

**Department of Health Services**  
**Report to Human Services Coordinating Council**  
**May 2020**

- Public Health “Stay at Home” Order extended through May 22, 2020. Dr. Beilenson has given many media interviews regarding the outbreak – Information at <https://www.saccounty.net/COVID-19/Pages/default.aspx>
- Hundreds of hours spent addressing COVID-19
- Medi-Cal Reform: SB1029 introduced granting more legal and procedural power to county Medi-Cal Commission – Supported
- Correctional Health launch program of provision of meds to inmates at discharge – Other initiatives pending to provide connection/navigation to outside services for newly released incarcerated
- Continuing expansion of MHSA
- Integrated Care Campus – On hiatus for now
- Health Center continues to perform well
- Mental Health Initiative in Schools – Process continuing
- Working with Supervisor Serna on a joint city/county Methamphetamine conference in the spring

Peter Beilenson, MD, MPH

**Sacramento County  
Public Health Advisory Board**

**Report to the Human Services Coordinating Council**

**May 14, 2020**

1. In March, PHAB submitted a letter to the Board of Supervisors in support of proposed modest fee hikes by Sacramento County's Department of Environmental Management. Most of DEM's programs are fee-based, and there had been no fee hikes in 5 years.
2. PHAB did not meet in April.
3. Jamie White, Epidemiology Program Manager for the Department of Health Services reported on efforts to respond to the COVID-19 pandemic. Sacramento County has done a very good job with containment and mitigation. Dr. Kasirye issued an Order closing schools and businesses, and limiting social gatherings in mid-March. These have been re-issued, then modified, in accordance with requirements from the California State Department of Public Health. DHS has been looking closely at sources of infection, the "hot spots," and has been carefully monitoring testing capacity, hospital surge capacity, and availability of personal protective equipment. They are currently training contact tracers, in preparation for the loosening of shut-down orders. There have been many volunteers from the Community Emergency Response Teams, from the Medical Reserve Corps, from Mobile Integrated Health units, from local medical and nursing students, and others. This is an ongoing intensive effort.
4. Dr. Sandy Damiano, Deputy Director, Primary Health Services, reported on successful efforts to limit the spread of coronavirus in the correctional facilities. Following orders from the court, the inmate population was reduced by over 1000 inmates. There has been less movement between agencies, social visitation has been limited, and there has been enhanced cleaning. Viral screening is doing before transfers in or out of the jail. Masking and isolation have been used when cases have been suspected.

Emergency Medical Services have been involved with PPE distribution, and 5.9 million items have been distributed. Mobile medical shelters have been deployed.

Women, Infants, and Children (WIC) has gone to telephone visits. The caseload has increased. Clients are now allowed to use EBT cards for online or telephone ordering of groceries.

**Human Services Coordinating Council**  
**May 2020**

**Department of Child, Family and Adult Services Updates**  
**Michelle Callejas, Director**

- DCFAS continues to amend practices and protocols based on guidance issued from the federal government, the state and the Court. CPS and APS continue to do in-person visits for investigations, while taking appropriate safety precautions. Ongoing face-to-face visits are being done virtually unless there is a safety concern that warrants an in-person response.
- About 90% of the workforce is either teleworking or on rotational telework. Those in the office are abiding by CDC and County guidelines.
- Many Board items have been rescheduled due to COVID. The Black Child Legacy Campaign has been moved to July; the recommendation to join the AARP Age-Friendly Network will likely take place in September; and some items that were going to be presentations, have been shifted to the Consent calendar.
- Calls to the CPS Hotline are down by 50% as compared to last year. This is also the same across the state and nationally. There are many concerns about children being harmed as they are not being seen by those that typically make child abuse and neglect reports – teachers, counselors, day care providers, primary care physicians, etc. Attached is a document that was put together with collaboration between DCFAS, the District Attorney’s Office, SCOE, First 5 Sacramento, CASA and others. It provides examples of questions that can be asked to check on child and family well-being when checking in virtually.
- The courts remain closed which has resulted in about 200 juvenile dependency hearings backing up for children in foster care. This will impact caseloads and the DHA budget as children are staying in foster care longer than would typically be needed. DCFAS, County Counsel, other attorney groups and the Court are working closely to put alternatives into place as soon as possible.
- The Community Incubator Leads that are part of the Black Child Legacy Campaign continue to meet critical needs of the communities in which they are located. Many needs have emerged regarding food, housing insecurity, and emotional impact of social distancing.
- DCFAS is working on developing a Meals program in lieu of applying to the Governor’s Great Plates Delivered program. We hope to have more information this week.
- Success
  - Senior and Adult Services started the Door Steps program to meet the increased need for emergency food resources. Since mid-March 16th, DCFAS staff has delivered 232 emergency food bags, to 142 high-risk older adults at 117 different residences, including hotels. DCFAS has been able to fill in gaps for older adults that don’t qualify for other programs or need an enhancement to other programs.
  - A DCFAS CPS social worker worked diligently with a mother, local law enforcement, law enforcement agencies in other counties, and the FBI to track and safely retrieve an exploited youth who was being held against her will by a commercial sex trafficker. The youth is safe and the sex trafficker was arrested.



