

AMERICAN SAMOA



COVID-19 BE SAFE INITIATIVE



OVERVIEW

The recent surge in the number of cases in the United States due to Delta and Omicron variants places a high priority for American Samoa to prepare and make necessary improvements and changes in response to COVID-19. One of those major improvements is repairs, renovations, and improvements to government public offices and facilities. Many were built more than 30 years ago with some over 50 years old having been built during the Navy Administration. Factors which include poor maintenance, weather conditions, and the environment speed up the deterioration of these public buildings. The U.S. Center for Disease Control and Protection (CDC) has issued requirements and guidelines for safe workplaces and public buildings which the territory currently is not able to meet and comply with. The American Samoa Government (ASG) plays a major role in ensuring the protection and safeguard of the health and lives of its people. ASG workers are exposed to health hazards and poor conditions of these public facilities on a regular basis. They spend an extended period of time each workday in an unsafe environment and limited workspace areas with poor air quality. The general public is also an impacted part of the population exposed to these health hazards. American Samoa is presently non-compliant with CDC standards and guidelines for public facilities. The COVID-19 public health emergency has alerted American Samoa to the urgency of addressing these issues to prevent the further spread of the pandemic.

PROJECT DESCRIPTION

COVID-19 and the public health declaration has highlighted the importance of addressing critical needs in the territory. One of those urgent needs is improving and upgrading public offices and buildings to be in compliant with CDC requirements and support measures to mitigate the spread of COVID-19. ASG is the major employer, aside from Starkist cannery, employing more than 5,000 people. ASG is composed of three separate branches including the executive, legislature, and judiciary. The executive branch is under the leadership of the elected Governor and oversees close to 57 departments, agencies, and authorities. The Fono is the legislature and consists of two houses, the Senate and the House of Representatives. The last branch is the judiciary, which consists of courthouses and is under leadership of the Chief Justice. All are considered part of ASG government with separate responsibilities and duties.

This investment is critical as the majority of American Samoa's workforce is employed by the ASG. The health and lives of the workers and the general public are put at risk in the hazardous environments and bad conditions in public workplaces and public facilities. This is due to a variety of reasons including poor ventilation systems, poor indoor air quality, water leakage issues, mold growth, and rodent infestation. CDC has scientific evidence which shows a list of illnesses and diseases for high-risk population exposed to poor ventilation system. This high-risk group is mainly the older adults, people with disabilities, and those with prior medical conditions. Corrective actions are needed immediately to address these ongoing problems in public offices and facilities particularly since these conditions are ripe for spreading COVID-19.

CDC recommends vaccination, social distancing, improved ventilation systems, barriers and partitions for a healthy and safe environment in public offices and buildings. These

recommendations support efforts and objectives to respond to COVID-19 and help American Samoa in mitigating and preventing the spread of the pandemic. CDC also recommends employers to initiate and have in place an emergency or response action plan to COVID-19. ASG is not fully in compliance with CDC requirements and guidelines at this time. Many public facilities lack a good ventilation system and are in deteriorating condition requiring repairs and improvements.

The A.P. Lutali Executive Office Building (EOB) in Utulei is a good example of a public building that needs major renovations and improvements. The EOB was constructed in 1991 and houses most of the American Samoa executive departments and offices. The structure has long standing issues due to poor maintenance and environmental factors. These issues are considered health hazards that poses high risk to ASG workers and the general public. They include on-going problems with rodent infestation, poor ventilation systems, water leakage, mold growth, poor indoor air quality, among others. There is high density in office spaces due to limited available room space for expansion, which create challenges to meet CDC standards and recommendations. The restroom facilities lack proper ventilation with either no windows or fans. There are no rooms or areas to accommodate for isolating an ASG worker or customer who may be suspected or may have contracted COVID-19. The EOB building does not have a kitchen, break room or adequate washing facilities. The structure is CDC non-compliant and needs immediate improvements and renovations to meet federal standards.



