
DCF FSD Parent Child Contact Guidance for FSD Staff effective 4.20.20

During the Governor's "Stay Home, Stay Safe" order, there are important considerations and necessary steps when conducting screening and working with parents to voluntarily move from in-person PCC to remote PCC or agree to some other change to current PCC.

The most important thing to remember is that **ALL** Parent-Child Contact (PCC) is **court-ordered**. (Even when the court says that contact is "as agreed by DCF and parents," that is still a court order.)

While we have been focusing on a public health lens resulting from COVID, it is important to remember that parents have a choice about whether they are willing to have remote PCC or continue to have in-person PCC. This guidance provides instruction on how to safely manage PCC.

Please take the following steps when managing PCC:

When there is voluntary agreement by parent to TEMPORARILY modify PCC

(whether modification is from in-person to remote or some other change)

Parents should repeatedly be told that they can and should contact their attorneys to discuss voluntarily moving to temporary remote PCC or to agreeing to any other change to their current PCC. They should be provided with the opportunity to contact their attorneys before making an agreement.

A copy of the written agreement (please use [COVID 19 PCC Agreement](#) template provided on SharePoint site) temporarily modifying PCC, as agreed to between the parent and DCF, should be sent by the FSW via email to:

- The parent's attorney
- The parent
- The child's attorney
- The GAL
- The State's Attorney/Deputy State's Attorney and/or AAG (if case is post-TPR filing)

The body of the email should indicate: **"Attached is a written agreement between [bio parent], [foster parent], and DCF allowing for a temporary modification of parent-child contact from in-person contact to remote contact [or other modification, if applicable]. Please let me know if you have any concerns about these agreed upon, temporary**

changes.”

District staff are strongly urged to send the written agreement of voluntary modification BEFORE INSTITUTING THESE CHANGES. (Ensuring parents’ attorneys are on board from the start will cut down on emergency motions being filed by parents.)

Once voluntary agreements have been provided to all parties (see list above beginning with parent’s attorney), the FSW should forward that email to the DSA (if the case is still pre-TPR) or the AAG (if the case is post-TPR filing or if an agreement within the county has indicated that the AAG will receive all COVID-19 related PCC agreements) with an email indicating whether any party has disagreed with or objected to the new, temporary agreement to modify PCC.

No voluntary agreement by parent to modify PCC

If the parent does NOT agree, then PCC will need to continue being provided as it has been occurring (even in case where the court order is “by agreement between DCF and the parent”). Please see the protocol below for supporting face-to-face contact.

If there is an at-risk household member and no voluntary agreement by parent to modify

Please see [People at higher risk for COVID-19 complications](#) guidance available on the SharePoint site.

If DCF or someone else indicates that a participant [participant = parent(s), foster parent(s), family time facilitator/transporter, and child(ren)] indicates that s/he or someone in a participant’s household is in a high risk category, then FSD must:

- Consult with the Child Safety Manager and/or Dr. James Metz for clarification that continued in-person PCC creates specific risk of contagion to a participant or participant’s household member because that person is in a high-risk category if infected with COVID-19
- FSW creates an affidavit describing the reasons that in-person PCC must be suspended and replaced with remote PCC due to the high-risk individual’s chance of exposure and describes efforts to gain voluntary agreement
- Ask DSA (or AAG) to file Emergency Motion to Suspend In-Person PCC

If any participant answers yes to a screening question and no voluntary agreement by parent to modify current PCC

If one of the participants answers yes to the screening questions on the day a visit is scheduled, FSD must:

- Cancel PCC for that day (due to good cause/illness exception in statute)
- Create affidavit
- Ask DSA (or AAG) to file Emergency Motion immediately

If one of the participants answered yes to a screening question previously but now parent rescinds voluntary agreement:

- Consult with Child Safety Manager or Dr. Metz about previous yes to screening question and his advice about now having in-person PCC continue
- If CSM or Dr. Metz advises against restarting in-person PCC, follow steps above
- Contact DSA (or AAG) to file Emergency Motion immediately.

Protocol when PCC is face to face:

Step 1. Ask the foster parents, parent and child (if age appropriate, if not, ask the foster parent about the child) these Screening Questions before each in person family time:

To protect public health, we respectfully request that if you answer yes to any one of the following questions, we will gladly provide family time to you and your child remotely.

1. Have you been in close contact with a person who has COVID-19?
2. Have you felt unwell with respiratory symptoms in the last few days?
Cough, high temperature, shortness of breath, difficulty breathing?

If you have concerns about your health, phone your health care provider.

If someone answers **YES**:

1. They should be encouraged to contact their doctor and let them know about their symptoms and/or exposure.
2. Make alternate plans to have family time. Skype, FaceTime, huddle with your supervisor, and/or director/operations manager for additional family specific ideas.
3. Cancel face to face family time for that day (due to good cause/illness exception in statute)
4. Create affidavit
5. Ask DSA (or AAG) to file Emergency Motion immediately

Step 2. If all involved in the family time answer **NO** to all questions: Develop a plan for in person family time – consult with supervisor, director and operations manager as needed. Involve a CFS staff person to facilitate a meeting remotely with participants to plan – this will be an amended, abbreviated coordination service.