# Supporting Safety and Well-being of Children and Families during COVID-19



The outbreak of COVID-19 is a concern on everyone's mind. While we may be comforted to know that the risk to our children's physical health from the outbreak *itself* appears to be low, child and family serving agencies are worried about the **increased risk for child abuse and neglect during this time of crisis and economic insecurity**. Reports to child abuse hotlines across the nation have declined dramatically during the pandemic. In Sacramento County alone, reports have decreased by 45-50%. These statistics are not surprising – when children stay at home, they are isolated from places where adults often look out for their safety and well-being including schools, day care, primary care providers, places of worship, and other public areas.

**We have a collective responsibility to ensure kids in our community are safe and healthy, even during challenging times.** While it may be difficult to maintain our normal connection with children during the COVID-19 stay-at-home orders, there are other ways we can address the safety and well-being of our children and families. This guide provides tips for teachers, social workers, counselors, day care providers and others who work with children and contact them virtually.

## 1. Check in with parents and caregivers.

School and workplace closings greatly increase stress in parents' lives, resulting from loss of income due to unpaid leave, unexpected or irregular childcare needs, and housing and food insecurity. Parents and other caregivers are their children's most important protectors and may need extra support during the COVID-19 pandemic. **Check in with parents and caregivers to ask how they are doing and what they need.** Lending an ear and helping families access available supports can go a long way in keeping families well. Asking solution-focused questions can help families recognize the steps they have already taken and think through other ways of caring for themselves and others. Below are some ideas for questions to ask, along with follow-up questions.

**Q Is now a good time to talk? If not, is there a better time?**

- Is everyone OK?
- Do you have any concerns for you or your children?
- Do you feel safe? Do you need help right now?

**Q What's it like for your family to be staying home without any breaks? How is everyone getting along with each other?**

- Is anyone having a hard time? What seems to bother them the most? What makes it better or worse?
- How are you providing downtime or "away" time for family members when needed?
- How is everyone passing the time? Do you have activities you do together? Do you need ideas?

**Q Since the COVID-19 emergency started, what's changed for your family? Has anything been more of a struggle? Are you facing new worries or needs?**

- Now is a difficult, stressful time for everyone. How is everyone coping with stress?
- What's one thing you are doing with your children, and one thing your children have done, since this crisis started that you are proud of?
- If you could pick one thing that you've started to make things a little better, but perhaps not done as often as you'd like, what would it be? What kind of difference would it make to do more of it?

**Q How are things going with your child's education at home?**

- What is going well? What has been challenging?
- Do you have any concerns you would like to discuss?

**Q How are things going with your child's behavior and social or emotional health?**

- Who were your children connected to outside the home before the pandemic? How are they staying in touch with their friends?
- Have you noticed changes in your child's behavior?
- Does your child seem more anxious, scared or depressed? Are you concerned?
- Do you have access to mental health or counseling supports for your child?

**Q Is everyone able to get what they need to get by – like food, clothing, housing, and medical care? Have there been any problems?**

- Are you able to access what you need to care for your family? What would help?
- Do you need help connecting to \_\_\_\_\_? (provide local resource suggestions)
- Who can help you? Do you have supportive family, friends, or neighbors who can help?

