



COVID-19 After Action Review Task Force Meeting Summary

August 25, 2022 | 9:00 AM - 12:00 PM | Virtual

Attendees are included in Attachment A.

Opening Remarks & Review of Agenda:

Phyllis Shulman welcomed the Task Force to the meeting. She reviewed the agenda and reminded the Task Force of the Equity Meeting on August 29, 2022.

Kevin Harris provided the following prompts for the meeting's presenters:

- How were your organizations and communities able to respond throughout the pandemic? What key lessons were learned? What partnerships were formed?
- What key recommendations do you have for the state?

COVID Impacts on Food Security:

Carmen Mendez & Christina Wong, Northwest Harvest:

- Northwest Harvest is an independent, statewide food distributor. Northwest Harvest is
 focusing on equitable food access, which involves centering BIPOC experiences.
 Northwest Harvest is working towards the "right to food" in Washington. This right
 would ensure that food is accessible, adequate, appropriate, and available.
- March 2020 April 2020: Northwest Harvest shifted resources to support community access points. Northwest Harvest also advocated to direct state appropriations towards the emergency food system. Northwest Harvest is part of the state's Food Security Coordination Team, which arranges public and private food resources.
- May 2020 December 2020: Northwest Harvest partnered with Second Harvest, Food Lifeline, and the Washington State Department of Agriculture to distribute emergency food boxes throughout the state. Additionally, Northwest Harvest partnered with Indaba Family Farms to distribute produce boxes and with Safeway to provide gift cards. Finally, Northwest Harvest coordinated with nontraditional food banks and BIPOCowned businesses to infuse funding into the market.
- Northwest Harvest has been advocating to provide more opportunities for BIPOCowned organizations. To support these organizations, significant investment and infrastructure overhaul are needed. Resource allocation should incentivize increased





food access. Grants should be distributed upfront. Reimbursement-style grants pose challenges because some organizations cannot afford them.

- Data surrounding food assistance should be regularly coordinated and assessed. Northwest Harvest could use this data to improve enrollment in food assistance programs. A single distribution model is needed to expedite state resources.
- Local food helps avoid national supply chain issues. People experiencing hunger need flexibility, which involves local access points. Human-centered design processes can help facilitate access. Food insecurity will persist, regardless of any economic recovery. This provides an opportunity for innovation.

Katie Rains, Washington State Department of Agriculture:

- Food assistance programs can provide funding for nonprofits. During the pandemic, WSDA was contacted by many nonprofits because the demand for food increased.
- In 2019, one in six Washingtonians utilized a food bank that received assistance from WSDA. One in three Washingtonians was at risk of hunger. Data collection needs to increase. Some things are not reflected in the data.
- WSDA led the state's Food Security Coordination Team. The purpose of the Team was to coordinate resources and monitor community-level activities. The Team observed many gaps in resources.
- \$40 million was diverted towards existing food assistance programs, while \$100 million was diverted towards nonprofits. WSDA partnered with nonprofits to provide food boxes. WSDA also assisted with PPE purchasing to keep people safe.
- WSDA worked with the counties to coordinate National Guard deployments in volunteer-led communities. The existing relationships with the hunger relief sector were valuable. These relationships should be sustained.
- It was impossible to assess the gap between the demand for services and the supply of services. There are barriers that prevent people from receiving services.
- Many food distributors are led by people of color. Reduced administrative barriers helped food distributors assist people. Example: No documentation was required when people were receiving food.
- The pandemic revealed existing inequities. One in three tribal members experienced food insecurity during the pandemic. Food insecurity increased.





• Formal partnerships with local emergency management centers should be created. A strategy should be developed for state investments and services. A coordinated hunger response system would help WSDA allocate resources. WSDA will recommend policies that promote equity in food assistance programs.