The ARPA funds allocated for this project will help address these on-going problems at EOB and at many public buildings and facilities. This will ensure a safe and healthy environment for ASG workers and the general public. This project is a necessary investment to comply with CDC safety and health requirements and support efforts to minimize the exposure and spread of COVID-19. It is important for the territory to be in compliance with all CDC guidelines and recommendations for public buildings to protect and safeguard the lives of the people of American Samoa.

The following is CDC guidance and recommendations for employers and workers in response to the pandemic which should be considered by prospective applicants:

- Facilitate employees getting vaccinated. Employers should grant paid time off for employees to get vaccinated and recover from any side effects. Employers should also consider working with local public health authorities to provide vaccinations in the workplace for unvaccinated workers. Finally, employers should consider adopting policies that require workers to get vaccinated or to undergo regular COVID-19 testing – in addition to mask wearing and physical distancing – if they remain unvaccinated. Instruct any workers who are infected, unvaccinated workers who have had close contact with someone who tested positive for SARS-CoV-2, and all workers with COVID-19 symptoms to stay home from work to prevent or reduce the risk of transmission of the virus that causes COVID-19.
- Implement physical or social distancing in all communal work areas for unvaccinated and otherwise at-risk workers. A keyway to protect such workers is to physically distance them from other such people (workers or customers) – generally at least 6 feet of distance is recommended, although this is not a guarantee of safety, especially in enclosed or poorly ventilated spaces. In a workplace, workers often are required to work in close proximity to each other and/or customers or clients for extended periods of time. Maintaining physical distancing at the workplace for such workers is an important control to limit the spread of COVID-19.
- Employers could also limit the number of unvaccinated or otherwise at-risk workers in one place at any given time, for example by implementing flexible worksites (e.g., telework); implementing flexible work hours (e.g., rotate or stagger shifts to limit the number of such workers in the workplace at the same time); delivering services remotely (e.g., phone, video, or web); or implementing flexible meeting and travel options, for such workers.
- Transparent shields or other solid barriers can separate these workers from other people. Barriers should block face-to-face pathways between individuals to prevent direct transmission of respiratory droplets, and any openings should be placed at the bottom and made as small as possible. The height and posture (sitting or standing) of affected workers, directional airflow, and fire safety should be considered when designing and installing barriers, as should the need for enhanced ventilation.
- Workers should wear a face covering that covers the nose and mouth to contain the wearer's respiratory droplets and to help protect others and potentially themselves. Face coverings should be made of at least two layers of a tightly woven breathable fabric, such as cotton, and should not have exhalation valves or vents. They should fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face.
- Workplace policies and procedures implemented to protect workers from COVID-19 hazards.
- Maintain Ventilation Systems. The virus that causes COVID-19 spreads between people more readily indoors than outdoors. Improving ventilation is a key engineering control that can be used as part of a layered strategy to reduce the concentration of viral particles in indoor air and the risk of virus transmission to unvaccinated and otherwise at-risk workers in particular. A well-maintained ventilation system is particularly important in any indoor workplace setting and when working properly, ventilation is an important control measure to limit the spread of COVID-19. Some measures to improve ventilation are discussed in CDC's Ventilation in Buildings and in the OSHA Alert: COVID-19 Guidance on Ventilation in the Workplace. These

recommendations are based on American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) Guidance for Building Operations and Industrial Settings during the COVID-19 Pandemic. Adequate ventilation will protect all people in a closed space. Key measures include ensuring heating, ventilation, and air conditioning (HVAC) systems are operating in accordance with the manufacturer's instructions and design specifications, conducting all regularly scheduled inspections and maintenance procedures, maximizing the amount of outside air supplied, installing air filters with a Minimum Efficiency Reporting Value (MERV) 13 or higher where feasible, maximizing natural ventilation in buildings without HVAC systems by opening windows or doors, when conditions allow (if that does not pose a safety risk), and considering the use of portable air cleaners with High Efficiency Particulate Air (HEPA) filters in spaces with high occupancy or limited ventilation.