**Q We all need support right now. Who are the supports in your life? Are you able to connect with them now?**

- People in a crisis often look to examples in their family and culture for how others have dealt with a crisis. Have people in your family had to face crises before? What did they do?

**Q What have you most appreciated about yourself during this time? What have your children most appreciated about you?**

## 2. Check in with children and youth.

Check in regularly with the children and youth you work with, care for, and teach. **Ask questions that are engaging and help identify whether support is needed or a safety concern may be present.** Provide encouraging messages and helpful advice. If a child raises a concern, consider if you can safely follow-up with their caregiver. It is important to remind parents, caregivers, and children that you are there to help, not judge them. Validate that this is a difficult time, everyone is struggling, and that support is still available. Be mindful of how the child's caregiver responds to your questions. Always think of the child's safety first and consider the possibility that the child may not feel safe talking.

**Q Tell me about how things are going at home. How are things going for you?**

- Are you feeling OK? Give me one word that describes how you're feeling today.
- Are you worried about anything? Who do you feel safe talking to about needs or worries? Do you have a way to talk to that person right now?
- What was the best part of your day? What was the hardest part of your day?
- If you were stranded on a desert island, what would you need? Are those things in your house right now?

**Q Tell me about what you do all day.**

- How is learning from home different from learning at school? Is it working for you? How is it affecting you and your family? Do you need help with anything?
- What things do you like to do at home? What don't you like to do?
- Do you have responsibilities at home? What are they?
- What do you like most about staying at home? What do you like least? Why?

**Q How is everyone getting along with each other? Is anyone having a hard time?**

- Who lives or stays in your home (including pets)? Who visits?
- Are you worried about anyone? Why?
- How can you tell when someone in your home is having a hard time? What do they do? What makes them feel better?

**Q Who is taking care of you? How are they doing?**

- Who makes sure you have everything you need? What do they do?
- Where do you sleep at night? Does anyone else sleep with you? Do you sleep well?
- Who takes care of you when you get hurt? What do they do?
- Who gets food for you or makes your meals? Who do you eat with? What do you like to eat?
- What did you have to eat for breakfast today? Yesterday?
- What are the rules in your house? What happens when someone breaks a rule? (Sibling, pet, mom, dad?)

## 3. Connect children and families with support in times of need.

Connect families to additional support when needed. However, if you reasonably suspect a child is unsafe – report it to Sacramento County Child Protective Services (if you suspect imminent danger, call law enforcement first). You do not need proof. You are not making an accusation. You are asking for a professional to help a child and their family. You may be the only person to act. **If something does not look safe, sound safe, or feel safe – report it.**

### Signs of concerns:

- You have had no contact at all with a family after many repeated phone calls/messages
- A child communicates they feel unsafe, you see a child in a dangerous environment, or you notice a significant change in a child's mood/behavior
- For students with technology/internet access: lack of virtual attendance or homework not completed over a long period of time

### Make an extra effort with children who:

- Have a history of emotional, sexual, physical abuse or neglect, drug use, or discussed/attempted suicide
- Are responsible for the care of other children or live in a highly stressful family situation with limited support systems
- Require assistance due to physical, mental, behavioral, or medical disabilities or delays



**Sacramento Child Abuse Hotline**  
Department of Child, Family and Adult  
Services

**916-875-5437 (KIDS)**  
24-hour/seven days a week



*Children and Families Thrive When They are Safe, Healthy, and Connected to Strong Communities*

For the Agenda of:  
May 4, 2020

**To:** Commission Members

**From:** Julie Gallelo  
Executive Director

**Subject:** Executive Director's Report

**Contact:** Julie Gallelo, 916-876-5867

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## **COVID 19 UPDATES**

### **-FIRST 5 SACRAMENTO**

First 5 Sacramento is responding to the unprecedented public health crisis created by COVID-19. There are a number of critical actions we are taking in to ensure children and families continue to receive needed services:

