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**The Impact of COVID-19 on CHANGES Program Services**

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**Self-Help for the Elderly, Prime Contractor**

**Introduction**

CHANGES (Community Help and Awareness of Natural Gas and Electricity Services) is a CPUC program which the California Public Utilities Commission (CPUC) developed to address the needs of Limited English Proficient (LEP) consumers. The program provides outreach, education, needs assistance, and dispute resolution services to consumers in the language of their choice through a statewide network of Community Based Organizations (CBOs). The program is administered by Self-Help for the Elderly and Milestone Consulting LLC. This report describes the impact that the COVID-19 pandemic has had on CHANGES program operations.

**Immediate Response**

As Governor Newsom, California’s Mayors, and County Boards of Supervisors began to issue Stay-at-Home orders, all CHANGES CBOs closed their offices to the general public in compliance with health and safety concerns. CBOs began notifying program administrators of closures on March 10, 2020, and by the week of March 19, 2020, all CBOs had closed offices to walk-in traffic.

CHANGES CBOs offer a myriad of programs and services including health clinics, meal programs, food delivery services and food banks, and low-income or senior housing. Most CBOs shifted organizational priorities to address the immediate impact of the pandemic on their communities. This meant that services addressing basic needs such as food, health care and shelter have been the sole focus of several organizations. Some CHANGES CBOs temporarily shifted staff assignments to address those immediate needs and are leveraging those services to continue outreach and assistance related to telecommunications and energy needs.

CBO and program support such as training, technical assistance, coaching and ongoing communications immediately transitioned to remote communications. Administrative functions such as accounting, invoice and document review and data tracking continue remotely as well. In-person, on-site compliance monitoring has been delayed and will resume once visits can be conducted safely.

**Ongoing Service Delivery**

*Reliance on Technology for CBOs*

CHANGES CBOs vary in size and scope and have a wide range of staffing levels and other resources. Larger CBOs, typically serving more established communities, may have access to communications technology such as comprehensive telephone systems that enable them to forward incoming calls to individual staff members’ homes or cell phones, for example. They may also have internet and email systems that individuals can access remotely with ease.

Other CBOs, typically those that serve smaller or emerging immigrant communities, may not have access to more costly technology and are utilizing other creative ways to stay in touch with their communities. This includes direct one-to-one phone calls to existing clients and accessing the internet from home for clients while discussing information over the telephone. As of mid-May 2020, two all-CBO online meetings have been held and all CHANGES CBOs have been able to participate, although several CBOs had phone-only access.

*Challenges for LEP customers to access services*

Many Limited English Proficient (LEP) and low-income consumers have limited access and/or ability to utilize technology to seek CHANGES services. Many, especially seniors, lack the ability to participate in email communications or to electronically transmit documents such as utility bills or income verification. CBOs have developed various methods for receipt of necessary documents, including mail (which may extend the timeline for case resolution), photos of documents, and accessing bills online.

**Impact on CHANGES by Service Component**

The CHANGES Program offers several different service components, including Outreach, Consumer Education, Needs Assistance and Complaint Resolution. Some of those services have been temporarily ceased and others continue with modifications.

1. Outreach – Outreach messaging has been directed toward the impacts of the pandemic and the probability of increased consumers’ needs. CBOs have been provided sample messages they can translate into various languages and instructed on outreach methods that include ways in which consumers can seek assistance remotely.

