



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of Community Services | 330 C Street, S.W., Washington, DC 20201
www.acf.hhs.gov/ocs

Community Services Block Grant Information Memorandum

IM#: CSBG-IM-2020-157
DATE: April 13, 2020
TO: Community Services Block Grant (CSBG) State Officials and Program Contacts and other CSBG Stakeholders
SUBJECT: CSBG Immediate Guidance on COVID-19 Response
ATTACHMENT(S): None

Introduction

This document provides emergency guidance for both state CSBG lead agencies and eligible entities providing community support as part of a national effort to address the public health and economic impacts of the coronavirus disease, known as COVID-19.

The Office of Community Services (OCS), within the Administration for Children and Families (ACF), is committed to ongoing partnership with state CSBG lead agencies, eligible entities, and other agencies to address the unique and widespread impacts of this national emergency. CSBG eligible entities—more commonly known as Community Action Agencies (CAAs)—can play a critical role in serving low-income individuals and families in communities, but this will require rapid adaptation of service delivery approaches in close partnership with public health and emergency management professionals within communities. Because the public health response to COVID-19 requires physical and social distancing, an effective immediate response to COVID-19 will require new ways of organizing and delivering services while maintaining capacity to help communities in longer-term recovery efforts.

IMMEDIATE PRIORITIES

- ***Protecting the Health and Well-Being of Staff*** – OCS recognizes that state and local CSBG staff members responsible for planning and providing community services are also personally affected by the direct and indirect effects of the COVID-19 outbreak and efforts to slow transmission (such as physical and social distancing measures, temporary

school closures, and travel advisories and restrictions). ACF and OCS will assist and support states and eligible entities in every way possible as they take steps to protect the health and well-being of staff so that they, in turn, can contribute to immediate and longer-term community response. Consistent with recent OMB guidance, grantees may continue to charge salaries and benefits to currently active CSBG awards consistent with the recipients' policy of paying salaries (under unexpected or extraordinary circumstances) from all funding sources, federal and non-federal. During CAA closures, employees should continue to engage families and deliver services to the extent possible, on a remote basis. In some instances, state governments and eligible entities may need to use telecommute arrangements or alternative work locations. State and eligible entity leadership may also explore options to temporarily modify hours of operations and explore mechanisms for temporary staffing support to help ensure continuity of operations while addressing staffing concerns. While decisions about work arrangements must be made within state and community agencies consistent with human resource policies set within those agencies, there is no limitation in the CSBG Act on these arrangements. OCS supports necessary administrative adaptations to assure continuity of operations in an emergency.

- ***Ensuring Continuity of CSBG Funding at Federal and State Levels*** – OCS will place the continuity of grant funding, including the release of \$1 billion in CSBG supplemental funding under the Coronavirus Aid, Relief, and Economic Security (CARES) Act, as its top priority at the federal level. Likewise, OCS encourages State CSBG Lead Agencies to place a priority on the efficient and ongoing release of necessary CSBG funding to support community-based services by eligible entities. State CSBG Lead Agencies are also encouraged to expedite the release of funds where possible and appropriate, while also taking necessary actions to reduce the short-term administrative burden for eligible entities to assure that the attention of local eligible entities is focused on addressing immediate community service needs.
- ***Supporting a Robust and Flexible Community Response to Urgent Needs*** – At all levels of the CSBG network, our mission is to meet the needs of all low-income individuals and families, including those with disabilities, seniors, low-income families (including those with a recent loss of income as a result of COVID-19), those without access to fresh food, or other immediate family needs. The needs within communities are likely to change on a daily basis throughout the COVID-19 response. OCS supports state efforts to simplify procedures to re-deploy available CSBG resources to address emergent community needs. This may include expedited amendments to Community Action Plans or blanket allowances to use CSBG resources for certain new purposes consistent with the CSBG Act, and imposing brief reporting requirements providing only the most essential information on an immediate basis to inform state and federal authorities of immediate services and urgent needs while allowing more detailed amendments to Community Action Plans to be processed at a later date. While OCS encourages flexibility in methods of community service delivery, we recommend that states and eligible entities maintain

the best possible records of expenditures and services delivered with CSBG resources at the community level to help ensure later reimbursement with any available resources.

THE ROLE OF CSBG ELIGIBLE ENTITIES IN COMMUNITY RELIEF EFFORTS

As noted above, community needs resulting from COVID-19 are rapidly evolving and may differ from community to community. While the coordination of local efforts with emergency management and public health experts is critical in all emergencies, it is essential that any services and activities be conducted in a manner that is consistent with efforts to prevent disease transmission and efficiently manage the distribution of resources. CAAs and other eligible entities that deliver CSBG services must act in accordance with local public health and safety requirements and are encouraged to establish formal channels of communication with local health and emergency management authorities while offering support to meet local needs.