- Commission Staff continue to work primarily from home, with visits to the office occasionally to ensure essential functions are completed. Our fiscal operations have continued uninterrupted, and timely payments to contractors are being made.
- We released a survey to partners to gauge their challenges and the possible assistance we might provide. 100% of our partners are serving families virtually, with approximately 75% of agencies still physically open to serve limited clients on a face-to-face basis. Every agency indicated that they will need changes to budgets and service models in order to reach parents and children during the shelter-in-place order. Funded partners also indicated that they will most likely not meet contracted milestones due to COVID-19. Top needs identified by funded partners included food, diapers, wipes, tablets/technology to communicate virtually, paper products, cleaning supplies, financial support and at-home early learning supplies.
- We have relaxed reporting mandates and will not require a Quarter 3 Report. Rather, we will ask contractors to provide a six month report at the end of the fiscal year.
- First 5 CA allocated \$4 million for emergency supplies (diapers, wipes and hand soap) for local First 5's to distribute. The supplies are expect to arrive in early May and are intended to last for 60 days. In conjunction with our partner Child Action, Inc., First 5 Sacramento conducted a survey of childcare agencies and community partner needs and will be distributing Sacramento's allocation to childcare sites and contractors at no cost.
- Staff sent emails with linked resources out to all contractors and Advisory Committee members on dealing with the stress/anxiety and concerns/fears related to public charge during the pandemic. We are sharing these resources

with families via our social media platforms where we can reach the most people and provide general info and connections to local resources.

## **-NATIONAL UPDATES**

### **Child Care Development Block Grant (CCDBG) funding**

As part of the federal Coronavirus Aid, Relief, and Economic Security (CARES) package to address the COVID-19 pandemic, the Health and Human Services Administration for Children and Families is releasing an additional \$3.5 billion in CCDBG funding. California's share of this will be \$350 million. The dollars can be used by states to serve additional low-income families with child care subsidies or to shore up the child care market as they see fit. We do not yet know how much of this \$350 million will be earmarked for Sacramento County.

Also under the federal relief bill CARES Act, childcare providers are eligible for unemployment even though they are self-employed. If eligible their unemployment payments will be increased by \$600 each week.

## **-STATE UPDATES**

### **COVID-19 Update for Children and Families**

#### 1. Emergency Child Care Funding

Governor Newsom announced the release of \$100 million to support child care services for essential workers and vulnerable populations. Funding is part of SB 89, emergency legislation the Governor signed last month to provide up to \$1 billion in funding to help California fight the COVID-19 pandemic. The breakdown is \$50 million for access (20,000 time-limited spaces) and \$50 million for emergency supplies. This funding is available through June 30<sup>th</sup>.

#### 2. Childcare Operations

The State released guidelines for childcare operations during the shelter-in-place directive, stating that children may be cared for in groups of no more than six per one teacher, with the same children served each day and no teacher room switching. For preschool that ratio is 10 kids to one teacher.

### **Foster Youth and Families Funding**

Governor Newsom announced \$42 million in new investments to protect children who are at heightened risk for abuse and mistreatment due to COVID-19. More than \$27 million is available to help families stay together, nearly \$7 million to support social workers and \$3 million to support Family Resource Centers. The bulk of this funding is from the general fund and a small percentage from federal funds. These funds will be allocated over the next three months.

## **FIRST 5 SACRAMENTO GENERAL UPDATES**


### **Virtual Advocacy Day**

The Association arranged a virtual advocacy day on April 21<sup>st</sup> with local legislators from participating First 5's. Lawmakers were eager to hear from constituents right

now and wanted to know how COVID-19 is affecting the communities they represent. Staff virtually met with Senator Pan, as well as staff from Assemblymember McCarty, Cooper and Cooley. We shared COVID-19 provider response efforts taking place in Sacramento County, the growing needs among young children and families and the essential nature of early childhood development services (child care, family strengthening and health) to inform budget and legislative priorities to come.

### **CENSUS 2020**

With shelter-in-place, outreach strategies for the Census have shifted, making social media efforts even more prominent. Combined messages related to Census 2020, hard to count communities and COVID-19 were used for social media and digital ads. Staff participated in a Facebook Live interview, multiple virtual meetings and continue to share Census information and materials with partners. Thank you Commissioner Erik Fernandez y Garcia for distributing 1,000 of the *We Count* census books to pediatric offices. Trusted Messengers are engaging families through "relational phone banking (phone a friend)" and sharing information through social media. They continue to participate in related webinars to stay up-to-date on census changes related to when the shelter-in-place is lifted. The census deadline has been extended through October 31.



