



HOME VISITING GUIDANCE FOR FAMILY SERVICES STAFF

As FSD gradually resumes in-person and home visiting work, it is important to follow this guidance to minimize the risk of spreading COVID-19. It was developed based on current recommendations from the [Centers for Disease Control and Prevention \(CDC\)](#) and [Vermont Department of Health \(VDH\)](#). All Vermonters should remain aware of the most recent guidance for [safely connecting with friends and family](#), [using cloth masks or coverings](#), and other [prevention tips](#) and ways to protect yourself.

This guidance is applicable to any of the following types of work: conducting child safety interventions (CSIs), face-to-face contact for open cases, home visits for the purposes of foster care licensing or district placement approvals, and any other situation that requires in-person or in-home visits.

Please note: This guidance does not provide information on when each type of in-person work will resume. The required safety precautions and procedures will be similar across roles and functions.

No one should be conducting in-person work if they:

- Tested positive or were clinically diagnosed positive for COVID-19 and have not recovered (as confirmed via a negative test),
- Were in close contact with someone who has COVID-19 in the last 14 days (unless tested on or after day 7 and confirmed negative), or
- Are displaying symptoms of COVID-19.

Identification of Risk

Staff should continually identify their own risk of transmitting infection and risk of complications if they become sick. Talk to your supervisor if you fall within the category of people at [higher risk of severe illness from COVID-19](#).

The CDC and VDH recommend making a list of people you have been in close contact with each day. FSD staff should maintain records of daily contacts that can be easily accessed if contact tracing becomes necessary. This is especially important while the division is resuming in-person and in-home services.

Pre-Visit Work

In most instances, families should be contacted prior to a home visit and asked about the following:

- Have they been in close contact with a person who has COVID-19 in the last 14 days?
- Have they experienced any symptoms consistent with COVID-19 in the last few days? *For example, have they had a cough, fever, shortness of breath, difficulty breathing, chills, muscle pain, headache, sore throat, or new loss of taste or smell?*

Home visits should not occur if someone in the home has a temperature of 100.4° F and higher.

If someone answers 'yes' to any of the questions:

- We should encourage them to contact their health care provider to be evaluated. If they do not have a health care provider, they can dial 2-1-1 to be referred to a clinic in their area.
- We should make alternate plans to accomplish the purpose of the contact. Video calls, a safety plan (if one is needed), or huddle with your supervisor or director are all options to determine how to move forward.

If the answers are 'no' to the screening questions, staff may enter the home or meet with individuals outside while taking the precautions outlined in the section below.

Additionally, we should identify all household members in the home and consider if any of them are at [higher risk of severe illness from COVID-19](#). If someone in the home is at higher risk, extra precautions may be taken for them. For example, they may self-isolate in a separate room, outside, or out of the home entirely during the visit. If a conversation needs to occur with them, this may be done using a combination of virtual and physically distant strategies.

If there are numerous people residing in the home and there are not safety concerns pertaining to household members, our visit should be scheduled for a time when the home is the least populated. Or, as stated above, household members may stay in another room or elsewhere during our visit.

Continued Use of Video Conferencing & Virtual Contact

In all areas of our work, it remains critical to frontload as much work as possible via virtual and electronic forums. Even when in-person contact is going to occur, visits should be relatively short and contained to the most pressing safety matters or identified needs. Subsequent conversations can occur via phone or video to gather additional information or follow-up.

Precautions for FSD Staff to Take When Conducting In-Person Work

- Monitor your own temperature before starting the workday or conducting in-person work.
- Sanitize frequently touched surfaces of your vehicle.
- Wash your hands with soap and water or use hand sanitizer before and after having contact with someone or being in a home.
- Wear a face mask or cloth face covering during the entire visit.
- Carry a few extra disposable face masks with you to offer to families if they do not have any.
- When possible, ask the screening questions outlined above in advance. If this is an unannounced home visit, knock on the door and step back to maintain a 6-foot distance while asking the screening questions.
- Keep a 6-foot distance from other people and adhere to physical distancing strategies.

