

FAMILY AND COMMUNITY SERVICES POLICY MEMORANDUM

FACSPM 20-01.5
Disaster Plan Update

Effective May 27, 2020

TO: All Child and Family Services Staff

FROM: Miren Unsworth



DATE: May 27, 2020

SUBJECT: COVID-19 Staff Protocol for Client Contact

Over the past months, we have seen our state and federal governments take unprecedented measures to mitigate the spread of the novel coronavirus (COVID-19). You are critical members of the Child and Family Services workforce and your health and safety are of the utmost importance. As you are aware, information regarding COVID-19 is changing rapidly and we are working closely with our state and federal partners, as well as local Health Districts, to obtain the most current information. It is now time to transition back to face to face contact with our clients and children in foster care. Planning for this return to in-person visits was developed with guidance from public health officials and information available from the Center for Disease Control (CDC). Our ability to continue providing these important visits for children and their parents will be dependent upon Idaho's ability to maintain the spread of the disease. We will continue to monitor developments from our state and local partners.

Beginning **May 16, 2020** social workers will begin seeing children on their caseload who are in foster care face-to-face. Video social worker/child contacts already completed for the month of May will be counted as completed contacts for the month of May. In addition, face-to-face, supervised parent-child visits will again be scheduled. This memo and supporting guidance documents address specific protocols regarding in-person FACS client contacts. We will be working over the next two weeks with regional leadership teams on plans to transition back to in-person foster care licensing visits. These plans will be developed with guidance from our public health officials and with the care and safety of all involved in mind.

All policy guidelines are to be followed with the exception of a situation where a child, parent, or resource provider has been exposed, shows symptoms or has been diagnosed with COVID-19 preventing the monthly in-person contacts with children placed in foster homes, birth parents, and foster parents. If this occurs, a supervisor may approve the use of Skype, FaceTime, or other video conferencing during face-to-face contact in order to ensure the continuity of service to our children and families. The use of the telephone to complete visits must be approved by a supervisor.

Except for the guidance addressed below, all Guidance Documents have been updated to include information previously included in Policy Memo 20-01. These guidance documents will assist in managing the safety of staff and the families we work with and serve while meeting state and federal rules related to child welfare. As case specific questions related to COVID-19 arise, please direct them to your direct supervisor, chief, or program manager. They will enlist the support of Central Office staff as needed to determine how to support you in your work.

In-Person Contact Guidance and Screening Questions

During all in-person contacts with clients or other stakeholders, whenever possible, please follow the CDC's guidance regarding social distancing of six (6) feet, frequent handwashing, and/or the use of hand sanitizing gel, and using a cloth face covering.

Prior to in-person contact with a client or stakeholder, staff should complete the screening questions for all household member:

- Have you, or any member of your family, been exposed to someone who has a confirmed case of COVID-19?
- Are you or anyone in your household being tested for COVID-19?
- Do you have any of the following symptoms as listed by the CDC? Symptoms may appear **2-14 days after exposure to the virus**. People with these symptoms or combinations of symptoms may have COVID-19:
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea

Guidance Related to all Voluntary and Extended Home Visit Case Management Cases

- For cases where children or youth are on an extended home visit or protective supervision with parents, or there is a voluntary case with a safety plan in place, the worker must continue to assess the safety of the children via face-to-face contacts, utilizing the guidance above related to questions to ask prior to conducting the visit and social distancing steps.
- For all cases with a formal or informal safety plan, the worker will contact the safety monitor on a weekly basis, at a minimum, to confirm their continued ability to serve as a monitor.
- Staff will conduct visits with parents/caretakers by video conferencing as available or by phone to discuss the wellbeing of children in their care, ongoing case planning and to assess for the needs of the parents/caretakers.
- The social worker will ensure that age appropriate children, parents, relative/kinship

providers, and safety monitors have their and their supervisors contact information as well as the number for Centralized Intake.

Guidance related to Unsupervised Parent/Child and Relative Visits

- All unsupervised parent/child visits or visits with relatives will be negotiated between the department, foster family, and biological parents. This negotiation must include the questions identified above to screen all participants for COVID-19. Prior to the negotiated unsupervised visit, the assigned social worker must staff the decision with a supervisor.
- If any of the answers to those questions are yes for any participant, then the unsupervised visit must be completed via video conferencing. If the participants cannot negotiate the unsupervised visit, or if the department assesses that any of the participants cannot follow the emergency declaration requirement for social distancing, a supervisor or chief should be included to make final decisions regarding the unsupervised visit.
- If video conferencing is unavailable, the social worker should work with their supervisor to explore other options to facilitate video visits and, as a last resort, must obtain supervisor approval for a phone visit between the parent and child.
- All visits that are not conducted face-to-face must be well documented in ESPI under the monthly visit narrative. Since ESPI does not have the option of “video” when identifying the method of the contact, please select “telephone” as the method and at the beginning of the narrative identify that it was by video (Skype/FaceTime/other video conferencing).
- Please follow the Guidance for Social Worker Contacts and Parent/Child Visits During COVID-19.

Guidance Related to the Licensing of Foster Homes

- PRIDE pre-service training is currently being offered via Zoom video conferencing. Potential resource parents who are unable or do not have the technology to participate will need to complete in-person training which will be provided as allowed by the Public Health Department recommendations and the Governor’s Stay at Home Order.
- Specific Guidance for contact with potential and existing resource families is now located in the following guidance document: **Guidance for Resource Family Contacts, Foster Care Licensing, ICPC and Respite Placements During COVID-19**

Guidance Related to Conducting a Comprehensive Safety Assessment

- All intakes accepted for assignment must have a comprehensive safety assessment completed.
- Specific Guidance for ensuring child safety, managing exposure, and documenting contacts is now located in the following guidance document: **Guidance for Conducting Comprehensive Safety Assessments During COVID-19**

Guidance Related to Medical and Dental Appointments

- Children in foster care must continue to have their medical, dental, developmental, and mental health needs addressed.
- Specific Guidance for assessing and addressing children well-being and documenting appointments is now located in the following guidance document: **Guidance for Meeting a Child/Youth's Well-Being During COVID-19**

The additional guidance documents below are provided as a supplement to this policy. These guidance documents are effective immediately and will remain until FACS Policy Memo 20-01 is no longer in effect.

Guidance Documents

- [Guidance for Social Worker Contacts and Parent/Child Visits During COVID-19](#)
- [Guidance for Meeting a Child/Youth's Well-Being During COVID-19](#)
- [Guidance for Resource Family Contacts, Foster Care Licensing, ICPC and Respite Placements During COVID-19](#)
- [Guidance for Conducting Comprehensive Safety Assessment During COVID-19](#)