

# CARES Act Grant Funding

## City of Coppell

1) What percent of your employees are on reduced hours or are furloughed/or out sick due to COVID -19? \*

All 52 full-time employees are currently working their regular hours and while we have reduced hours for 5 part-time Childcare workers (from 25 hours a week to as needed hours per week by shifting their job duties to assist other staff with administrative needs on special projects). We have had no furloughed employees nor any out on sick leave.

2) Describe new or added expenses you have due to COVID-19 (attach a dollar amount to each item described). \*

- Purchase of one month of tele-medicine platform: \$800
- Program cost (monthly) for Zoom platform, used by clinicians, education team, and other staff members: HIPAA Compliant Zoom Platform: 50 Zoom licenses at \$20 a month for 3 months = \$3000
- Training of 14 graduate-level clinical interns (12 hours) on tele-mental health therapy: \$1000
- Purchase and distribution of white noise devices and headphones for families: \$1000
- Purchase of commercial cleaning supplies for use in Forensic Interview rooms and waiting rooms: \$1500
- Licenses for DocuSign program for clients' paperwork: \$700
- Stipend for use of personal phones/data to talk with clients: 40 employees x \$50 a month for 3 months = \$6,000; leadership and other managers already receive this stipend as part of their benefits
- Computers for staff working from home or at mobile locations: \$10,000 for 5 new apple laptops
- Training on working with children via tele-mental health: \$600
- Plastic bins with lids for individual Play Therapy sets: 25 x \$10 each = \$250
- Backpack electromagnetic disinfectant sprayer (5 x \$1700) = \$8500
- Disinfectant for sprayer for 3 facilities (Lewisville, Denton, & Wise County) = \$2500

3) Have caseloads and/or workloads increased or decreased during the outbreak? Please Explain. \*

Our caseload has increased during the outbreak and we continue to see clients, as we are a designated essential service.

We conducted more new child abuse investigations in the month of March – 113 – than any other month in our 22-year history. In April, the Center gave 79 forensic interviews to child victims and provided hundreds of other families with extra support during this national crisis, including tele-mental health and virtual-education programs. We served 5 clients who were residents of Coppell, all in Dallas County, providing 3 households with 90 services between mid-March and the present. Overall, we have seen a 20% increase in family advocacy services provided to ongoing clients from March to April. Still, in April and May, the Center saw fewer new cases come in than is typical, and across Texas, reports of child abuse were down. We remain concerned for the youngest citizens in our community.

March closed out with our agency conducting our highest number of child abuse investigations in our 22-year history and the fewest in four years, as a result of fewer professional reporters being in contact with children through schools and daycares. We saw an increase in physical abuse cases, but no decrease in sexual abuse cases. After 11 weeks of physically distancing and minimizing contact, our staff continues to provide essential services, joined by 47 law enforcement jurisdictions and 3 specialized CPS units across Denton and Wise counties.

We initiated a 3-tiered system for Forensic interviews to protect staff and clients: 1) in-person following CDC recommendations for personal hygiene and physical distancing, 2) onsite but virtual, following HIPAA and prosecutorial requirements, with child and interviewer in separate rooms, and 3) virtual in case of illness in the home, once safety and security of child victim has been assured.

One benefit from developing this three-tier system for forensic interviews is that Family Advocates, who normally become involved after the initial interview, are building a relationship with the child and family even before the forensic interview portion of the investigative process begins. The Advocates have begun making weekly phone or video check-ins with the families, assessing needs for concrete resources of emergency supplies for the families, and ensuring other resources for local or governmental opportunities are available to all clients through our website. We have seen an uptick in the number of families requesting services and emergency supplies since the first of the pandemic, yet our donations to the Rainbow Room, which holds these emergency supplies of clothes, food, and personal items, are down as result of COVID-19.

We began providing tele-mental health programs in March and have developed additional programs, including Child-Parent Relationship Therapy and disaster recovery therapy. We are committed to ensuring that kids and families continue to receive mental health services as more people are stressed and kids remain in homes where domestic violence occurs, where in-home sex abuse continues without ceasing and where online predators have a captive audience. In moments like this when we know our clients are vulnerable, technology is a gift as we continue to work with clients and their caregivers through a HIPAA approved, evidence based tele-health system. As the need for limiting in-person contact may continue for months, we will implement a daily support group for parents in hopes of reducing anxiety and stress related symptoms for both clients and family members.