- Limit the number of children and family members present. In-person contact should be reserved for the household members you need to see and speak to (i.e., the child, their siblings, a parent, or someone who needs to be interviewed).
- Meet with individuals outside (front yards, driveways, nearby parks, etc.) whenever possible.
- Avoid touching your eyes, nose, and mouth.
- Cover your coughs and sneezes with the inside of your elbow or a tissue.
- Avoid touching surfaces and objects within a family's home.
- Avoid contact with household pets.
- For any paperwork that may need to be signed by someone, keep a few clean and sanitized pens inside of a Ziplock bag – and a separate Ziplock bag to store the contaminated ones.
- Exit the home promptly if anyone is observed to be ill within the home.
- Hand wash or machine wash cloth face coverings at the end of each day the facial covering is used.

If Families Are Hesitant About In-Person Contact

If families are hesitant about having in-person contact with us or allowing someone from FSD into their homes because of COVID-19 or concerns of spreading germs, consider the following:

- Tell families we'll try to accommodate their concerns as much as possible. *Is there something specific we can do to alleviate their worries?*
- Reassure them of the safety precautions you have taken personally and professionally to keep yourself safe and healthy
- Inform them you are not sick and have taken your temperature before leaving the house
- Discuss how you will maintain physical distancing and offer options that would make them feel most comfortable while still accomplishing the purpose of the visit (i.e., maintaining at least a 6-foot distance, meeting outside, speaking through a screen or glass door or window)
- Aim to keep the in-person interaction brief and focused on the most pressing matters

If the visit pertains to a child safety intervention (CSI), the parent's fear of engaging with us must be weighed against considerations of the child's safety. See the *Planning the Child Safety Intervention* section on page 6 of [Policy 52](#).

Special Considerations for Foster Care Licensing & District Approvals

As much work as possible should continue to occur virtually. The information contained in this document along with the *COVID-19 RLSI Guidance on Foster Care Applications* remains applicable. When a licensing visit or district approval visit occurs, we should avoid touching surfaces and objects within the home. If we need confirmation of something functioning or working properly, we should ask the residents of the home to help us if they are able (i.e., turning on the hot water, opening windows, testing the smoke detector, showing us gun safes or water gates/locks). The visit should be a quick, task-specific, physical review of the facility supported by information gathered virtually in advance and after the onsite interaction.

Contact In Facilities Or Other Settings

If we are having in-person contact at a childcare, camp, hospital, residential treatment program, or other facility setting, there may be additional precautions or expectations in place. We will be respectful of their protocols and follow what is required; however, if challenges arise that create a barrier to observing and/or interviewing the child, the child safety manager should be consulted to problem solve.

Staff Safety Precautions While Working From Home or Offsite

During this time when most of us are working from home or offsite, our usual methods of taking precautions for our own safety may look slightly different or need to be adapted. For example, in/out boards in offices detailing where everyone is located and when they can be expected to return are likely not in use. Without being surrounded by our peers or supervisors after a difficult conversation or home visit, it may not be obvious that people are available to check in or support you.

District offices should be thinking about how to ensure staff safety precautions are being taken while everyone is working remotely. For instance:

- Is there agreement to maintain updated Outlook calendars detailing home visits, locations, and times? Are you using Safe Signal during home and field visits?
- Does someone know the hours you will be working, when you will be conducting an in-person response, and when you are expected back?
- Does your supervisor or a designated person know to check-in if you haven't reached out by a certain time?

Remember the following checklists and discuss how local protocols might need to be adapted while everyone is working at home:

- [Planning Checklist for Home and Field Visits \(Steps to Take Before You Leave\)](#)
- [Safety Checklist for Home and Field Visits \(Steps to Take as You Are Leaving, During the Visit, and After\)](#)

References for this Document

CENTERS FOR DISEASE CONTROL AND PREVENTION:

- <https://www.cdc.gov/coronavirus/2019-ncov/>
- <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>

VERMONT DEPARTMENT OF HEALTH:

- <https://www.healthvermont.gov/response/coronavirus-covid-19>
- <https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID-19-VDH-mask-guidance.pdf>
- https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID-19_What-to-do-if-you-are-a-close-contact-of-someone-with-COVID-19_final.pdf
- https://www.healthvermont.gov/sites/default/files/documents/pdf/Safely_Connect_with_Friends_and_Family_FINAL.pdf