Revised Guidance on In-Person Visitation for Resource Families

Planning In-Person Visits

Provide information to each participant about the steps that will be taken by child welfare staff, parents, children, and resource providers, and address any known concerns of the participants, before in-person visits. Discuss the importance of in-person visits for children with all participants. A signed visitation plan agreeing to adhering to safety measures is recommended prior to the in-person visit being scheduled. A sample visitation plan is attached. If child welfare staff makes the decision to suspend the in-person visitation, they should notify their attorney immediately.

Before scheduling the first in-person visit, child welfare staff should communicate with the parents, child(ren) (if age and developmentally appropriate), and resource providers for the children, to create a plan for in-person visitations, including:

- Considerations for the physical and emotional safety of all participating children, parents, resource providers, including considerations of the parents’ living arrangements, and the community’s welfare;
- Considerations for the physical and emotional safety of any adult participants deemed “high-risk” per CDC guidelines;
- Considerations for conforming with social distancing recommendations and additional measures aimed at protecting the health and safety of all participants; and,
- Considerations of and determinations about which participants are critical to successful parent-child visitations, in order to reduce unnecessary exposure to other, non-essential parties. This may not be the best time to physically introduce new people to children and families, if such introductions can be postponed.

As stated previously, there are some children and youth with underlying health conditions for whom continuing virtual visits remains in their best interest. In these cases, a consultation with a medical provider prior to resuming in-person visitation will be necessary.

Locations of In-Person Visits

The locations in which in-person visits occur should be clean, safe, and chosen to minimize exposure to others.

1. Outdoor locations
   - Encourage conducting visits outside or in other large open spaces whenever possible.
   - State and local authorities will decide whether parks and other recreational facilities will open. Check with the park in advance to be sure you know which areas and/or services are open, such as bathroom facilities, playgrounds and athletic fields, and bring what you need for the visitations with you.
   - The CDC recommends that playground equipment not be used as it can be challenging to keep surfaces clean and disinfected sufficiently.
   - Adult visit participants are expected to maintain appropriate physical distance (at least 6 feet at all times) and take additional steps to prevent COVID-19 as needed. This might make some open areas like trails and paths better to use than other park areas and spaces. Avoid crowded areas.
• Children are not expected to maintain physical distance when interacting with other children. When possible parents should engage in activities that minimize close physical proximity.
• Participants should stay at least 6 feet away from each other and from other people not in your group (“social distancing”), taking additional steps to prevent COVID-19 as needed. This might make some open areas like trails and paths better to use than other park areas and spaces. Avoid crowded areas.

2. Indoor locations
• Should be disinfected before and after visits.
• Should allow for social distancing of six (6) feet between all participants, including children, parents, resource providers, social workers, etc. Avoid crowded locations.

3. Visitation rooms
• Visitation rooms should be disinfected before and after each visit.
• Toys and items that cannot be easily cleaned and disinfected should be removed, including stuffed animals, toys, books, blankets and throw pillows.

Participants attending In-Person Visits

Staff:
1. Staff should contact parents and children’s resource providers to screen for exposure to COVID-19 the morning of the scheduled in-person visits. If the parent, caregiver, and/or child meet the CDC criteria and may have COVID-19, the scheduled in-person visit should be rescheduled to a virtual visit. A sample screening tool is attached to this guidance.

According to the Centers for Disease Control:

• Symptoms may appear 2-14 days after exposure to the virus. People with the following symptoms or combinations of symptoms may have COVID-19:
  o Cough
  o Shortness of breath or difficulty breathing
• Or at least two of these symptoms:
  o Fever
  o Chills
  o Repeated shaking with chills
  o Muscle pain
  o Headache
  o Sore throat
  o New loss of taste or smell.

2. All staff conducting or supporting in-person visits should wear a face covering if in a contained space, when cleaning visitation rooms and when interacting with children, parents, and resource providers/parents.

3. Staff should, upon receiving a text message from a parent waiting in a vehicle, verify that he/she has had no changes in his/her symptoms, according to the above symptoms’ checklist

4. Staff should escort parents and children to the visitation room(s).
5. Staff should maintain social distancing by and between themselves, resource providers/parents providing transportation, and parents at all times.