**ALL KIDS COUNT.**

**ENSURE THEIR PROGRAMS GET CRITICAL FUNDING**

Shape their future by completing the 2020 Census today. Include any child that lives with you.

**COMPLETE NOW**

A message from **FIRST 5 SACRAMENTO** **United States Census 2020**

### **Help Me Grow (HMG) National Recognizes First 5 Sacramento**

Every year HMG affiliates complete an annual assessment impact report on county HMG efforts. This information is used to help identify trends and impact across the country. HMG National is highlighting one affiliate per each of the four core components of HMG. First 5 Sacramento is being recognized in the Data Collection and Analysis section for its work related to cross-walking data with Promise Zones.

### **Unequal Births Campaign**

First 5 Sacramento partnered with Sacramento County Public Health and RSE to expand its efforts to reduce African American infant deaths. The mass media campaign aims to raise awareness about the role of racial bias and discrimination in African American infants and maternal death disparities.

The campaign includes creative advertising placement on top radio stations, high-traffic freeway billboard locations, social media, Pandora, and web banners. Since the launch of the campaign, it has generated a total of approximately 8.8 million impressions. All advertising pieces direct the public to learn more about the issue and potential solutions at [UnequalBirth.com](http://UnequalBirth.com).

While paid social and web banner advertisements have performed above industry benchmarks, billboard traffic has seen a decrease due to COVID-19 restrictions. We have secured additional placement to offset losses due to the shelter-in-place order.



### **Virtual Dia de Los Ninos Celebration**

This celebration was changed to a virtual event held on April 30<sup>th</sup>. It was clear there was a need to connect with families during shelter-in-place and share positive messaging around early literacy across all backgrounds. The Facebook Live Dia Bilingual Book Reading will be hosted by First Partner Jennifer Siebel Newsom reading the *We Count* census book and will also include a mindfulness/calming activity. Using this virtual platform allows families from across the state to participate in the book reading and helps with census outreach.

## **COMMUNICATIONS**

### **Digital Engagement**

Paid social media on Facebook, Twitter, LinkedIn and Instagram will focus on Census messaging in April–June, linking users directly to the Census questionnaire. Messaging continues on all platforms highlights COVID-19 resources for parents and children (at-home learning, trauma care, mental wellness, etc.), CaLETIC, paid family leave and much more.

# Sacramento Homelessness COVID-19 RESPONSE TEAM

## Weekly Progress Report

Brought to you in partnership by Sacramento County, City of Sacramento, Sacramento Steps Forward and the Sacramento Housing and Redevelopment Agency

May 8, 2020

Welcome to the fourth weekly report highlighting progress and highlights of the COVID-19 Homeless Response Team’s work to implement the **Sacramento COVID-19 Homelessness Response Plan**. This report includes **actions to date through Thursday, May 7th**.

### Isolation/Quarantine Units for Persons Experiencing Homelessness

*As an emergency response to COVID-19, medically supported isolation care centers, and preventative quarantine care centers have been temporarily funded to provide safe places for people experiencing homelessness who are COVID+, symptomatic or otherwise highly vulnerable.*

Total Care Centers Open	Total since 4/8
# Preventative Quarantine Care Centers Operating # Rooms	3 motels 420 rooms
# Medically Supported Isolation Care Centers # trailers	1 site 59 trailers

Served in Trailers and Motels	Week between 5/1 - 5/7	Total since 4/8
# Individuals served in Medically Supported Isolation Care Center (MICC-trailers)*	3 HH 3 individual	7 HH 7 individuals
# Individuals served in Preventative Quarantine Units (PQCC-motels)	75 HH 94 individuals	287 HH 364 individuals
<b>TOTAL Served**</b>	<b>78 HH 97 individuals</b>	<b>294 HH 371 individuals</b>

\* MICC-trailers are for COVID-19 positive or Persons Under Investigation, at this time the low number of people being served in the MICC-trailers is a reflection of the low number of COVID-19 positive cases in the homeless population. As testing capacity expands throughout the community, we anticipate additional referrals.