The differerent outreach components have been impacted as follows:

* + - *Community Events* such as health fairs, ethnic holiday celebrations, and resource events have been cancelled.
		- *Media Outreach* is a preferred outreach method at this time and includes print, radio, and television. CBOs are trained on the development and placement of press releases as well as radio and television interview techniques. Most media outlets are able to conduct interviews remotely for radio and television. Media outreach is conducted in-language through various ethnic media outlets.
		- *Social Media* messaging has increased among CBOs. Posts are made on Facebook, Twitter and Instagram, as well as some platforms that target specific languages and/or ethnicities. Social media placements may be useful for reaching some segments of the CHANGES target population, although many consumers, particularly seniors, are not connected to such sites. Data limitations can also limit the reach of some social media outreach efforts.
		- *Community Presentations* are outreach activities that focus on informing other organizations about the availability of CHANGES services and encouraging referrals to the program. Some Coalitions, Task Forces and Collaboratives continue to meet remotely CBOs are encouraged to conduct outreach that updates organizations on how to place referrals remotely. For billing purposes, documentation of the provision of Community Presentations has been temporarily modified to allow for a printout of meeting attendees from the online meeting platform (such as Zoom) in lieu of a signed attendance sheet.
		- *Special Outreach Projects* will focus more on leveraging other services provided by CBOs in order to reach more consumers remotely. For example, CBOs offering food programs or Census outreach can combine efforts in order to limit the exposure of staff and clients.
1. Consumer Education – The provision of consumer education is likely the program component most impacted by the pandemic. Most consumer education is provided in an in-person, small group setting. Since public gatherings are unsafe and prohibited, consumer education is not being provided by most CBOs.
* The ability to provide consumer education in an online meeting format is also hindered by lack of access to technology and the knowledge and ability of consumers to utilize online meeting platforms. Further, billing documentation requires original signatures sheets that include the signature and phone number of each participant. Although it is conceivable that a similar documentation process, such as a printout described for Community Presentation above might be feasible for accounting purposes, the lack of technological ease makes this unlikely for most consumers.

The impact of quarantine on consumer education delivery is illustrated in the chart below:

1. Needs Assistance and Dispute Resolution Services – As described above, CHANGES CBOs have developed procedures to communicate remotely with their communities and continue to provide services despite limitations to their ability to meet with clients in-person. The impact of quarantine on case resolution services is illustrated in the chart below:

CBOs receive continuous updates to programs and policies impacting their communities. Information provided to CBOs includes:

* Updates on contacting IOUs, including any modifications to the IOUs’ CHANGES dedicated phone lines, and escalation contacts.
* Moratoriums on disconnections for nonpayment of bills.
* IOU pledges to enter into more flexible payment plans.
* Delay of recertification processes for the CARE/FERA and California LifeLine programs.
* Suspension of the requirement for a doctor’s signature/referral for Medical Baseline. This is a particularly helpful modification, which will enable more eligible people to enroll in medical baseline. Some communities find it difficult to obtain doctor’s signatures because they are unable to afford physicians’ charges for office visits and completion of forms.
* Early bill credits of the California Climate Credit to appear on customer bills.
* Suspension of wireless data caps and overage charges (TEAM program).
* Programs with limited budget allocations, such as LI-HEAP
* Pauses in penalties for high energy usage for tiered-rate consumers who exceed 400% of their baseline allocation. The suspension of penalty charges for high energy usage is helpful. However, it is unclear whether modifications have been made to policies that threaten a consumer’s access to CARE discounts when they exceed 400% of baseline allocation.

**Issues Raised by CBOs for further focus**

As quarantine continues, CHANGES CBOs and management have identified areas of current and future concern:

* Organizations that work in tele-health/telemedicine have reached out to us to describe issues related to telehealth access for California LifeLine consumers. While many health care providers have modified services to provide medical consultations and advice remotely, they describe difficulty for participants utilizing “LifeLine phones” because the phone plans do not provide adequate minutes or a 3G network needed to access remote health services.
* Consumers under quarantine will use significantly more energy, and utility balances will be higher. Although a moratorium on disconnections will keep energy in the home, concerns about high balances and the ability to pay them at a later date are looming. We are hopeful that mandatory policies that limit disconnections and extend payment plans post-quarantine will be approved.
* IOUs have pledged to enter into the most lenient payment plans possible during the pandemic. However, policies that require those plans to be extended and include maximum payment amounts and terms would be welcomed.