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Youth Service Provider Feedback for Regulatory Agencies in Light of COVID-19

TNOYS is working in collaboration with its partner organization [National Network for Youth](#) to share information with regulatory agencies and policymakers regarding the impact of COVID-19 on youth-service providers, the new challenges they are facing, and the resources and support they need in order to ensure the health and safety of their clients, staff, and communities.

Anticipated Impact of COVID-19 Pandemic on Youth-Service Providers:

- Increased Need for Services for non-systems involved youth: Providers serving non-systems involved youth are anticipating or already seeing increased demand for services. For example, providers anticipate that more young people experiencing homelessness will seek services as they can no longer secure meals at school due to school closures, they can no longer access free WIFI in public spaces, and congregating with other groups of homeless persons may be dangerous and increase community spread of Covid-19.
- Reduced Residential Capacity: Open residential operations in other parts of the country are seeing an increase in placements as other placement options diminish due to families or residential operations closing their doors to new placements in order to reduce risk of exposure. These unanticipated placements are straining resources and threatening staffing ratios. Similar placement capacity shortages are anticipated in Texas.
- Increased Need for Family Support Services, but Reduced Connection to Those Services: With many families in crisis mode with kids out of school and parents needing to work from home or losing their paycheck due businesses closing, there is an increased need for counseling and support services to help youth and families cope and get through this difficult time. However, providers of the state's only Prevention and Early Intervention program available in all of the states 254 counties - Services to At Risk Youth (soon to be known as Family and Youth Success Program) - are anticipating that referrals to their services will be reduced substantially as most referrals have traditionally been made by schools.
- Increased Workforce Costs: Providers across the board (i.e., serving both systems-involved and non-systems involved youth) are experiencing or are concerned about increased personnel costs, due to use of PTO, overtime pay and hazard pay. Providers will need to pay some staff to work overtime to account for those who are out due to sickness of themselves or a loved one, or because they choose to or need to isolate rather than go to work. Other providers are needing to pay hazard pay due to the risks of spread and to encourage employees to come in work jobs that cannot be worked from home. At some organizations, staff are needing to cover duties previously covered by volunteers. At the same time, with school closures, many providers need to increase their staffing during school hours.

- Staffing Ratios: Residential providers across the board are concerned about their ability to meet staffing ratios in their programs due to staff calling out due to illness, isolation and lack of childcare at home as well as ratios if children or youth in their care need to be isolated. Providers in other states are reporting not being able to meet staffing ratios; some of them have received waivers.
- Health and Safety Concerns from Staff: Frontline staff in residential operations and community-based services want to ensure the health and safety of the youth in their care as well as the health and safety of the families they go home to each day and have concerns that not enough protections in place to fully limit their exposure to Covid-19. With expectations of continued in person case management, family visits, PAL classes, etc, there is a high risk that staff will either become infected or begin calling out sick in order to protect their own families leaving further staff shortages.
- Increased Supply Expenses and Shortage of Supplies: Due to increased demand for services and a need to have extra supplies on hand, providers are experiencing increased costs associated with purchasing of additional food, toiletries, medical supplies, cleaning supplies, etc. Also, with youth out of school, many providers must purchase additional food for meals usually provided at school. At the same time, like many others, providers are experiencing lack of access to supplies including food, particularly residential operations who usually purchase groceries at the local grocery store.
- Costs Associated with Education, Entertainment, and/or Recreation: Providers may also experience increased costs related to education, entertainment, and/or recreation, including the purchase of computers or tablets to facilitate online learning and/or other equipment and supplies to keep young people engaged constructively during this period of isolation and through school closures.
- Child Care Expenses: Some providers are also expending resources to secure child care for clients and/or staff as a result of school and daycare center closures.
- Lower Caseloads for Non-Residential Services: Organizations offering services that are not residential, such as family counseling services, are anticipating or already experiencing lower client caseloads. Lower caseloads means lower reimbursements and concerns of having to lay off staff who will be difficult to replace.
- Cancellation of Fundraising Events: Some organizations have had major fundraisers canceled, threatening the financial health of their organizations and limiting their ability to cover increased expenses.

Youth-Service Providers Need the following from State and Federal Leadership and Regulatory Agencies:

- Clear and direct guidance on implementation of precautions and development of response plans. This guidance should address hygiene, sanitation, isolation, screening, staffing and more.
- Access to Covid-19 testing. As the state continues to have shortages of Covid-19 tests, staff working in and youth and young adults staying in group housing settings including shelters, RTCs, detention centers, etc. and showing symptoms of or have had exposure to Covid-19 should be considered priority for testing.
- Increased government funding to cover the expenses outlined above.

- Supplies that are currently understocked and hard to find, including personal protective equipment.
- Solution-focused collaboration to address workforce challenges, including staffing ratios.
- Flexibility to allow quick grant budget modifications to address needs as they arise. This includes budget modifications to personnel categories and to add technology tools for remote work and virtual meetings.
- Flexibility to allow in person meetings and appointments to be transitioned to virtual phone and video meetings including family visits, counseling, case-management, classes taught by contractors, etc.
- Cancellation or delay of *routine* monitoring visits and audits to minimize exposure to youth and staff. as well as ensure staff is available to support youth in their care.
- Flexibility with grant match requirements, in recognition that match dollars may be lost due to cancellation of fundraisers and/or may need to be spent on emergency expenses.
- Modification of output or outcome targets for community-based services that are not residential, such as counseling sessions, in-home visits, etc.
- Flexibility around service-delivery, including flexibility to meet with clients to provide case management, counseling, and other services remotely.
- Temporary flexibility around training requirements, including flexibility to complete some training online rather than in-person.
- Temporary flexibility on staffing requirements that allow staffing shifts when frontline staff call out and administrative staff who have not gone through the same background checks and training are needed to work in facilities to cook food or meet staffing ratios during staffing shortages.

