

From: **Williams, Edwina** <edwina.williams@dss.virginia.gov>
Date: Mon, May 11, 2020 at 6:54 PM
Subject: LCPA Frequently Asked Questions COVID-19
To: <DSS_LICENSING@listserv.cov.virginia.gov>

The attached file is being sent to child placing agencies from the Virginia Department of Social Services Email Distribution Service.

*****Please do not reply to this email.*****

To unsubscribe from the DSS_LICENSING list, click the following link:
https://listserv.cov.virginia.gov/scripts/wa.exe?SUBED1=DSS_LICENSING&A=1

SCROLL DOWN TO VIEW ATTACHMENT

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
DIVISION OF LICENSING PROGRAMS
COVID-19 FREQUENTLY ASKED QUESTIONS: LICENSED CHILD-PLACING AGENCIES
MAY 11, 2020

The Virginia Department of Social Services, Division of Licensing Programs, would like to thank child-placing agencies for their cooperation and commitment to the safety of children, families, and staff during this pandemic. It is important that providers stay well-informed of updated COVID-19 information and recommendations from the [Virginia Department of Health](#) (VDH) and [Centers for Disease Control and Prevention](#) (CDC).

This information is provided for operation of licensed child-placing agencies based on current recommendations from the VDH and CDC.

A. Mental Health

What resources can a licensee provide children and families during this health crisis to minimize the disruption COVID-19 has caused?

- Adapting to the consequences of COVID-19 requires changes in daily life, family structure, and routines. Families adapt by being creative, informed, and flexible toward meeting their needs and responsibilities. Change is all too familiar to children in foster care and can often be an impediment toward achieving permanency. Foster parents can implement the core competence of permanence to help children feel supported and safe. Another core competency available to foster parents is maintaining a home and community environment that promotes the foster child's sense of safety and well-being. Agency staff can empower foster parents to draw upon core competencies to aid all family members navigate this difficult time.
- Agency staff should make sure families and children in their care are aware of preventative and management tools provided through the [Centers for Disease and Prevention Control](#) (CDC) and [Virginia Department of Health](#) (VDH). The CDC provides [Daily Life and Coping](#) resources for children and families, including coping skills, managing stress, and protecting households. Resources and supports available through [VDH](#) equip families and children to better manage during this pandemic.
- Websites aimed at assisting in children's understanding of COVID-19 include:

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-climate-safety-and-crisis/health-crisis-resources/helping-children-cope-with-changes-resulting-from-covid-19>

<https://www.npr.org/sections/goatsandsoda/2020/02/28/809580453/just-for-kids-a-comic-exploring-the-new-coronavirus>

<https://www.npr.org/sections/goatsandsoda/2020/04/19/831759209/bad-bunny-and-bobi-wine-are-among-the-global-artists-singing-about-coronavirus>

<https://www.mentalhealthfirstaid.org/2020/04/tips-to-help-teens-cope-during-covid-19/>

B. COVID-19 Prevention

How can staff minimize their own risk of contracting COVID-19 while providing child-placing activities? What should staff do if exposed to a child, youth, or family member suspected of having COVID-19 or diagnosed with the virus?

- Governor Northam’s executive orders are intended to slow the community spread of COVID-19 and reduce exposure to the virus by limiting in-person gatherings and community activities, recommending social distancing, implementing frequent and appropriate hand washing, and wearing facemasks. Every member of the community, including staff providing social services, children and youth living in and playing in communities, and families needs to follow these preventative measures need to be followed by every member of the community. VDH has developed a list of [healthcare providers’ general questions](#) that convey to the needs of social workers. Staff can minimize risk of exposure to COVID-19 by understanding and screening for potential COVID-19 symptoms. Individuals are thought to be most infectious when they are [symptomatic](#), according to the CDC. The [Child Welfare League of America’s \(CWLA\) article, “Worker Safety & Health during COVID-19 Pandemic: Rights & Resources,”](#) may also be of assistance.

C. Monitoring and Supervision

How should agencies handle the required pre-placement and face-to-face monitoring visits with children, youth, and families during the COVID-19 crisis? Will DSS be flexible with agencies trying to balance meeting the requirements of the regulation with protecting the health of children, families and agency staff?