Parents:

1. Parents attending in-person visitations should arrive 15 minutes prior to the scheduled visit and they should wait in their vehicles.
2. Parents should text the visitation supervisors to let them know that they have arrived.
3. Parents should leave personal items that will not be needed for the visitation, in their vehicles, including jackets, purses, bags, and backpacks.
4. Parents will be escorted to the visitation room(s) by staff.
5. Parents will follow the CDC guidelines for handwashing and/or the use of hand sanitizing gel, upon arrival and before leaving the visit.
6. Parents should always wear a face covering while inside the building where a visitation occurs, unless there is a need to remove the face covering to address children’s fears. If parents do not have face coverings parents should consult with staff on how to obtain one.
7. Parents should avoid touching of faces and any non-sanitized surfaces.

Resource Providers/Parents:

1. Resource Providers/parents should provide transportation for children to and from in-person visits whenever safely possible and based on resource parents’ availability.
2. Resource Providers/parents transporting children should not enter the buildings. Resource Providers/parents should text staff who are supervising the visits and they should wait in their vehicles. Staff will escort the children inside the building.
3. Resource Providers/parents should be engaged by staff at a safe social distance of six (6) feet. This is an opportunity to share information, updates and build a relationship.

Child(ren):

1. Children need to be escorted by staff to enter and while inside the building where visitations occur.
2. Children should follow CDC guidelines for washing hands or use hand sanitizer upon arrival at the visit and prior to leaving.
3. Children should wear face coverings. Note that cloth or disposable face coverings should not be worn by children under the age of 2, or by an individual who is unable to remove their face covering on their own.
4. Children should only bring one (1) comfort item or toy that can be easily washed, some children may need to have additional items such as a change of clothing or diapering supplies.

Transportation for In-Person Visits

Resource Providers/parents should provide transportation for children to and from in-person visits whenever safely possible and based on resource parents’ availability. When this is not possible, the following applies to when transportation should be provided by staff:

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**Staff Transportation**

1. Staff and all children should wash hands or use hand sanitizing gel prior to entering the car.
2. Staff and children should wear face coverings while in a car together. Face coverings are not recommended for children under the age of two.
3. Staff should clean and disinfect the car before and after transporting a child(ren) to an in-person visitation.

**Social Distancing and other precautions:**

- To maintain a proper distance, passengers should refrain from sitting in the front of the vehicle.
- Drivers should limit occupancy to no more than two (2) passengers per vehicle. If all parties/riders live in the same household and the vehicle can accommodate all riders in the back seat(s), then more than two (2) passengers from the same household can ride in one vehicle. If not, then only one passenger per vehicle is permitted.
- All persons (drivers and passengers) are required to wear face coverings when providing or using any car or van transportation services. Face coverings are not recommended for children under the age of two.
- Drivers should wash or sanitize hands on a routine basis. At a minimum, this should be done after each ride.
- Drivers should avoid recirculating air through the cars’ ventilation systems during passenger transport. Drivers are strongly encouraged to open windows or allow passengers to lower the vehicle windows, according to CDC guidelines. [https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/rideshare-drivers-for-hire.html](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/rideshare-drivers-for-hire.html)

**Vehicles used for transportation**

All vehicles should be disinfected prior to and after each use, as follows:

- Vehicles should be wiped down including all hard, non-porous surfaces (hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles) with a disinfectant approved by the EPA. Guidance is available from the CDC - *Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes* [https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html](https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html)

- When time allows spray disinfectant should be sprayed and allowed to air dry. If a car is used for transporting anyone who begins to show the CDC identified symptoms of COVID-19 and/or is known to have COVID-19, immediately follow protocol developed by your agency. [https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html)

**Disinfecting Visit Rooms:**

1. Toys and items that cannot be easily cleaned should be removed from visitation rooms, including stuffed animals, dolls, toys, and books.
2. Toys that can be easily cleaned should be rotated after each visit to allow additional time to spray with disinfectant and left to air dry before the next use.

3. All visitation rooms should be disinfected before and after each visit. Time permitting, the spray should be left to dry. At a minimum, all hard surfaces and frequently touched surfaces should be wiped down using a disinfectant approved by the EPA. Guidance is available from the CDC -Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes

4. Safe use of disposable or cloth face coverings should occur. For any type of face covering, appropriate use and disposal are essential to ensure that they are effective and to avoid contamination. Self-contamination can occur by touching and reusing contaminated face coverings. Additional information and guidance from the CDC and World Health Organization (WHO) can be accessed via the following links: https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-covering.pdf