FAMILY INTERACTION GUIDANCE IN RESPONSE TO COVID-19 FOR CHILDREN IN FOSTER CARE

April 8, 2020

The following guidance is based on the most current Iowa Department of Public Health (IDPH) guidance. The health and safety of children, family, staff and administrators are of the utmost importance. This guidance is not intended to address every potential scenario that may arise as this event evolves.

Keep open lines of communication at all levels daily within your organizations. Open communication decreases anxiety for workers as well as families. It is important that child welfare service contractors and referring Iowa Department of Human Services (DHS) workers maintain constant communication with one another.

NOTICE

If you have a fever of 100.4 or above, or an emerging cough, you must stay home, contact your supervisor, and contact your healthcare provider. Inform your healthcare provider that you are essential workforce working with vulnerable individuals. Please indicate you work for the Department of Human Services, request a COVID-19 test processed by the State Hygienic Laboratory and report this information to your supervisor. If you are denied a test, report this information to your supervisor.

FAMILY INTERACTIONS

The Iowa Department of Human Services (DHS) is committed to protecting and ensuring the health and safety of the children and youth in the child welfare system, the family and caregivers who support them, and the staff and providers who serve them.

In typical times, in-person family interaction is an essential activity to ensure children are connected to their family and to promote reunification. Though we know telephone communication and videoconferencing are not adequate substitutes to socializing with family members in person, our science-based understanding of how COVID-19 is transmitted is changing. As such, DHS has reconsidered our position that in-person interactions are in the best of interest of children and parents at this time.

Balancing the needs of children to see their parents in person is currently at odds with the need to practice social distancing to protect the overall health of the public. Effective immediately, DHS is required to re-evaluate each case and determine how to safely implement family meetings and visitation. DHS strongly encourages the use of video conferencing and telephone conferencing in place of in-person visits (Providers are encouraged to investigate and assure themselves that the video conferencing platform chosen is secure and addresses privacy concerns). Reach out to relative caregivers and foster parents to see what they need in order to use technology to maintain connection, help facilitate virtual visits/contact, etc.

As you work with families to transition to phone and video options, those families with exceptional circumstances, who wish to request an in-person family interaction, must contact their social
worker, who will escalate the request to leadership for approval. If an in-person family interaction or visitation occurs, personal protective equipment (PPE) such as a face mask, must be used. It is the responsibility of the family to supply and use their PPE. DHS will assist with this as we are able. We intend to work with the courts on expediting reunification efforts for children or youth currently engaged in extended home visits.

DHS will reevaluate this policy as the Centers for Disease Control and Prevention (CDC) and the Iowa Department of Public Health (IDPH) release new information and recommendations.

Child safety remains a top priority of the child welfare system, as does maintaining family connections. DHS is committed to resuming in-person contact as soon as is reasonably possible.

MANAGING HEALTH CONCERNS

Mitigation practices must begin for ALL individuals involved in family interaction, home visitation and other social work practices requiring in-person contact with families:

1. Implement common-sense practices for preventing disease spread, such as covering a cough, staying home when sick, and washing hands. The CDC recommends washing hands for at least 20 seconds.

2. If DHS has approved in-person family interaction, call in advance of conducting home visits or other in-person meetings (see screening questions below. These should be asked in advance).

3. During in-person meetings, do not sit within 6 feet of anyone in the home.

4. Avoid handling paperwork during the meeting.

5. Avoid touching your face or hair during the meeting.

6. Wash hands for at least 20 seconds with warm, soapy water or hand sanitizer before and after the meeting.

Workers should also answer the screening questions for themselves prior to making a home or in-person visit. If any of the answers are ‘yes,’ workers should contact their primary care provider, follow the primary care provider’s direction. Do not conduct any home visits to DHS children or families until cleared by their primary care provider. Workers should also notify their supervisor.

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CONTAINMENT DECISION-MAKING PROCESS

When preparing or scheduling appointments for family interaction visits, be sure to ask all parents, caregivers or family members the following questions:

Do you currently have any of the following?

- Fever
- Shortness of breath
- Cough
- Sore Throat

Have you had contact with anyone who has known or possible exposure to the COVID-19 in the last 14 days?

Are you on home quarantine or isolation due to possible contact with someone with possible or confirmed COVID-19 or due to travel?

Have you or anyone in the household recently discharged from a hospital due to confirmed COVID-19 or due to travel?

Pre-screening phone calls are required in advance of contact with the family members involved in a family visit.

If parents and caregivers answer ‘no’ during pre-screening for the above questions, then proceed with the family interaction.

If parents or caregivers answer ‘yes’ to the above questions:

▸ Do not conduct the family interaction.

▸ Direct the parent or caregiver to contact their healthcare provider. Tell them to call ahead before visiting the doctor. The healthcare provider will report this information as appropriate.

  • Advise the parent or caregiver to stay home, except to get medical care and to separate himself/herself from other people and animals.

  • Direct the parent or caregiver to avoid sharing personal household items and to clean high touch surfaces every day.

  • Suggest household members stay in another room or be separated from the family as much as possible.

  • Suggest the family limit non-essential visitors in the home.

▸ Assess and ensure child safety as well as maintain contact with the family by telephone or video conference.

ADDITIONAL CONSIDERATIONS

▸ If any of the participants who would be involved in a family interaction have flu-like symptoms, visits should be temporarily suspended until all participants have been symptom-free for at least three (3) days or are medically cleared to continue with visit.

▸ Provide hand sanitizer to all participants.

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All visits should be held outside, such as in a local park, if the weather is permitting.

Parents and children should be encouraged to maintain physical distance in an effort to promote physical health, although the age of the child must be considered in providing this guidance.

If a family interaction visit is approved, follow updated CDC guidance such as wearing masks.

GENERAL RESOURCES
The situation related to COVID-19 is changing rapidly, and all Iowans should closely monitor messaging from the Iowa Department of Public Health (IDPH) and the CDC for updated guidance:

COVID-19 DHS Resources
or Copy this link: https://dhs.iowa.gov/COVID19

Centers for Disease Control and Prevention
or Copy this link: https://www.cdc.gov/coronavirus/2019-ncov/index.html

Iowa Department of Public Health
or Copy this link: https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus

The guidance and temporary procedures outlined in this document will be in place until further notice. The information outlined in this document is further subject to change, due to the rapidly evolving situation related to COVID-19.

If you become aware of any confirmed or presumptively positive case, please notify the DHS referring worker.