- The Division of Licensing Programs allows leniency among licensed child-placing agencies for meeting regulatory requirements. Based on the risk of further outbreaks, social distancing continues to be required. Unless a child’s treatment team has determined a child’s safety and health are at risk in their current placement, digital technology may be used in place of face-to-face visits during the course of the pandemic.
- The monthly caseworker visit requirement remains in place; however, such visits may be conducted by videoconferencing during this time. Although current federal requirements prohibit using videoconferencing in lieu of face-to-face visits, this leniency is allowed to protect the health and safety of all parties involved.
- Agency staff are required to initiate phone or video conference contact with children and families as often as necessary to monitor the safety and well-being of the child. Contacts made by phone and digital technology shall be documented in the child’s record as “attempted face-to-face” and the narrative should include reasons that the contact was not in person. Whether the contact is face-to-face or by phone/video, it is critical that documentation in the child’s record address the assessment of the child’s safety. The agency must have a plan of action

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
DIVISION OF LICENSING PROGRAMS
COVID-19 FREQUENTLY ASKED QUESTIONS: LICENSED CHILD-PLACING AGENCIES
MAY 11, 2020

should contact by video conference or phone raise a concern about the child's safety or well-being and the plan shall be included in the child's record.

- When a visit in the home is required, assess the home you are visiting in advance to identify factors that will put your health at risk (similar to assessing a home and neighborhood for safety from violence before you go out). When preparing or scheduling appointments for in-home visits, be sure to ask all clients, or applicable family members, the following three questions regarding each individual living in the home:
 1. Do you currently have symptoms of coronavirus (cough, fever of 100.4°F or higher, or shortness of breath)?
 2. Have you had direct personal contact with someone who has tested positive for the coronavirus?
 3. Have you been tested for the coronavirus?
- If the child, youth, or family members respond "Yes" to any of these questions, the child and family should be instructed to remain at home and immediately contact their medical professional or their local department of health. Instruct the impacted child and family to be assessed by a medical professional or local department of health at the following:
<https://www.vdh.virginia.gov/local-health-districts/>
- When responses to the above questions indicate that face-to-face contact with the child and family can move forward, staff shall consult with their supervisor to develop a plan to mitigate exposure for staff, the child, and family members. Implement face-to-face visits using recommendations and guidance from the VDH and CDC.
- Practices for all individuals involved in family interaction, home visitation, and other work requiring in-person contact with families should include:
 1. Utilize practices for preventing disease spread, such as covering a cough, staying home when sick, and regular hand washing;
 2. Call in advance of conducting home visits or other in-person meetings;
 3. During in-person meetings, do not sit within 6 feet of anyone in the home;
 4. Avoid handling paperwork and touching your face or hair during the meeting;
 5. Wash hands for at least 20 seconds with warm, soapy water or use hand sanitizer before and after the meeting.
- Agency staff should screen themselves prior to making a home or in-person visit. If staff answers "yes" to any of the screening questions, the agency worker should contact their primary care provider and follow the primary care provider's direction. When it is not safe to conduct face-to-face visits, implement alternate plans.
- Complete a pre-visit screening by phone or e-mail prior to in-person contact with a child or family. Staff at a minimum need to ask if anyone in the home tested positive for COVID-19, has been exposed to someone who has tested positive for COVID-19 in the last 14 days, or has had symptoms in the last 14 days. Should the screening reveal that a child or family member has been exposed to an individual with COVID-19 or is symptomatic, make alternative plans (other

**VIRGINIA DEPARTMENT OF SOCIAL SERVICES
DIVISION OF LICENSING PROGRAMS
COVID-19 FREQUENTLY ASKED QUESTIONS: LICENSED CHILD-PLACING AGENCIES
MAY 11, 2020**

than in-person) for contact. If the child's treatment team determines an in-person contact is necessary for the health and safety of the child, staff shall employ personal protection guidance from the CDC and VDH.

