



March 24, 2020

Gregory Rose, Deputy Director
California Department of Social Services
744 P Street
Sacramento, CA 95814

Re: Urgent Action to Ensure Ongoing Licensed Children's Short Term Residential Therapeutic Programs

Dear Deputy Director Rose:

The California Alliance of Child and Family Services (Alliance) appreciates the actions that CDSS is taking to meet the challenges of the COVID19 crisis and its impact on the state's licensed providers, including the easing of regulations governing service delivery and facility operations.

The Alliance represents some 145 nationally accredited nonprofit organizations throughout the state of California. Approximately 100 of its membership organizations have Short Term Residential Therapeutic Programs (STRTP). **On behalf of its membership, the Alliance strongly urges CDSS to put in place an immediate STRTP rate supplement to ensure that these organizations can retain direct care staff.**

Of the multiple threats to the ability of STRTP's to serve our youth, the retention of direct care staff is paramount. Despite having demonstrated extraordinary dedication during the initial phase of the COVID19 crisis, staff are increasingly alarmed about the risks they are taking in reporting to work. The reasons are numerous:

- 1) The lack of testing available – this creates significant anxiety among staff as they deal with youth who are sick and present COVID19 – like symptoms and are concerned that they may be infecting their own families
- 2) The lack of personal protective equipment available to facilities, including gloves, I-95 masks and hand sanitizer
- 3) Concern about exposure to COVID-19 in light of the mandate that face-to-face visits between youth and their families take place
- 4) The inability of providers to restrict all visitors from the facilities
- 5) The risk that youth pose who leave the facility without permission and then return
- 6) The more and more challenging behaviors of youth who are triggered by the increasing levels of anxiety
- 7) School closures and the resulting requirement that staff provide activities and oversee distance learning for the entire 24-hour day

Additionally, staffing the STRTP is more challenging in light of the fact that the workforce is diminished as employees must remain at home because they have children whose schools have closed without available childcare, or the need to remain at home to care for a sick family member.

In addition, STRTPs are experiencing increasing financial hardship due to:

- 1) The newly enacted federal obligation to pay for an additional 80 hours of sick time

- 2) A decrease in billable mental health services and the absence of clinical staff on site given the shift to the use of technology and the suspension/decrease in specific services (e.g., group therapy)
- 3) Increased costs for additional food, activities and recreational equipment for both youth and staff
- 4) A decrease in capacity in order to preserve flexibility and the ability to isolate youth who exhibit symptoms of the virus
- 5) The need to absorb the cost of incentives to staff so that they continue reporting for work
- 6) The additional staff required to work during school hours

Attached please find two documents: 1) The “California Alliance of Child and Family Services Rate Supplement Options” dated March 2020 (Options), and 2) The “STRTP Survey of Agencies” compiled during the period January – March 2020 (Survey.)

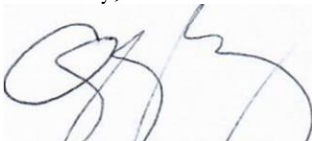
The Options document was developed by the CEOs/Executive Directors of Alliance member STRTPs with licensed bed capacities ranging from 12 beds to 62 beds. This document outlines two options for stabilizing staffing during the pandemic: 1) the addition of FTEs, or 2) an increase in the hourly rate. Both options result in a 20% increase in the cost of supporting and retaining direct care staff. **An essential point is that the STRTP must be permitted flexibility in how to apply the rate supplement, given that different strategies will need to be used for different facilities.**

In addition to the Options calculations attached to this narrative, please find the Survey of 49 member STRTPs representing 1,678 beds, evidencing the challenges posed in serving youth **prior to the presence of COVID-19**. This Survey amply demonstrates what had already become the STRTPs increasingly difficult challenge in serving youth needing, or already in placement. While staffing ratio requirements have been eased due to the COVID-19 crisis, there is every expectation that with the increased levels of anxiety, youth with histories of trauma will be triggered and their challenging behaviors will increase. Thus, providers must be positioned to retain the most highly qualified direct care staff as possible.

The short and long term impact of the loss of direct care staff will be catastrophic, to the children and youth, to a full continuum of care required to meet the needs of our most vulnerable and most challenging youth, the child welfare system as a whole, as well as to vital infrastructure that nonprofit organizations provide.

The rate supplement proposed is urgent. STRTP providers must know that the State is behind them and will provide immediate support. The stark reality is that the alternative may well be that without the services STRTPs provide youth could languish in County child welfare offices. But, time is of the essence.

Sincerely,



Christine Stoner-Mertz
Chief Executive Officer

cc: Kimberley Johnson, Director
Jennifer Troia, Chief Deputy Director