The remaining impact categories include school closing dates and human service provision or community resource examples specific to the local area. Insert any other local area data as available or applicable.

**Data Resources for Section IV, Anticipated near- and longer-term impacts:**

For the section on *Prolonged community resource/coordination issues*, the following resource may be helpful to strategize and triage which community initiatives, or pieces of initiatives, may need to continue, pause, or end during this time. <https://centerforcommunityinvestment.org/blog/reimagining-strategy-context-covid-19-crisis-triage-tool>

**Data Resources for Section V, Addressing Equity Implications:**

The following links provide resources for understanding and addressing equity implications in response to COVID-19:

- National Collaborative for Health Equity: <https://www.nationalcollaborative.org/covid-19/>
- Ten Equity Implications of the Coronavirus (COVID-19) Outbreak in the United States—NAACP: [https://naacp.org/wp-content/uploads/2020/03/Ten-Equity-Considerations-of-the-Coronavirus-COVID-19-Outbreak-in-the-United-States\\_Version-2.pdf](https://naacp.org/wp-content/uploads/2020/03/Ten-Equity-Considerations-of-the-Coronavirus-COVID-19-Outbreak-in-the-United-States_Version-2.pdf)
- COVID-19 Guidance for Higher Risk Populations—American Public Health Association: <https://www.apha.org/topics-and-issues/communicable-disease/coronavirus/higher-risk-populations>
- National Equity Atlas: <https://nationalequityatlas.org/indicators/Poverty>
- COVID-19: Mapping Vulnerable Populations in California—Othering & Belonging Institute: <https://belonging.berkeley.edu/covid-19-mapping-vulnerable-populations-california>
- The Unequal Impact of the COVID-19 Crisis on Households’ Financial Stability: Who is Likely To Be Immediately Hurt and Why—Prosperity Now: [https://www.prosperitynow.org/sites/default/files/PDFs/Scorecard%202020/Unequal\\_Impact\\_of\\_COVID-19.pdf](https://www.prosperitynow.org/sites/default/files/PDFs/Scorecard%202020/Unequal_Impact_of_COVID-19.pdf)
- Coronavirus-19 Resources—Unidos US: [https://www.unidosus.org/campaigns/coronavirus-covid-19/policy-priorities?utm\\_source=main&utm\\_medium=450&utm\\_campaign=covid](https://www.unidosus.org/campaigns/coronavirus-covid-19/policy-priorities?utm_source=main&utm_medium=450&utm_campaign=covid)
- The coronavirus is infecting and killing black Americans at an alarmingly high rate—Washington Post: <https://www.washingtonpost.com/nation/2020/04/07/coronavirus-is-infecting-killing-black-americans-an-alarmingly-high-rate-post-analysis-shows/?arc404=true>
- Indian Country, where residents suffer disproportionately from disease, is bracing for coronavirus—Washington Post: <https://www.washingtonpost.com/climate-environment/2020/04/04/native-american-coronavirus/>
- COVID-19 - Racial Equity & Social Justice Resources—Racial Equity Tools: <https://www.racialequitytools.org/fundamentals/resource-lists/resources-addressing-covid-19-with-racial-equity-lens>

- COVID-19: Investing in black lives and livelihoods – McKinsey & Company:  
<https://www.mckinsey.com/industries/public-sector/our-insights/covid-19-investing-in-black-lives-and-livelihoods>

## VIII. Acknowledgments

This assessment was produced by a volunteer, Alekha Sai Challa, through the professional services website Catchafire.org. Catchafire matches skilled professional volunteers with nonprofits to help them increase their capacity and achieve their missions. She worked in partnership with WCCA's Planning & Advancement Manager, Amy Kortisses as well as partners throughout Wright County. These include the local Public Health Departments, CentraCare Hospital – Monticello, Allina Health – Buffalo Hospital and others.