- Should the child's treatment team determine no imminent health and safety risks to the child exist, consider alternative plans to accomplish the goal of in-person contact. For the duration of the health crisis, digital technology may be used to accomplish monitoring and supervision of children in foster homes. Agencies shall provide their staff with training resources about using digital technology to accomplish monitoring and supervising responsibilities. The [CWLA](#) includes resources such as the following:

https://www.relias.com/topic/telemental-health?utm_source=marketo-em&utm_medium=email&utm_campaign=hhs_em_2020-04-15_telemental-health-1&mkt_tok=eyJpIjoiWXPJek16azBZVFEzTURSaCIsInQiOiIraXA2T1N1YnhKZGVIVEh5MmhjaEkrbnc1aGZROzJlOWxobW92ZnhZTyrWXRiSWZBeW96U1NOMG9Xam1welwvSWhcl2RRZ3hhNkxERkdncVwvYWZmZTI2K0hSZWhxTm5SXC91bnUzdVZ0T0hnVW9GTTdHaTNQMk1pUTdYcFV1NjVvYOUSifQ%3D%3D

D. Medical and Dental Services

What flexibility is allowed regarding the required timeframes for initial physicals and for completing routine medical and dental examinations if doctors and dentists are not seeing patients?

- Agencies should follow recommendations from the child's medical provider. If the provider does not recommend the child come in for an annual medical or dental examination at this time, the agency should document in the child's record any attempt to meet the intention of the regulation, including recommendations from the healthcare professional. This applies to medical and dental exams required when the child enters foster care.
- Agency staff should continue to coordinate care to meet emergent and urgent medical, dental, mental health, psychological and psychiatric needs of a child as required by the current regulation. Consider telehealth options that may meet the needs of the child at the direction of the healthcare provider. However, if the child requires emergency care, agency staff and foster parents shall locate a provider who can fulfill that child's needs.

E. Visitation

Is there any guidance available pertaining to visitation and continuing contacts with children in foster homes?

- When children are removed from their homes for safety and protection reasons, the primary goal becomes returning these children to their parent or parents as soon as appropriately possible. A major part of the effort to return children to their parents is allowing visitation while the child is in foster care. Agency staff should continue to support visitation and contacts with children. The Division of Licensing Programs offers leniency regarding the manner in which required contacts and visits are completed. Alternative plans, other than face-to-face visits and

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
DIVISION OF LICENSING PROGRAMS
COVID-19 FREQUENTLY ASKED QUESTIONS: LICENSED CHILD-PLACING AGENCIES
MAY 11, 2020

contacts, are acceptable, such as using video conferencing or FaceTime and meeting outdoors while implementing social distancing.

- Ensuring the continuation of reunification services despite any travel restrictions or quarantines requires creativity. Resources to address social isolation and implement social distancing with children in foster care include:

<https://healthychildren.org/English/family-life/family-dynamics/adoption-and-foster-care/Pages/Caring-for-Children-in-Foster-Care-During-COVID-19.aspx>

<https://www.childtrends.org/publications/resources-for-supporting-childrens-emotional-well-being-during-the-covid-19-pandemic>

<https://theconversation.com/for-children-in-foster-care-the-coronavirus-pandemic-could-be-extremely-destabilising-135190>

<https://www.themarshallproject.org/2020/03/24/coronavirus-leaves-foster-children-with-nowhere-to-go>

F. Training

Is digital technology permissible to provide training as required in the regulation for agency staff, foster parent applicants, and foster parents?

- Yes. The Division of Licensing Programs is providing leniency to agencies to meet the intention of established training requirements for staff, foster parent applicants, and foster parents. Digital technology empowers child-placing agencies to continue operations by using telework, video conferencing, and other nontraditional methods to meet programmatic missions and goals.

G. Additional Resources:

Virginia Department of Health:

<http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/>

Centers for Disease Control:

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Governor Northam's Declaration of State of Emergency:

<https://www.governor.virginia.gov/executive-actions/>

National Association of Social Workers:

<https://www.socialworkers.org/Practice/Infectious-Diseases/Coronavirus>

Prevent Child Abuse America, Tips for Parents, Children, and Others:

<https://preventchildabuse.org/coronavirus-resources/>

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
DIVISION OF LICENSING PROGRAMS
COVID-19 FREQUENTLY ASKED QUESTIONS: LICENSED CHILD-PLACING AGENCIES
MAY 11, 2020

National Traumatic Stress Network, Parent/Caregiver Guide:

<https://www.nctsn.org/resources/parent-caregiver-guide-to-helping-families-cope-with-the-coronavirus-disease-2019>

Virginia Department of Social Services: COVID-19 Update and Resources:

<https://www.dss.virginia.gov/geninfo/corona.cgi>

Mental Health First Aid:

<https://www.mentalhealthfirstaid.org/2020/04/how-to-manage-your-mental-health-when-feeling-stressed-during-covid-19/>