TNOYS is working with state and federal agencies to address the immediate concerns and will continue to bring new concerns to their attention as they arise. Many relevant regulatory agencies have been collaborative and understanding and many of these challenges are being addressed already.

Special Considerations for the Texas Department of Family and Protective Services and Health and Human Services Commission in regard to Texas' Residential Child Care (i.e., Foster Care) Contractors:

- TNOYS wants to recognize Child Protective Services for its leadership and collaboration during this difficult time. CPS has already been working with TNOYS, its members, and others to address many challenges that providers are experiencing and that they anticipate as things progress.
- Some residential foster care providers are closing their doors to new placements in order to keep the children and youth who are already in their care safe. Others are not able to take new children because they do not have the staff required to meet staffing ratios. CPS has already been working to limit movement of children from one placement to another during this time, in anticipation of placement shortages. The agency has also asked providers not to refuse placement. Experiences of child welfare systems in other states indicate that additional measures may be needed; for example, the providers who are willing to accept new placements may need flexibility with staff requirements and/or waivers for staffing ratios. CPS has expressed strong willingness to work with providers who are in need of this flexibility and support.

- More coordination may be needed between CPS and Residential Child Care Licensing (RRCL), which is now housed at HHSC. Some providers are reporting that although CPS is asking them not to refuse placement, RRCL staff are asking programs that may have had contact with someone who displays symptoms of COVID-19 not to accept new placements for up to two weeks. This reduces the state's placement capacity, which was already limited.
- TNOYS is sharing the following additional updates and guidance from CPS with its members:
 - Superior and CPS worked together to contact children and youth in care to ensure they are safe and have access to needed prescriptions and medical care.
 - CPS has instructed providers to continue to ensure that children and youth entering care get their three-day medical exam, as these exams may now be more critical than ever. Superior is available to help providers with scheduling these appointments.
 - CPS has allowed for case managers to conduct virtual (video must be included) case management meetings for youth in placements when it's in the best interest of the health and safety of all parties. CPS is available to try to support organizations that do not have the technology tools to facilitate virtual meetings.
 - CPS has suspended PAL classes, which require outside contractors to enter facilities and teach large groups of students. The agency will work to ensure that this does not present barriers to accessing benefits for youth who will soon age out of foster care.
- TNOYS recommends that state leadership work to ensure that COVID-19 tests are available for children and youth, and staff, in congregate care settings who show symptoms and that they be considered high priority for being tested.

Special Considerations for the Texas Department of Family and Protective Services in regard to Texas' Prevention and Early Intervention (PEI) Contractors:

- TNOYS wants to recognize PEI for its collaboration and the guidance and flexibility already provided to community based prevention providers to address concerns from the field:
 - Increased, temporary, flexibility to allow providers to use virtual/remote technology to continue to support youth and families through counseling, home visits, parent education programs, etc.
 - Flexibility on use of contracted funds to support families in crisis.
 - Opportunity to renegotiate contracts and rates during the transition.

Special Considerations for the Texas Higher Education Coordinating Board and Texas Colleges and Universities with on campus housing:

- The Texas Department of Family and Protective Services has worked with the state's public colleges and universities to ensure that students who are in extended foster care and/or Supervised Independent Living will be able to remain in their dormitories despite school closures.
- TNOYS recommends that all public and private Universities and Colleges with campus housing keep dormitories open and make food accessible for students in extended foster care, previously in foster care and students at risk of homelessness without access to campus housing. For a variety of reasons, homelessness threatens their health and safety and the health and safety of the public.

- TNOYS also recommends the Texas Higher Education Coordinating Board provide guidance and information to colleges and universities addressing the importance of keeping dorms open and food accessible for students at risk of homelessness without campus housing. In other areas of the country there are students who are experiencing homelessness due to closure of their dorms.

Special Considerations for the federal Runaway and Homeless Youth (RHY) Program: *(TNOYS is supporting efforts of NN4Y to address these issues.)*

- Additional funding is needed to cover increased expenses addressed above.
- Adjustments may need to be made to required training for staff prior to being able to work on the floor of a Basic Center Program (BCP)/Transitional Living Program (TLP) (if/when providers have to use non-BCP/TLP staff from other areas of the agency to help staff these programs to keep them open).
- More information is needed on the policy for staff who must be home for health reasons or to isolate but who cannot work remotely.
- Guidance is needed on how to handle situations in which a mother and child reside together and the mother but not the child displays COVID-19 symptoms. Should they be isolated together?

Special Considerations for the federal Department of Housing and Urban Development (HUD): *(TNOYS is supporting efforts of NN4Y to address these issues.)*

- HUD's Homeless Assistance Grant (HAG) program needs to provide waivers to providers very quickly, especially as they relate to Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH). There is concern that young people, especially those who work in the service industry, may lose jobs and be unable to pay their portion of the RRH subsidy and youth who will soon meet the 24-month maximum length of stay, providers need to quickly receive waivers to extend RRH subsidies and pay 100% for those who lose their jobs.