Meantime, our primary defense – our teachers and counselors who hear from their vulnerable students – are sidelined, so reporting of cases to the statewide Child Abuse Hotline has decreased even as severity of physical abuse has increased. Our education team and Family Advocates have introduced tele-educational programs to help meet the needs of families and the community, while we await schools and businesses reopening. Our Education Team and Family Advocates are offering virtual Parent Cafes, which are safe spaces where parents and caregivers talk about the challenges and victories of raising a family. These programs have been proven to reduce violence in the home and, with the rise in physical abuse cases, we will use every available resource to keep children safe.

Donations from individuals, foundations, and corporations are vital to our continuing to provide services, yet our largest fundraiser that annually nets approximately \$500,000 in unrestricted funds was cancelled for 2020, threatening to compromise our ability to promise our response for the long haul. We continue to reach out to funders and to the community as we must continue providing essential services and be ready for the onslaught we know will occur once the stay-in-place restrictions are eased and schools reopen.

Multidisciplinary case review and case coordination will continue, via video-conferencing that partner agencies and Partner Relations staff continue working together towards justice and healing for the child victim.

4) Describe any new technology needs/expenses due to COVID -19 (Also give a dollar amount to each description)?

We have had to shift quickly to tele-mental health options to continue to see clients. Every one of our therapists and fourteen graduate-level clinical interns completed a twelve-hour tele-mental health training class the week of March 16 and now are certified to provide this service to clients. Our therapists have introduced an evidence-based tele-therapy method called Psychological First Aid, primarily used for survivors of catastrophic disasters, and been trained in and begun offering Child-Parent Relationship Therapy. Our clients are already in a fragile state due to the trauma of abuse, and the uncertainty over the pandemic can trigger anxiety.

Purchase and training for tele-therapy has cost the Advocacy Center over \$1800. We have also had to pay for HIPAA Compliant Zoom Licensing and other features including computers and communications stipends for 40 staff members to protect our clients and clinicians, for an additional \$28,000.

Education Specialists saw 2,800 children in March before schools closed and limits on gatherings were made. This team is now working with the Dallas Children's Advocacy Center to provide free online training to caregivers and teachers during this time and introducing virtual Parent Cafes offered through Be Strong Families to provide safe spaces for parents and caregivers to talk about parenting challenges and to learn to create strategies that help strengthen their families.

While training and use of the online services has no cost to the Advocacy Center, we have had to purchase Zoom licenses and provide staff salaries and benefits while transitioning from in-person to virtual education programs.

5) Explain any lost income/ donations/ revenue/missed fund raisers and give a dollar amount to each item described.

We continually seek funding from corporations, foundations, and governmental granting agencies to support technological, operating, and unrestricted funding opportunities. Our fundraising efforts have been significantly impacted by COVID-19, yet the Advocacy Center Development office, along with the CEO and the Board of Directors, created a new strategy designed to mitigate the effects of the shelter-in-place restrictions on the Center. We postponed our annual Gala, our largest fundraiser for unrestricted funds and cut nearly

\$400,000 in expenses from the original 2020 Budget. We applied for and received the Payroll Protection Loan through the CARES Act and have federal funds committed that are essentially guaranteed during this stressful time. However, we still face a gap of over \$1M needed to cover expenses for the rest of the year.

The support of our Board and a generous benefactor have allowed us to continue seeking funds through an online match of \$175,000, towards which we have raised \$120,000. Our Development team and Board continues to seek grants and offer unique online opportunities; so far, we have raised over \$250,000 in unrestricted funds. And we have received verbal approval of additional Victims of Crime Act (VOCA) funds for salaries and benefits, computers, and other general operating costs.

6) Have you considered applying for the Payroll Protection Program (PPP)? Were there any Barriers to applying or any reasons why PPP wouldn't help your agency?

Yes. We received funding.

7) If you were to get additional funding from the City of Coppell, how could you spend it to benefit low/mod income residents? \*

Any additional funds received from the city would be used to enhance our current programmatic responses, whether as part of forensic interviews, mental health services, Family Advocacy services, or educational programs. We are adjusting our tele-mental health program to increase adult group therapy alternatives to help parents learn how to decrease physical responses to emotional, financial, and physical stressors. In addition, our Family Advocates have collected materials into a COVID-19 resource file and ensure that families in need are provided with information to help locate needed assistance. Finally, additional funds could pay for salaries/benefits and expenses for the staff as we increase our virtual and onsite presence across Denton and Wise counties.