While some CAAs and other eligible entities may experience a short-term interruption of services, it is expected that both can play a critical role in supporting low-income people in communities, not only during the immediate efforts to prevent or slow transmission of COVID-19 when individuals and families may not have access to critical resources, but also in the recovery efforts to address the economic and community consequences of the outbreak.

Examples of areas of priority support may include the following:

- ***Coordination and Delivery of Critical Services*** – In many communities, eligible entities have historically served as a central point for community-based services for low-income people before, during, and after crisis events. This may continue to be the case, though significant adaptations may be needed to traditional service delivery approaches in the COVID-19 response and recovery efforts. For example, certain facilities may not be available or resources may not be distributed in congregate settings without consultation with health and public health authorities. Community Action Agencies and other eligible entities may coordinate with community partnerships and resources to support other relief efforts. CAAs also have the knowledge and existing service relationships with low-income populations, such as people in areas of concentrated poverty, people who may lack transportation to access emergency and short-term recovery supports, and others who may not otherwise have access to immediate services or may need assistance in obtaining food or other critical supplies. Using CSBG and other resources, states and eligible entities can support families in accessing local, state, and federal relief, including exercising the inherent block grant flexibility to address emergency needs identified at the community level.

- ***Access to Facilities for Urgent Needs*** – In many disasters, CSBG-funded agencies that have operable facilities may support supervised access to those facilities, including kitchens, rest/napping areas, computer labs, bathrooms, laundry, and (if needed) power sources for recharging phones and other communication devices. While some of these resources may not be immediately necessary or accessible during COVID-19 containment efforts, the purpose of facilities may be adapted in cooperation with emergency management and public health professionals to provide critical resources in community-based settings. CSBG funds may be used for costs associated with the health and safety of facilities, such as costs for sanitation, gloves, and cleaning services, and CSBG funds may also be used to make facilities usable and accessible.
- ***Connection and Referral*** – Even if some facilities are inoperable or compromised for immediate support services, program staff may work with public health and emergency management authorities to provide staff resources. These staff resources can help deliver support to families in meeting their basic needs, including nutrition, health and mental health support, and in sharing information regarding alternative or supplementary non-government organization (NGO) providers and non-profit organizations for immediate aid.

MONITORING

The Office of Management and Budget (OMB) has directed federal agencies to postpone non-essential travel. One of our top priorities is the safety of our grantees and our staff. For the aforementioned reasons, OCS will postpone all CSBG on-site monitoring visits through May 2020. Should OMB's direction change, we will assess all new information, including the capacity of states and eligible entities to participate in a federal on-site monitoring visit, and make a determination consistent with the facts at the time. State agencies may also need to postpone monitoring visits depending on the capacity of states as well as the eligible entities scheduled for visits.

ELIGIBILITY DETERMINATION

In addition to individuals and families that have been previous service recipients, eligible entities may identify individuals and families whose economic circumstances have been adversely impacted and who have immediate needs because of the emergency. States have substantial discretion in defining the procedures for determining if an individual or family meets the eligibility requirements for CSBG, including the timeframes for review and necessary documentation appropriate to the services or strategies being implemented.

Section 673(2) of the CSBG Act (42 USC 9902(2)) specifies that the Federal Poverty Line shall be used as a criterion of eligibility in CSBG and that the state may revise the poverty line to not exceed 125 percent of the official poverty line. The CARES Act authorizes states to revise

the income limit for eligibility ceiling from 125 to 200 percent of the federal poverty level for CSBG services furnished during fiscal years 2020 and 2021, including services furnished with the state's regular CSBG appropriations during those years. In an emergency circumstance, states may consider circumstances where individuals may have become low income as a result of the emergency, and may establish appropriate procedures based on individual and family needs. States are encouraged to review existing procedures and establish emergency procedures, if appropriate, to streamline the eligibility determination process for the duration of the national public health emergency. If an affected individual or family does not have in-hand the eligibility documentation necessary for certain emergency needs, such as food assistance, grantees may consider establishing emergency procedures. Such procedures may include flexibility in accepting signed statements from the family attesting to necessary eligibility information, pending availability of such documentation necessary to establish eligibility for assistance needed to meet immediate emergency needs.

NATIONAL HEALTH RESOURCES

While we recommend that states and eligible entities work closely with their state and local public health authorities on issues related to preparing for and responding to COVID-19 in your organization and community, OCS wants to share the best federal guidance in a number of areas. This guidance is being continuously updated as new information arises.