- Perform routine cleaning and disinfection. If someone who has been in the facility within 24 hours is suspected of having or confirmed to have COVID-19, follow the CDC cleaning and disinfection recommendations. Follow requirements in mandatory OSHA standards 29 CFR 1910.1200 and 1910.132, 133, and 138 for hazard communication and PPE appropriate for exposure to cleaning chemicals.
- Ensure adequate ventilation in the facility, or if feasible, move work outdoors.
- Space such workers out, ideally at least 6 feet apart, and ensure that such workers are not working directly across from one another. Barriers are not a replacement for worker use of face coverings and physical distancing.
- If barriers are used where physical distancing cannot be maintained, they should be made of a solid, impermeable material, like plastic or acrylic, that can be easily cleaned or replaced. Barriers should block face-to-face pathways and should not flap or otherwise move out of position when they are being used.
- Barriers do not replace the need for physical distancing – at least six feet of separation should be maintained between unvaccinated and otherwise at-risk individuals whenever possible.

ELIGIBILITY ANALYSIS

INTRODUCTION

This memo analyzes whether the American Rescue Plan Act ("ARPA") funds received from the Federal Government can be used to make improvements to or construct new public buildings. The analysis below shows that this project likely qualifies as an eligible use under ARPA.

ELIGIBILITY ANALYSIS

The US Department of Treasury has released guidance on eligible uses of funds in their Interim Final Rule ("IFR"). The IFR includes not only a non-exhaustive list of eligible uses, but also an analytical framework for projects and expenditures that are not specifically mentioned. The IFR does specifically allow for "capital investments in public facilities to meet pandemic operational

needs, such as physical plant improvements to public hospitals and health clinics or adaptations to public buildings to implement COVID-19 mitigation tactics.” 31 CFR 35 (P. 18-19 accessed via PDF).

As identified above, the non-exhaustive list contemplates improvements to public buildings for public health purposes. Construction of new buildings or facilities to meet pandemic operational needs are not explicitly included in the IFR. To the extent that new construction is part of the proposed project, the analytical framework will need to be used to determine eligibility.

There are two separate frameworks for eligibility analyses: public health and negative economic impacts. Accordingly, this memorandum will focus on the relevant public health analysis.

PUBLIC HEALTH ANALYSIS

The IFR states the public health use framework for determinations as follows:

“Accordingly, to assess whether a program or service is included in this category of eligible uses, a recipient should consider whether and how the use would respond to the COVID-19 public health emergency. Assessing whether a program or service “responds to” the COVID-19 public health emergency requires the recipient to, first, identify a need or negative impact of the COVID-19 public health emergency and, second, identify how the program, service, or other intervention addresses the identified need or impact. While the COVID-19 public health emergency affected many aspects of American life, eligible uses under this category must be in response to the disease itself or the harmful consequences of the economic disruptions resulting from or exacerbated by the COVID-19 public health emergency.” 31 CFR 35 (accessed via PDF, Page 10).

In order to determine whether a program “responds to” the COVID-19 public health emergency, a need or negative impact must be identified and how the program addresses that need must be identified. Both parts are necessary and will be analyzed below.

(1) IDENTIFIED NEED

The COVID-19 pandemic highlighted the importance of social distancing measures as well as ensuring public spaces are well-ventilated and maintained. American Samoa, like many other jurisdictions, implemented many different policies to ensure that social distancing is effectively practiced.

In practice, however, it has become clear that many of ASG’s buildings need improvements or new facilities to meet pandemic operational needs. Improvements to the buildings or new construction to replace facilities that are incapable of meeting these needs are necessary for public health and safety. This is particularly true with the updated guidance from the CDC.

(2) IDENTIFY HOW PROGRAM ADDRESSES THE NEED

The proposed project will seek to implement the CDC's recommendations to meet the pandemic operational needs. This will be vital to protecting the health of the government employees and the public, who must frequently make use of facilities.

The aging infrastructure of ASG buildings are largely non-compliant with measures that would mitigate/prevent the spread of COVID-19. This project will directly address these issues and protect public health. As previously stated, improvements to existing buildings for ventilation and to accommodate social distancing among other public health measures. Any new construction for facilities would likewise address the need by providing safe public spaces that are not possible in existing structures.

