**TAASA UPDATE 3/30/2020**

**Contract SANE - Essential Personnel:**

TAASA’s policy team received information about hospitals not allowing contract SANEs in to conduct exams. This occurred after the state disaster declaration from Governor Abbott. TAASA took action. We notified the Governor’s office of the problem and offered to be of assistance in finding a solution.  They responded that they were aware and working on it. We then contacted the Hospital Association to discuss and they assured us that SANE contractors were included in [the guidance by HHSC provided on March 19th](http://taasa.org/wp-content/uploads/2020/03/HHSC-guidance.pdf).   As a result of our conversations, we’ve been told HHSC is amending the guidance to explicitly include SANE’s!  We’ll keep you all posted.

Could you all let us know if this has been a problem in your area? Please submit your information [here.](https://forms.gle/cNGrsgMbZPFjuxkr6)

**SANE Update:**

**GL 20-2007-A-2 COVID-19 Prohibition of Nonessential Visitors in Hospitals and Access Requirements of Essential Visitors**

Notice: GL 20-2007-A-2 has been amended and provides guidance to Texas hospitals (general, special, and private psychiatric) regarding the prohibition of nonessential visitors because of the significant health and safety risk to patients posed by COVID-19. The letter also provides regulatory requirements to allow essential visitors access to fulfill their official duties.

Hospitals must permit essential visitors access to fulfill their official duties. Essential visitors include government personnel performing their official duty; a person providing a survivor of sexual assault with services required by Health and Safety Code Chapter 323; a single designated caregiver acting on the patient’s behalf; a parent of a minor who is a patient; an attorney or other legally authorized representative of a patient; no more than one family member of a patient at a time; a clergy member authorized by the hospital; and additional family members of a patient at the end of life or presenting at the emergency department, subject to the hospital’s policies and procedures.

Hospitals should prohibit from entering the facility any essential visitors who have:

* Fever or signs or symptoms of a respiratory infection, such as cough, shortness of breath, or sore throat;
* Contact in the last 14 days with someone who has a confirmed diagnosis of COVID-19, is under investigation for COVID-19, or is ill with respiratory illness; or
* Traveled within the previous 14 days to a country with sustained community transmission. For updated information on affected countries visit: [https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html](https://nam03.safelinks.protection.outlook.com/?url=https%3A%2F%2Flnks.gd%2Fl%2FeyJhbGciOiJIUzI1NiJ9.eyJidWxsZXRpbl9saW5rX2lkIjoxMDEsInVyaSI6ImJwMjpjbGljayIsImJ1bGxldGluX2lkIjoiMjAyMDAzMjguMTk0MzU3MzEiLCJ1cmwiOiJodHRwczovL3d3dy5jZGMuZ292L2Nvcm9uYXZpcnVzLzIwMTktbmNvdi90cmF2ZWxlcnMvaW5kZXguaHRtbCJ9.5dqSzvYHxhXBUtLiJ-Y86TZykusKyHhpVtyge6zU-40%2Fbr%2F76758020899-l&data=01%7C01%7Cjbanda%40tha.org%7Ce1bb5a4ad6b441a49cf008d7d2c1e6aa%7C1c75d81fca014c1fb7280c88f438a0a8%7C0&sdata=muu9k6lwisu9SjY5Fxh5vintkoSVLF0U2bYYqRYI0DM%3D&reserved=0)

Please read the letter at the link below and if you have questions, contact [HCQ\_PRT@hhsc.state.tx.us](mailto:HCQ_PRT@hhsc.state.tx.us).

<https://hhs.texas.gov/doing-business-hhs/provider-portals/health-care-facilities-regulation>

**NEED YOUR ASSISTANCE:**

As we navigate advocacy at the state and federal level during this time of crisis, it is our goal to ensure the information we disseminate is sourced by the local program staff to allow us to convey the reality on the ground. In order to obtain this information, TAASA will be requesting information from you and your staff in the following ways:

1. Emails/surveys from the policy team as we craft TAASA’s legislative agenda
2. Emails from our CEO or TAASA’s program support team to ensure TAASA maintains the pulse of the movement and barriers, etc.
3. Emails from TAASA’s prevention team to discuss updates and guidance on prevention work as “shelter in place” orders continue
4. Please have your staff continue to send information to their TAASA contact regarding questions or barriers faced.

TAASA is fortunate to have the Evaluation and Learning Team to assist us in this effort! We developed a process of streamlining communication to efficiently collect and organize the data/inquiries received by staff. We then directly address them by utilizing that information in the following ways:

1. CEO utilizes information in real time on state and federal advocacy efforts (these are happening almost daily!)
2. TAASA staff addresses email requests by providing information and/or virtual T.A.
3. Other reasons mentioned above

**Legislative advocacy and changes to the appropriations landscape:**

The current crisis presents challenges to our daily work and business as usual. We are anticipating a hit to the budgeting process for our work. We do not have confirmation on this, just anticipating a potential legislative response to COVID-19 to increase public health, pandemic preparedness, and perhaps cut all others by a percentage.

Because of this, it is more important than ever to let us know if you all have seen an increase in services.  Numbers matter, data matters, and we want to begin that narrative with the Appropriations committee of high demand for services and any additional strains to current services as a result of COVID-19.  Please know this is simply us anticipating and scenario-building to preserve and protect the funding we fought so hard to increase last legislative session.

Please send us any data on increased demand for services, wait list, hospital accompaniment info, etc. by clicking [here.](https://forms.gle/cNGrsgMbZPFjuxkr6)

**Other updates:**

**Federal Legislation Passed – CARES Act**

The $2 trillion coronavirus relief bill was passed last night and is making its way to the President’s desk for signature.  Here are a few highlights that may be of interest to you:

**DV specific funding included in the final package**

* $45 million for the Family Violence Prevention and Services Act, with a match waiver
* $2 million for the National Domestic Violence Hotline

**The Good**

* Unemployment insurance provisions are expanded
* Serious investment in housing and homelessness including Emergency Solutions grants
* Direct payments to individuals - $1,200 for adults and $600 for children who filed taxes last year and meet the income requirements
* Small business loans that can help nonprofits in these challenging times with no exemption for non-profits under 500 employees who receive Medicaid
* Additional SNAP, Child Nutrition program, and Emergency food assistance program appropriations
* Funding for Legal Services Corporation
* Increase in Community Services Block Grant (CSBG) and Childcare Development Block Grant
* Additional Appropriations for Runaway and Homeless Youth

We had conversations with Cornyn’s staff to congratulate on the family violence provisions that were submitted and offered to provide data so sexual assault programming is not left out of the mix.