

To: DCYF Staff
From: Joseph E. Ribsam Jr, Director, Division for Children, Youth, & Families
Date: April 06, 2020
RE: Directive Regarding In-Person Child, Youth, and Family Contact During COVID-19 State of Emergency

Purpose

The purpose of this memo is to share the Division's position on in-person visits between parents, children, and siblings during the COVID-19 State of Emergency. The latest information regarding COVID-19 can be found at: <https://www.nh.gov/covid19/> and <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.

In an effort to reduce close contact and avoid exposure to the virus through in-person contact the Division is recommending that visits take place remotely to avoid increase community transmission.

We believe this step is necessary to do our part to help minimize burden on the medical system and protect the health and safety DCYF constituencies, including parents, children/youth in care, foster families, and providers. Because many children in out-of-home care reside with other children and caregivers who may have their own unique risks and medical complexities, the risk of exposure extends beyond the direct participants in a visit.

While under ordinary circumstances in-person visits are strongly encouraged, and in fact generally necessary, to ensure the well-being of children and promote familial bonds to support reunification, during the State of Emergency DCYF encourages the temporary suspension of in-person visits.

The safest method of visitation shall be presumed to be via video or telephonic conference. In all instances where an in-person visit does not occur, videoconferencing shall be the preferred method of conducting the visit. In all instances where in-person visitation is forestalled in favor of video or telephonic contact, increased frequency and duration of video and telephonic contact is strongly encouraged.

Limited Exceptions for Visits between Children Parents and Siblings

The following shall be considered determining whether a limited exception applies and in-person visits between children, parents, and siblings are recommend, and the Division supports continuation of in-person visits.

Step 1: Determine Whether an In-person Visit is Appropriate:

- Determine whether there are any unique circumstance that support in-person visits. Supervisors should consult with their Field Administrators before making this determination.
 - Circumstances may include:
 - Instances where all of the three conditions below are met:

- All parties agree to the visit. “All parties” include: 1) parents; 2) foster/relative caregivers; 3) parents of any other children in the placement setting; and 4) the children/youth themselves as appropriate; and
- All parties to the visit have been compliant with the terms of the “Stay at Home” order (<https://www.governor.nh.gov/news-media/emergency-orders/documents/emergency-order-17-1.pdf>); and
- No parties to the visit are screened as high risk utilizing the screening questions below;
 - Instances where substantial actual harm to a child’s mental health or emotional well-being is likely to occur and cannot be sufficiently mitigated by increased video or telephonic conferences; and
 - Other comparable circumstances.
- If the answer is no, the Division should assist the families in facilitating visits remotely.
- If the answer is yes, and it is determined that in-person visitation is appropriate, proceed to Step 2.

Step 2: Advise the Participants on the Proper Screening to Assess Risk of Exposure to Covid-19

- Ask participants to self-screen to determine risk of exposure prior to scheduling each visit, and again immediately prior to each visit, by asking if any participants have:
 1. Within the past 7 days has anyone involved in the visit had:
 - Fever;
 - respiratory illness, such as cough, sore throat, runny nose, or shortness of breath;
 - mild flu-like symptoms, such as fatigue, muscle aches, headache; or
 - New symptoms of loss of taste and smell
 - If yes, please explain
 2. Has anyone involved in the visit been asked to self-quarantine by a public health official, medical provider, or another individual/entity in the past 14 days?
 - If yes:
 - i. Please explain
 - ii. Which day of quarantine are you on?
 - iii. If the 14 days of quarantine have not passed, please reconfirm that no one in the household has any symptoms
 3. Has anyone involved in the visit traveled in the past 14 days by bus, plane, train, or cruise ship?
 - If yes, please explain
 4. Has anyone involved in the visit traveled in the past 14 days to a place with high levels of community transmission such as any international setting and certain domestic travel which as of the date of this directive includes New York, Connecticut, or New Jersey (please consult <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-in-the-us.html> for latest guidance)
 - If yes, please explain

- If the answer to any of the above is yes, the visit shall not occur absent approval of the Bureau Chief of Field Services, the Director of DCYF, or a Court Order specifically directing the visit despite the identified risks of infection.
- If the answer is no, proceed with facilitating the visit with the appropriate social distancing.

Step 3: Encourage Families to Establish Social Distancing Procedures for the Visit

- All visits should be structured with the appropriate social distancing as recommended by DPHS and the CDC, including:
 - Decreasing the number of individuals involved in the visit to only those necessary for the purpose of the visit, for example – visiting only with the parent and siblings and not other household members, family members, friends, etc.;
 - Decreasing the duration of the in-person visit;
 - Meeting outside whenever possible and ensure any outdoor furniture/surfaces to be touched are cleaned and disinfected.
 - If an outside visit is not possible, the location of the visit shall be thoroughly cleaned and disinfected.
 - Cleaning and disinfection must be completed consistent with the following CDC guidance: (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>);
 - Utilizing cloth masks (or, if available and no longer scarce, medical masks) for all participants
 - Cloth face covering should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance
 - Guidance on the use and construction of masks can be found on the CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>;
 - Minimizing contact with surfaces and personal items by standing, not touching surfaces, and not bringing unnecessary items into visits;
 - Maintaining at least 6 feet of personal space as much as feasible;
 - Avoiding sharing of items;
 - Refraining from touching your face;
 - Washing hands and using hand sanitizer immediately after a visit;
 - Wiping any items used during the visit with disinfectant wipes/solution immediately after the visit.
- Children, youth, and families should be advised of the social distancing precautions prior to the visit.
- In an exceptional circumstance where an in-person visit is approved despite an affirmative answer to any screening question, the Field Administrator shall consult with DPHS for guidance regarding the visit.

Required Documentation

The Division's recommendations regarding visits during the State of Emergency shall be documented in Bridges and include the factors considered.

Questions

Questions regarding alternative procedures for visits should be directed through your supervisor.