

Provider & Stakeholder Questions and Answers (Q&A)

Updated: 2020-09-28 | SUBJECT TO CHANGE

Youth Residential Facilities	Bobby Benson: Is your agency required to report to the media if you have positive cases? Or does DOH inform the media	Answered by Jen Cabe at Bobby Benson Center: We are required to report positive cases to CAMHD (Child & Adolescent Mental Health Division - Department of Health), but not the media.
Youth Residential Facilities	What is your outreach for ESL children and conveying the message of safety?	Per Carla Houser at RYSE, the RYSE outreach team hires young people who look like the youth we serve, and who have some of similar experiences. RYSE is looking to build a peer outreach team of COFRA migrant youth, and this is a part of the guide on the side process with the Youth Homeless Demonstration Project. We also have the mobile crisis outreach which will be coming online in partnership with HHRC, Hale Kipa, Waikiki Health, and Alea Bridge. The focus is to be as safe as possible while still targeting our most vulnerable youth, being able to distribute PPE to youth and information on how to be safe from a harm reduction standpoint and making sure that we have adequate resources. We have multiple postings in multiple languages posted in our shelter that COFRA migrant youth can read and understand. We will continue to build our staffing capacity so they're out there in the street communicating the message.
Youth Residential Facilities	Do you have resources available for youth who need technology services for TeleHealth services if they are out in the community? Cell phones or video capabilities.	There is some general guidance on telehealth on the BHHSURG website under the Providers & State Agencies tab, in the Resource Library . According to Carla Houser, RYSE has an informal process. For example, there was a youth who has a housing voucher, lives in her car, and has no working phone. To eliminate the communication barrier, they went to Walmart and purchased a prepaid phone for this youth to use. If there is a particular youth in need, please email info@rysehawaii.org if they need a phone for telehealth or telemedicine, RYSE has some funding for that.

Youth Residential Facilities	Will the quarantine sites via Hawaii Cares take a minor alone or do they need to be accompany by an adult (adult is negative)?	Answered by Leslie Slavin with the DOH Child & Adolescent Mental Health Division (CAMHD): My understanding is that only the Canoe house has been willing/able to take unaccompanied minors for quarantine, and the Canoe house currently is closed. We hope to solve the contracting issues and have it open soon.
Youth Residential Facilities	How are you defining "youth"? Do you mean minors under 18?	Answered by Leslie Slavin with DOH CAMHD: I think we are hoping to address some of the issues specific to minors, but we'll probably be discussing young adults (18-24) as well.
Youth Residential Facilities	What is CVR3?	Answered by Leslie Slavin with DOH CAMHD: CBR stands for Community Based Residential program. 3 - is a slightly lower level of care than CBR1 or CBR2 - which are specialized more secure facilities for youth with inappropriate sexual behavior. These are CAMHD names.
Youth Residential Facilities	How were you able to get so many test so quickly?	Carla Houser at RYSE responded, the game changer for homeless services providers has been Project Vision. On-site testing is now done the first Monday of every month for all the programs at Kawaiiloa by Project Vision.
Youth Residential Facilities	What is your process for releasing a youth from say BB to a transitional family home program?	<p>Ford Naeata and Jennifer Cabe from Bobby Benson Center explained, since the pandemic started, we've transitioned close to a dozen youth, but most have returned home. As our day-to-day operations require the constant follow up from a nurse and our medical director before any youth are released or discharged from the center, they go through a clearance with the nurse. This is not a test this is for symptoms which are followed up with the nurse or medical director to make sure the youth is symptom free before going home. With any discharged from Bobby Benson Center, it's always careful thought out, laid out plan and there is a transitional discharge plan that's worked out with the youth, the family, and team.</p> <p>Per Joshua Holmes, DOH and CDC does not recommend a test base isolation clearance strategy. An individual does not need to test negative to be released from isolation, it's based off of time, at least 10 days and overall symptom improvement and no fever. For more information, please refer to the webinar recording on 08/31/2020 on the BHHSURG website.</p>

<p>Youth Residential Facilities</p>	<p>Has there been a shift in advice/response from the CARES line over the past several months? It sounds as though Bobby Benson called for help with testing their residents and staff and got turned away... Is this likely to happen again to another youth program?</p>	<p>The change was effective 08/10/2020, the Behavioral Health Administration (BHA) assumed oversight of isolation and quarantine for the island of Oahu, which was previously overseen by a different division/office. It made sense for the BHA to begin working on this since a lot of the people unable to isolate are those that live in congregate living situations and may have different behavioral health needs. The BHA, along with the Governor’s Office on Homelessness, the Department of Human Services, City & County of Honolulu, UH, HHHRC, and IHS have been working on the Temporary Quarantine and Isolation Center (TQIC) since Spring, so please submit requests through the CARES line if you have a positive and have questions regarding isolation/quarantine, or need testing. Providers are also encouraged to reach out to Project Vision for assistance with mobile testing if that’s needed.</p> <p>The 24-hour Hawaii CARES Line number is (808) 832-3100 on Oahu or (800) 753-6879 on the neighbor islands.</p>
<p>Other</p>	<p>Do you suggest testing for staff monthly?</p>	<p>It depends on each program. As we move forward, surveillance of tighter sites is important, sites with a lot of staff or a lot of movement in and out of the facility, definitely places that have had previous positives it would be good to have monthly testing. Project Vision has does monthly testing with sites.</p>
<p>Other</p>	<p>Tell us about your upcoming YHDP programs - esp. the youth crisis response. How may it look different during and after (yes there will be after!) COVID?</p>	<p>Carla Houser responded, RYSE goes through the coordinated entry system with all of the youth service providers on Oahu. There are a number of young people that our continuum has identified as youth that are very high acuity, severe mental illness, on the high end of substance use disorder, who are not coming in to shelter. Those are some of our most vulnerable and what we’d like to do with our crisis mobile response is target some of those youth, find stabilization beds, connect them to behavioral health and medical services, and start to get them to a place where they can be more receptive to other services. We’ve partnered with a number of different agencies for the YHDP, it’s HUD funding that has come to our continuum of care. Providing supportive services through</p>

		<p>long-term case management, mentorships, and diversion programs for youth coming out of institutions and give them a landing place so they are no longer unsheltered homeless. A number of different housing resources will also come online, transition housing, rapid rehousing, and also Oahu's first permanent supportive housing for youth specifically with CCF coverage.</p> <p>For more information on YHDP, visit the Partners in Care website at www.partnersincareoahu.org.</p>
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