Leanne Eko, OSPI Child Nutrition Services:

- OSPI administers child nutrition programs. These programs include the National School Lunch Program, the School Breakfast Program, and the Afterschool Snack Program. OSPI also administers community nutrition programs. These programs help fight hunger.
- March 2020 August 2020: After schools closed, many schools offered alternative meals. Some schools offered grab-and-go meals. USDA waivers provided flexibility by allowing OSPI to provide free, non-congregate meals. OSPI focused on students' nutritional support.
- School Year 2020 2021: Schools offered remote learning. Schools could prepare and provide many meals at one time. To combat supply chain issues, OSPI worked closely with distributors and purchased individual serving sizes.
- School Year 2021 2022: Most schools offered onsite education. There were many COVID cases in schools, especially after breaks. OSPI tried to keep children safe by changing school environments.
- During the pandemic, school nutrition became expensive. USDA supported operators with additional funding. USDA also authorized the pandemic EBT program. The program provided meals that children would have otherwise received in school.
- Families rely on school meals. We often forget that school meals are important. Frequent and clear communications are needed. OSPI hosted weekly webinars to help schools navigate the pandemic. When it comes to food, swift action is needed. Government processes need to happen quicker.
- School Year 2022 2023: Schools are returning to normal operations. USDA is assisting with ongoing supply chain issues. OSPI has legislative support to eliminate co-pays and fund the Community Eligibility Provision.

Marlando & Stephanie Sparks, Restoration Community Impact:

• Restoration Community Impact spreads hope and compassion through food security, job readiness, societal reentry, community events, and mental health assistance.





- During the pandemic, Restoration Community Impact partnered with formerly incarcerated individuals to provide food. These individuals were able to serve their communities through food assistance. Restoration Community Impact also partnered with local churches and community organizations.
- October 2020 June 2021: About 33,000 food boxes were distributed in Southeastern Washington. About 132,000 individuals, including 88,000 children, were served. Restoration Community Impact worked in Benton, Yakima, Walla Walla, Adams, Okanagan, and Grant counties.
- Restoration Community Impact served people who had been overlooked. These people included migrant workers in the Mattawa School District. Restoration Community Impact provided the School District with 500 600 food boxes.
- Politics are involved with food security. To reach people in need, Restoration Community Impact had to push through politics. There were few financial resources for grassroots organizations. WSDA provided resources to Restoration Community Impact, but others were not provided with these resources.
- Partnerships should be expanded. Partnerships are important. Example: Restoration Community Impact worked with Northwest Harvest.

COVID Impacts on Tribal Experiences:

- The American Indian Health Commission (AICH) was formed by tribal nations to resolve local and state issues. Tribal nations have inherent power.
- Tribal sovereignty allows each tribal nation to manage its affairs, protect its citizens, govern its people, and enforce its laws. Tribal sovereignty existed before the US government. Tribal citizens have a unique legal and political status.
- Tribal nations have expertise around government functions, including economic development, natural resources, social services, and health services. Tribal nations deliver health services, determine public health strategies, and coordinate with other governments. This is the most correct and effective way of doing things.
- Tribal nations administer vaccines, conduct tests, and determine isolation and quarantine protocols. Temporary housing services are available to people who need support during isolation and quarantine.





- Tribal nations work across jurisdictions. Relationships take time. AICH has built relationships with tribal nations and the state. During the H1N1 outbreak, tribal nations didn't receive vaccines. Tribal leaders vowed that another disaster would not occur.
- Tribal nations discussed mutual aid agreements and provided trainings for local health jurisdictions. Additionally, tribal nations created a medical countermeasure distribution plan to administer vaccines in an equitable manner. Language from the plan was included in the CDC's playbook.
- During the pandemic, American Indians experienced significant disparities. The hospitalization and death rates were higher for American Indians than for other groups. Tribal nations have demonstrated excellence in providing vaccines and services.
- Tribal nations approached the pandemic with a sense of shared responsibility. Example: The Native Project vaccinated over 4,000 BIPOC individuals by partnering with Latinos en Spokane, the Spokane NAACP, and the Asian Pacific Islander Coalition. Example: The Seattle Indian Health Board vaccinated over 7,300 individuals, regardless of race.
- Some tribal nations collaborated with local health jurisdictions. Tribal nations helped vaccinate non-native school district staff and home health professionals. Local health jurisdictions helped store vaccines and conduct tests.
- AICH will be completing its own AAR. It has been requested that AICH's AAR is attached to the Task Force's AAR.
- After the Nisqually Tribe didn't receive H1N1 vaccines, tribal members participated in the medical countermeasure exercise. When the pandemic began, the Nisqually Tribe instantly took action. The Nisqually Tribe's reservation was locked down.
- Some tribal nations have streamlined access to vaccines and tests. After at-home tests became available, no hospitalizations or deaths occurred in the Nisqually Tribe. Equity improved. These successes feel sustainable.
- Protocols allowed for funerals, ceremonies, and other traditional gatherings to occur. Some gatherings took place outside. Many American Indians live with family members from multiple generations. Contact tracing, isolation, and quarantine were difficult.
- Some people considered a specific quarantine site to be a "concentration camp." A man called for his armed friends to take over the site. Everyone had to be evacuated from the site. This was an intense, traumatic situation.





