Guidelines for Supervising In-Person Visitation During COVID Pandemic

PRE-SCREENING

No more than 24 hours in advance of any scheduled supervised visit, the staff member should contact the biological parent(s) *and* the resource parent and ask the following questions:

- 1. Has anyone in your home tested positive for COVID-19 in the past 14 days?
- 2. In the past 14 days have you, your children, and/or anyone in your household had any of the following symptoms?
 - Fever
 - Cough
 - Shortness of breath
- 3. Have you, your children, and/or anyone in your household had close contact with a person who tested positive for COVID-19 with a laboratory confirmed testing in the last 14 days?

If the answer to any of these questions is "Yes", the face to face supervised visit should be canceled and conducted virtually (telephone or videoconference) if appropriate. The person reporting the symptoms should also be strongly encouraged to immediately contact their healthcare provider for medical consultation and the case-carrying social worker should be informed via telephone and/or email that the visit has been cancelled.

PRIOR TO THE VISIT

The visitation area in which the visit is to be conducted should be thoroughly cleaned with an antiviral disinfectant. To the extent possible, visitations should occur outside and in areas where individuals can exercise social distancing guidelines (minimum distance of six feet).

Upon arrival for the visit, the visitation monitor will confirm with the parents and caregivers that none of the above symptoms above have arisen for anyone since the pre-screening. If so, the visit should be cancelled and conducted virtually (telephone or videoconference) instead. Ideally, all participants would be screened for temperature prior to the visit. If any person has a temperature above 100° Fahrenheit, the visit should be cancelled and conducted virtually (telephone or videoconference) instead.

All participants, including the visitation monitor, should thoroughly wash their hands with soap and water or hand sanitizer prior to the visit. Visitation participants should be reminded of social distancing guidelines and encouraged to avoid touching their face or anyone else's face during the visit (to the extent that is developmentally appropriate and which does not interfere with parent/child bonding, breastfeeding, and/or is necessary for the parent to express emotional support for the child).

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DURING THE VISIT

All participants in the visit, including the visitation monitor, should be wearing face coverings (as developmentally appropriate). Participants who do not have their own face coverings should be offered a disposable mask. Participants should be encouraged to exercise social distancing to the extent that is developmentally appropriate and which does not interfere with parent/child bonding, breastfeeding, and/or is necessary for the parent to express emotional support for the child.

During the visit, any diaper changes should be done with gloves when possible and thorough hand washing for a minimum of 20 seconds. All visits to the restroom should include thorough hand washing for a minimum of 20 seconds. Participants should be encouraged to cover their nose and mouth with a tissue when they cough or sneeze; and throw the tissue away immediately after use. Encourage participants to try and not touch their eyes, nose, or mouth. While it may seem simple, germs often spread this way.

POST- VISIT

The visitation area in which the visit occurred should be thoroughly cleaned with an antiviral disinfectant. If appropriate, parent(s) and child(ren) should be encouraged to assist with this task. All participants in the visit, including the visitation monitor, should thoroughly wash their hands with soap and water or hand sanitizer at the conclusion of the visit.

The department recommends that all participants (children, parents, etc.) and caregivers continue to vigilantly practice universal precautions between visits by promoting frequent handwashing and cleaning of high touch areas in the home.

Should anyone who attended the visit develop symptoms within 14 days following the visit or be diagnosed with COVID-19, this information should be elevated to the social worker immediately so all parties who were present at the visit can be notified.