- Measures to prevent COVID-19 in your community, including at home, in childcare settings and schools, homeless centers, at work and in faith-based settings: <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html>
- Information for higher-risk and special populations: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/index.html>
- Information specifically related to domestic and international travel: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
- General Frequently Asked Questions, including How it Spreads, Symptoms, and What to do if you are sick: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

If you are unable to find federal guidance to address your concerns or are encountering any challenges in implementing your programs as a result of the COVID-19 virus, please contact your federal program specialist, so that we can share this information with the relevant stakeholders to connect you to the information needed, if available.

MENTAL HEALTH NEEDS

Children, families, and social services staff may experience heightened stress, anxiety, and even trauma related to the consequences of this emergency situation. Responses may vary by the individual, and a short-term priority may be remotely delivered support for coping and adaptive functioning while simultaneously planning for additional services and supports. The following resources may be helpful:

- **Disaster Distress Helpline** – One national telephone resource for linkage to crisis counseling services is the Disaster Distress Helpline, which is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA). This is a 24/7, 365-day-a-year, national hotline dedicated to providing immediate crisis counseling for people who are experiencing emotional distress related to any natural or human-caused disaster. This toll-free, multilingual, and confidential crisis support service is available to all residents in the United States and its territories. Stress, anxiety, and other depression-like symptoms are common reactions after a disaster. Individuals experiencing distress may call **1-800-985-5990** or text **TalkWithUs to 66746** to connect with a trained crisis counselor. Additional information on the Disaster Distress Helpline is available in the link below:
 - <https://www.samhsa.gov/find-help/disaster-distress-helpline>
- **National Child Traumatic Stress Network** – Additional information on children and trauma is available through the National Child Traumatic Stress Network, which is a federally sponsored network focused on trauma-informed care in multiple settings. The website for this network and a link to a resource for parents and caregivers focused specifically on COVID-19 is below:
 - General Website: <https://www.nctsn.org/>
 - Parent/Caregiver Guide: <https://www.nctsn.org/resources/parent-caregiver-guide-to-helping-families-cope-with-the-coronavirus-disease-2019>

FUNDING and ALLOWABLE COSTS

OCS is working to distribute CARES Act supplemental funds as expeditiously as possible. Additional guidance specific to CARES Act supplemental funds will follow this funding release. In the interim, CSBG grantees should place an immediate priority on re-programming existing resources to meet the highest priority needs. Within existing allocations, state CSBG funding may be used to support emergency response that is consistent with statutorily allowable activities. State CSBG-designated organizations are not required to request a federal waiver to utilize their existing CSBG funding to support disaster response and assistance to eligible low-income individuals and families. Provided there is no change to the proportionate share of CSBG funds allocated to eligible entities, states are not required to submit plan amendments to OCS for changes to local Community Action Plans.

TECHNICAL ASSISTANCE CONSULTATION

CSBG program staff at the Division of Community Assistance (DCA), as well as CSBG national partners, will be available to states for training and technical assistance or questions regarding administrative flexibility and waiver requests, if needed. If agencies encounter other barriers to responding to low income individuals and families, aside from those included in this IM, please contact program specialists to arrange for consultation calls with OCS leadership to resolve those barriers.

For consultations, state officials should contact their CSBG analyst, found here:

<https://www.acf.hhs.gov/ocs/resource/csbg-staff-assignments-by-region>

Please feel empowered to reach out to your assigned program specialist so that we may assist you to meet our shared interest in a strong emergency response and recovery effort.

OTHER PENDING GUIDANCE

On March 12, 2020, the Division of Community Assistance (DCA) released CSBG-DCL-2020-15 titled *Partnership to Address the Spread of COVID-19*. This DCL included batched COVID-19-related information on funding and guidance released by HHS divisions

OCS recognizes that CSBG grantees and stakeholders need additional guidance beyond the general guidance provided in CSBG-DCL-2020-15. On March 13, OCS convened a conference call with CSBG training and technical assistance (T/TA) providers, including the National Community Action Partnership (CAP), Community Action Legal (CAPLAW) and National Association for State Community State Programs (NASCS). The purpose of the call was to ensure that OCS has a complete understanding of the mitigating factors affecting the administration of CSBG at the state and local level. This practice will continue on a regular basis to ensure OCS remains current on impact the COVID-19 situation is having on our grantees and stakeholders. We will use this information to help inform additional guidance as well as critical items to advocate for on behalf of the individuals and families and communities we serve.

Thank you for your attention and OCS looks forward to continuing to provide high quality services to OCS grantees.

/s/

Clarence H. Carter
Acting Director
Office of Community Services

/s/

J. Janelle George
Acting Deputy Director
Office of Community Services