Other jurisdictions have made similar investments in improvements to public buildings, in line with the non-exhaustive list in the IFR. However, Virginia has allocated funds to target upgrades to public health facilities that will allow increased ability to serve the public. This is in the same vein as the expansive approach taken in this project. While the expenditures of other jurisdictions are not determinative on eligibility, they are instructive.

CONCLUSION

Based on the guidance under the Interim Final Rule and the analysis for eligible uses, the Public Buildings Project appears to be an eligible use of funds.

SCOPE OF WORK

Projects approved for this ARPA award should meet statutory requirements and eligibility. The goal and objective of this project is making necessary improvements, changes, and configurations to public offices and public facilities to meet CDC federal requirements. These improvements will help address any or potential health hazards to government workers, building occupants and the general public. This project will help support efforts and measures to prepare and help American Samoa respond to COVID-19.

1. Application or Proposal Guidelines:

The application or proposal should include the following components:

- a. Cover Letter addressed to Executive Director of ARPA Oversight Office. Please include the following:
 - i. The designated project lead person
 - ii. DUNS# and current information on active Sam registration (www.sam.gov)
- b. Organizational Profile
- c. Proposal Narrative to include project background and description:
 - i. Describe your organization, primary duties, total number of employees, average population served, and any accomplishments
 - ii. Describe the purpose of the project and identify the need or negative impact of COVID-19 public health emergency. This is a critical part of the application process to please elaborate and provide details on any serious or potential health hazards or bad conditions in the office or building that are

non-compliant with requirements recommended by CDC for a healthy and safe workplace in public facilities. Please also elaborate on any necessary maintenance repairs or work needed for the building structure.

- iii. Describe how this proposed project will help address the need and meet CDC requirements and support measures for minimizing exposure and spread of COVID-19. Please provide details on any benefits and advantages that will be provided by this proposed project.
 - iv. If possible, a health hazard assessment will be helpful in determining the level of risk.
- d. Scope of Work
 - e. Implementation Plan and Timeline
 - f. Proposed Itemized Budget

2. Application or Proposal Evaluation Criteria:

All applications or proposals will be evaluated based on the following criteria:

- a. Proposal that supports compliance with CDC requirements and guidelines for a healthy and safe workplace and environment in public facilities
- b. Proposal supporting efforts and measures to respond to negative impacts of COVID-19 public health emergency
- c. Proposal that improves ventilation systems in public offices and buildings
- d. Proposal that support, promote and encourage social distance and setting up of barriers or partitions in public offices/facilities
- e. Proposal should meet pandemic operational needs to implement pandemic mitigation tactics
- f. Project should support isolation and quarantine efforts
- g. Proposal should implement and promote COVID-19 safety and prevention measures in public offices and facilities

Proposals will be prioritized based on their inclusion/non-inclusion of the following:

- 1. Proposal with the highest risk to health hazards and conditions to occupants and the public health
- 2. Proposal with no direct funding resource to address urgent needs for improvements, changes, and configurations to meet CDC requirements related to COVID-19 public health emergency
- 3. Proposal with high density workplace setting
- 4. Proposal with customer facing offices and departments
- 5. Proposal with a clear response and emergency plan of action to COVID-19 public health emergency
- 6. Proposal with poor ventilation system

3. Panel Review Process:

Applications and proposals meeting eligibility and criteria will go through a panel for further review and screening.

- a. A panel of four (4) members will be selected from those with experience in building code requirements and related areas
- b. Panelists will be designated and approved by the Executive Director of ARPA Office
- c. Panelists will use the following as guidance to assist them during review and selection process:
 - i. CDC Guidance on COVID-19 Employer Information on Office Buildings
 - ii. CDC guidelines and strategies for how to prevent and reduce transmission of COVID-19 in workplace
 - iii. ARPA Category Requirements for this project
 - iv. ARPA requirements, guidelines, goals and objectives
 - v. Evaluation Criteria as noted above in #2
- d. Panelists will assess each application and make determination whether it poses high risk, medium risk, or low risk to public building occupants and the general public
- e. Panelists will be reminded of adherence to transparency and accountability during the selection process