\*\*Total unduplicated served since 4/8/20 are: 290 households/367 individuals

- A third PQCC-motel opened this week adding 157 rooms.
- Per County Public Health following CDC guidelines, symptoms of COVID-19 for eligibility into the isolation/quarantine program are now: cough, shortness of breath or difficulty breathing **OR** any combination of at least two of the following symptoms: fever, headache, chills, sore throat, repeated shaking with chills, new loss of taste or smell, muscle pain.
- Designated referral partners who are referring into the program include hospitals, Federally Qualified Health Clinics (FQHCs), outreach teams, correctional health, emergency shelters, law enforcement and other homeless service providers.

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## Ensuring Safety and Health for Persons Living Outdoors

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*This strategy is focused around providing coordinated support to people who are unsheltered to remain safely in place per CDC guidance to slow the spread of COVID-19.*

Sanitation Stations	Total since 4/8
Handwashing Stations	56
Toilets	49
Locations	36

*\*Placement of stations is dynamic, and equipment may be moved*

Encampment Activities	Week between 5/1 - 5/7	Total since 4/8
# Meals served through Loaves and Fishes	1,100	4,500
# Meals served by Sacramento Covered	2,000	8,800

Encampments and Outreach	Total
# Designated Outreach Navigators	37
# Encampments Identified with 20+ individuals	40
# Encampments Identified with < 20 individuals	38
TOTAL Encampments Identified	78

- Medical assistance has been provided to 21 encampment areas to date by volunteer medical students from UC Davis Medical School and California Northstate University, local health care providers and a Medical Integrated Health Unit.
- The Response Team is excited to announce a new partnership with the Joan Viteri Memorial Clinic (JVMC). Starting on May 8th, the Department of Health Services will provide 200 tests to the JVMC team to test people experiencing homelessness in encampments.
- A private provider of trash removal services has been contracted for clean-up near sanitation station locations and in areas where food is distributed. This COVID related service augments clean-up occurring by the City and County.
- Servicing of sanitation stations is included with the deployment of the stations and will continue.

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## Keeping Existing Emergency Shelters Safe and Operational

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*This strategy ensures that existing shelters can safely remain open following CDC guidelines, moving vulnerable guests into COVID prevention care centers, and continuing to serve the general homeless populations.*

- County Public Health and Elica Health are doing robust COVID testing at shelters with the goal of being able to do widespread testing to ensure the health and safety of shelter guests.
  - COVID testing was completed at congregate shelters on May 7. In the second week, testing was completed at family and youth shelters.
  - To date, tests were offered to 398 guests in 8 shelters, of those, 183 consented to testing.
  - 171 test results have been received back from the Sacramento County Public Health Laboratory and all found negative for COVID-19. There are 12 pending tests.
- Nurse Advice Line for shelter staff to access real-time, health services support available 7-days per week, 7 am to 7 pm.
- Held weekly calls with private and publicly funded shelters.

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## Access to Housing

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Strategies to improve access into permanent housing include:

- The team is working on other strategies to maximize housing placements as persons exit Isolation/Quarantine units, that can include increasing access to existing market units, new acquisition/rehabilitation projects.

In addition, housing efforts continue more broadly:

- Since April 8, 23 families have moved into permanent housing from the City's Pathways and the County's Flexible Supportive Housing Program with a Housing Choice Voucher.

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## Acknowledging Our Partners

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We wish to acknowledge all the public, private, and community partners whose efforts are helping keep people experiencing homelessness safe and slow the spread of the COVID-19 virus. This week's featured partner is the Encampment Med Team.

The Encampment Med Team is a group of local medical and pharmacy students from California Northstate University and UC Davis who have mobilized to deliver health care to unhoused encampment communities in Sacramento County. Sworn in as disaster relief workers by the Sacramento County Department of Public Health, their services include COVID-19 screening and triage, low acuity medical care, healthcare navigation, and public health assessments and interventions, all while bringing people up to date information about the virus. This volunteer group has been able to perform wound care and health screenings, provide some COVID-19 tests, all while bringing folks up to date information about the virus. Visit the Encampment Med Team [website](#) to meet their team and learn more about their contributions. Thank you Encampment Med Team for your service!