8) What are your immediate needs due to COVID-19? \*

Our largest immediate need is for unrestricted operating funds lost due to cancellation of special events to pay for salaries, benefits, supplies, and utilities. In addition, because donations of emergency supplies in our Rainbow Room have decreased significantly, we have needed to replace items (food, clothing, personal hygiene, household cleaning supplies, etc.) that have been given out in the past weeks. Finally, with only limited staff and clients allowed into our two facilities, we have cleaned each room and practiced other CDC recommendations for limited contact and physical distancing. Once we reopen both centers fully, we will have to be even more diligent in cleaning each room and surface, providing masks and hand sanitizer for clients and staff, and ensuring that needs are met for all virtual Forensic Interviews and therapy sessions offered due to illness or other barriers that would interfere with care.

9) What do you predict your needs may be from now through the end of the year due to COVID-19.

We know that as a result of our more than \$1M funding gap that we will need to fund salaries and benefits and other direct client operational expenses due to lost revenue from special events and lower donations from individuals and corporations. We will continue to assess needs and course correct as we identify specific challenges in order to be prepared for the literal onslaught once children are back in school and with safe adults out of their homes. We anticipate a huge increase in the number of outcries and reports of suspected child abuse once children and teachers are back in school. We have to keep staff fully ready, without a waiting list, as our new normal is going to be a different crisis than the one we are experiencing now.

Our primary responsibilities are to continue to provide mandated and wrap around core services of Multidisciplinary Team Coordination, Forensic Interviews, Mental Health Services, Family Advocacy Services, Forensic Medical Exams, and Multidisciplinary Team Case Review. We are the ONLY organization in Denton and Wise counties to offer these wraparound services.

Our specific programs to reach child victims of abuse and their non-offending family members are to continue offering forensic interviews for all investigations requested by law enforcement or CPS, to provide tele-mental health systems for child victims and their parents, implement daily support groups for parents in hopes of reducing anxiety and stress-related symptoms, and provide virtual Parent Cafes as safe spaces for parents and caregivers to talk about the challenges and victories of raising a family, to continue multidisciplinary case review and case coordination via video-conferencing with partner agencies and Children's Advocacy Center staff, and to continue fundraising as we work together towards justice and healing for the child victim.

The cost for a child to receive all the services we provide is \$1,500 -- yet no client is ever charged. We must continue holding forensic interviews, purchase tele-therapy systems so mental health care is not interrupted, and take care of our staff financially and emotionally in anticipation that client numbers will rise. The strain of providing essential services will only increase. We provide services that no one else in the county can provide. We are joined in this effort by 47 law enforcement jurisdictions and three specialized CPS units to ensure children are safe. We will not stop. Once this immediate crisis is over, we will be ready to deal with the aftermath and to create a stronger, better Denton and Wise counties.

10) In addition to your answers above, what are the greatest needs you see in the community right now? \*

We must be prepared for an unprecedented surge in outcries once shelter-in--place restrictions are lifted and schools reopen.

Teachers are our eyes and ears on the ground; they are trained to look for and report abuse. We know children are safer in school. We know after this long period of isolation, where a child may be unable to escape their abuser or are left under the care of a predator who seems like someone their parents can trust, reports of sexual and severe physical abuse will increase.

Unfortunately, we have already seen a drastic increase in reports of severe physical abuse. The CARE Team at Cook Children's in Fort Worth has tied this directly to the COVID-19 pandemic and its ripple effect through our society and economy.

Dr. Jayme Coffman, medical director of the hospital's Child Advocacy Resources and Evaluation team, said, "People have so much increased stress right now. They've got financial stress. Some people lost their job or worried about keeping their current job. They lost their income. You've got stress from being overcrowded. Everyone's cooped up together. They feel like they can't get away from each other. These stressors can lead to abuse."

Data from previous years shows a significant increase in the number of cases we receive after children have been home for summer or breaks. March and October are typically our busiest months, because once children return to school there is an uptick in reports. We anticipate this will happen again when children return to school and life resumes. The high numbers of reports that rise to the level of a criminal offense coming in already is worrisome; this time should be the calm before the storm, and it is already flooding.