4. Compliance:

Selected applicants or proposals will be required to comply with the following ARPA federal requirements and guidelines:

- a. Proposal should comply with ARPA reporting requirements
- b. Proposal should comply with equipment purchasing requirement
- c. Proposal should comply with conflict-of-interest disclosure and ethics rule requirements
- d. Proposal should comply with ASG procurement process and requirements
- e. Proposal should comply with local certification, licensing, and permitting laws
- f. Proposal should comply with CDC requirements, guidelines and practices for a healthy and safe environment in workplaces and in public facilities.
- g. Proposal should comply with strong labor standards and practices

COMMUNITY ENGAGEMENT

This is an important process which will include inputs from stakeholders. Please refer to the attached Appendix A for community engagement plan.

IMPLEMENTATION PLAN AND TIMELINE

Project Plan Description	Start Date	End Date
Initiate Program	January 18, 2022	December 31, 2026
Public Engagement Comment Period	March 17, 2022	April 1, 2022
Public Workshops – Please refer to press release for public buildings CDC compliant program	January 21, 2022	February 11, 2022
Deadline for Submission of ASG Proposals	April 19, 2022	
Review Applications and Proposals	April 20, 2022	
Panelists Review of Proposals	April 22, 2022	
Award of Grant	April 29, 2022	
Monitoring of Program	April 29, 2022	December 31, 2026

ARPA funds are required by federal statute to be encumbered by December 31, 2024 and spent by December 31, 2026. 31 CFR 35.5. This mandate makes the need for a definite timeline for completion of projects of critical importance.

ITEMIZED BUDGET

Total of 12 million from ARPA funds will be allocated for this project. Proposed budget should be itemized or broken down outlining all costs related to the project. These costs must be allowable, necessary, and eligible under ARPA in support of its goals, outcomes and objectives.

Category for Public Buildings/CDC Program	Cost
Contractual (any eligible and approved ARPA project includes improvements to public facilities in response to Covid-19 and in support of CDC requirements and standards)	8 million
Equipment (any eligible and approved ARPA project in response to the pandemic and in support of CDC recommendations and guidelines)	4 million
TOTAL	12 million

APPENDIX A: COMMUNITY ENGAGEMENT PLAN

Community engagement is an essential aspect of ARPA funded projects. The intent of the US Treasury in fostering public participation is to maintain transparency and provide opportunities for feedback to ensure that funds are used in the most beneficial manner.

In keeping with the intent of the US Treasury and the American Samoa ARPA Oversight Office, the ARPA Office has adopted the following notice and comment timeline for proposed projects:

- o A Notice of the ARPA Proposed Projects will be published online, in local newspapers, and via television or radio broadcasts.
- o The Notice will specify that there will be fifteen (15) days for the public to provide comment either in writing or by attendance at scheduled public hearings.
- o Concurrent to the publication of the Notice, a draft proposal and scope of work will be published on the ARPA website for the public to review.
- o General meetings with the public will be scheduled and publicized within the fifteen (15) day Notice period. Email comments will be accepted.
- o Presentations to the Legislature will be conducted during the Notice period, as needed.
- o At the close of the public comment period, the agency will have 20 days to revise the project as appropriate and submit the Final Draft to the ARPA Oversight Office.
- o The Final Draft of the Project will be posted for public review once completed and certified by the ARPA Oversight Office.

It is the responsibility of the ARPA Office to publicize notices and adhere to the stated timelines. Upon the final approval of the ARPA Oversight Office, ASPA will initiate a general public engagement schedule to inform the community of the final program guidelines.

Engagement Schedule:

1. March 17, 2022 - Initiated Community Engagement Plan
 - a. Notice has been published online, in local newspaper, TV & Radio
 - b. Application requirements and other program details have been published
2. January 21, 2022 - Initiated first workshop for interested departments/agencies
3. April 1, 2022 - Public Comment period closed
4. April 4, 2022 - Revisions to the proposal will be made as appropriate and necessary by the ARPA Office.