Planning & preparation for family time: logistical, health & safety considerations-

- A. Return to the Family Time Guidance Grid to determine what level of support is necessary for family time to be safe.
- B. CFS contracted staff are available to do pieces of the Family Time Coordination service, including grid work, family finding to determine other supports that could be in place and suggestions to move forward. They are also available to facilitate and participate in planning and preparation calls for in person family time. To refer for this planning help call the district's Child and Family Support Contract Program Coordinator.
- C. **Inform parents, foster parents and others that may be supporting family time that they are required to wear face masks during contact based on new guidance from Friday, April 3.** This includes all children over the age of 2. If someone has difficulty breathing or is incapable of removing the mask themselves, they should not be asked to wear one. Health Commissioner Mark Levine, MD, recommended that Vermonters wear cloth facial masks, or coverings, if they need to leave their homes for essential purposes. This advice is based on new data about how COVID-19 can spread before a person has any symptoms. Because people may have COVID-19 but no symptoms, wearing a face mask may help keep people from spreading the virus. Face coverings are not a substitute for physical distancing and other prevention measures. If someone does not have a face covering, provide them with one. If someone refuses to wear the face covering the family time will not occur and follow steps 2-5 above.
- D. Think through location safety from a public health perspective. If thinking about having it in a caregivers home assess whether or not parents/foster parents have been practicing hygiene and spread mitigation recommendations from VDH/CDC: social distancing, frequent hand washing, limiting community activities to the essential and limiting others coming into their home. Consider that the office may be the safest place for the family time to occur given that it is professionally cleaned regularly and has limited in person activity. **District staff are responsible to ensure district office space is disinfected (door handles, surfaces that are touched) in between each Family Time.** If family time is moving back to in person from remote, the office would be the safest environment. If it is already occurring in a different location review the safety of this location from a public health perspective. Is the weather conducive to the family time being outside?
- E. Think about how the location of family time can be made conducive to social distancing by limiting and/or the placement of furnishings. If it is outside, can observation be done from a safe distance or from the car?
- F. Think about age appropriate activities that can be done from a distance or ways to limit touching of surfaces: playing outside with a ball, batting around balloons, having only one person touch the pieces of a game or puzzle, parent brings activities in a box that only they handle, local ideas for trails to walk on, parallel coloring pages or books so they are doing the same activity but with some distance and disposable activities.

- G. Consider whether coaching or other support can be provided from an alternative location: from another space in the office if someone might need to enter the room quickly to intervene in person or from a remote location if safety allows for this.
- H. Inform parents, foster parents and others supporting family time that food and drinks are not to be brought to family time. Caregivers should make sure that the child/youth has had a snack or meal if needed before attending family time.
- I. Plan for the unexpected based on safety needs: what if a virtual connection is lost, what if a physical intervention is required to ensure the child’s safety?
- J. Develop a plan for an opportunity to check-in and reflect with participants after about how the family time went and make changes for next time.

Step 3: Before family time begins:

Have participants wash their hands with soap and warm water for 20 seconds and put on their mask before going into the space for the family time.

Step 4. After family time:

Have participants wash their hands as described above.

Have participants dispose of their used masks.

Clean toys/equipment that can’t be disposed of: Wipe down surfaces, doorknobs, light switches, toys, handrails, high-chairs, cribs, car seats (spray). Please use 10% bleach solution or use disinfecting wipes twice on all surfaces.

For More Information – Visit the Health Department’s website at:

www.heathvermont.gov/covid19. There you will find content from the Center for Disease Control updated in real time, so the page will reflect the latest information and guidance, in addition to Vermont-specific updates and resources. The CDC’s website is: www.cdc.gov/covid19.

See the [Outbreak Factsheet](#) on the SharePoint site from the National Child Traumatic Stress Network regarding how to help families manage and respond to their children about the pandemic.

See the [COVID-19 VDH mask guidance](#) available on the SharePoint site.

A. Community-based Essential Services (e.g., DCF)

Classification of Individual Wearing PPE	Respirator (e.g., N95)	Facemask	Eye Protection	Gloves	Gown / Coveralls	Cloth Face Covering
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						(Not PPE)
Essential workers						X
The general public						X
<p>Setting Notes: The role of non-PPE-based control measures, such as strategies to promote social distancing and implementation of remote or tele-appointments, play an important role in protecting essential workers and the persons they interact with. Vermont’s Department of Children and Families, Family Services Division, has determined that when in-person contact is necessary, clients will first be screened for signs/symptoms of illness, and hand hygiene measures and social distancing will be reinforced.</p>						
<p>Guidance relevant to this setting:</p> <ol style="list-style-type: none"> 1. CDC’s Guidance on How to Protect Yourself and Others 						