• The Muckleshoot Tribe worked with AICH and King County Public Health to secure vaccines. Additionally, the Muckleshoot Tribe worked with the Department of Corrections to share vaccines with incarcerated community members.

Notes from the Q & A surrounding tribal experiences can be viewed on Slides 8 & 9. AICH requests that the AICH Comprehensive Report be attached to the State AAR.

Closing Remarks:

Kevin Baker informed the Task Force of the READEI-B Foundational Principles document. He encouraged the Task Force to review the document and utilize the question toolkit during upcoming discussions.

Kevin Harris thanked the Task Force for its participation. He reminded the Task Force of the next meeting on September 22, 2022.





Attachment A: Attendees

Last Name	First Name	Organization
Adkinson	Theresa	Grant County Health District
Arndt	Amber	Nisqually Indian Tribe
Allen	Tristan	Washington State Department of Commerce
Balletto	Ashley	Seattle Indian Health Board
Bacon	Melanie	Island County
Bouton	Drew	Washington State Department of Financial Institutions
Delaney	Ashlee	Washington State Employment Security Department
Dolack	Kerstyn	Washington Military Department
Dym	Stacy	The Arc of Washington State
Eko	Leanne	OSPI Child Nutrition Services
Elsenboss	Carina	King County Public Health
Erb	Heather	American Indian Health Commission
Ezelle	Robert	Washington State Emergency Management Division
Fox	Chandra	Spokane County Department of Emergency Management
Heshmati	Nari	Everett Clinic
Hinojos	Angie	Centro Cultural Mexicano
Jaffe	Darcy	Washington State Hospital Association
Lawrence	Faatima	Catholic Community Services of Western Washington
Lowe	Vicki	American Indian Health Commission
May	Cherrie	Suquamish Tribe
McCluskey	Brendan	Washington State Emergency Management Department
Mendez	Carmen	Northwest Harvest
Moore	Ryan	Washington State Legislature
Nichols	Travis	Washington State Department of Health
Oberoi	Sudhir	Washington State Department of Labor and Industries
Pangelinan	Jeremy	Muckleshoot Tribe Health and Wellness Center
Peaks	Nomi	Washington State Department of Health
Probasco	Brianne	Washington Association for Community Health
Rains	Katie	Washington State Department of Agriculture
Riske	Erik	Washington Military Department
Scarton	Amy	Washington State Department of Transportation
Schmitz	Lou	American Indian Health Commission
Shannon	David	Washington State Department of Social and Health Services
Sparks	Marlando	Restoration Community Impact
Sparks	Stephanie	Restoration Community Impact
Stoutenburg	Matt	Washington State Office of the Insurance Commissioner
Szafranski	Mary	Nisqually Indian Tribe
Weaver	Ron	Washington State Department of Health
Weed	Nate	Washington State Department of Health
Wong	Christina	Northwest Harvest

Facilitators:

Kevin Baker, Kevin Baker Consulting Kevin Harris, The William D. Ruckelshaus Center Phyllis Shulman, The William D. Ruckelshaus Center Christina Sanders, WSU Division of Governmental Studies and Services