We at the Department of Children and Families are committed to assuring that every child in Connecticut is free from abuse and neglect. As you all know, of the Seven Key Results we are achieving, our first result is to make sure children can "safely" remain with their families whenever possible. We take great pride in the fact that we do this very well.

Today, COVID-19, also known as the Coronavirus, presents a major challenge to our ability to provide optimal services to the children and families in the State of Connecticut. The purpose of this memorandum is to make sure you know that as committed as we are to our primary mission, we are just as committed to make sure our workforce is protected at all times.

As we continue to monitor the evolution of this major pandemic in our country, we realize we will need to make major adjustments to our child protection practice so that we are able to keep children safe and simultaneously keep our workforce safe. Of particular concern are those frontline workers charged with the responsibility of providing in-home services to families.

Our overall message to you is "we've got you."

The following guidance we are providing is based on the most current Centers for Disease Control and Prevention (CDC) and Connecticut Department of Health (DPH) recommendations for prevention of the spread of COVID-19 and the management of people who may have had contact with individuals who are infected.

We are also providing additional guidance for congregate care and non-congregate care programs licensed, funded or regulated by the Department.

Please review this information, including the links below, with your program’s leadership and staff and make any necessary adjustments to your program's policies and protocols. This guidance is not intended to address every potential scenario that may arise as this event evolves throughout our state and country.
A. Two Week Postponement of all Non-Essential Meetings and Trainings

In order to focus on our critical priorities over the next two weeks, all scheduled non-essential meetings and trainings are to be postponed. This includes those scheduled to be conducted remotely. Administrative Case Reviews and Administrative Hearings will be re-scheduled as will other events. Priority Court hearings have been established and additional clarity will be provided as it is learned. Considered Removal Meetings will proceed remotely when possible.

B. Guidance for DCF When Making Home Visits (including foster home oversight):

Although we are not able to suspend home visits all together, we are asking you all to assess the homes you are visiting in advance to determine if there are any risk factors that will put your health in jeopardy (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 3 questions regarding each individual living in the home:

1. Do you currently have symptoms of corona virus (sore throat, cough, fever of 100.4°F or higher or shortness of breath)?
2. Have you had direct personal contact with someone who is positive for the corona virus?

   • If the client or family members respond “Yes” to any of these questions, immediately consult your supervisor to assess whether there are any potentially urgent safety risks or behavioral health needs (e.g., medications, suicide or violence risk, etc.) which require a response.
   • If there are urgent needs, the chain of command in your office should assess whether those needs can be safely met remotely (e.g., telephone assessment, telehealth visit, e-prescribing, etc.). If the client must be seen to meet urgent needs, including behavioral health needs, the client should be instructed to remain at home and to contact their medical professional immediately. Instruct the impacted client or family member to get assessed by a medical professional and before any visitation arrangements are made.
   • If the Area Office cannot resolve the matter, it shall be escalated to the Central Office through the Bureau Chief of Child Welfare so that a shared decision can be made that determines how the Department will intervene in the case to keep the children in the home safe. All facets of the Department will be involved (Executive, Medical and Human Resources, etc.) to assure we make the best decision given the circumstances.
   • If the client does not have urgent needs or those needs can be met remotely, please instruct the family/client to stay home and to contact the CT DPH for further guidance, which may include a recommendation for a self-imposed isolation of 14 days.
   • If the client or family members respond “Yes“ to the first question (i.e., reports having symptoms) they should be instructed to remain at home and contact their medical professional immediately.
   • In all circumstances above, please instruct the client or family member to notify the receiving medical
• Please document your decision in the families' LINK record if you decided a home visit poses a threat of any kind. Do not put yourself in jeopardy.

Community partners should also be instructed to contact the Area Office to discuss any urgent service needs of families jointly being served so an assessment can be conducted on a case by case basis.

C. Careline calls:

We are also asking our Careline to screen all reports accepted for investigation by asking the same 3 questions outlined above and to document the response from the reporter in the body of the report. This information should be helpful to you as you assess the intervention needed for the families as you determine how to commence the investigation and to prepare for the visit. For families who have an active Ongoing Services case, we ask that you conduct announced visits as much as possible before conducting a home visit. Again, if there is a safety factor that requires us to conduct unannounced visits, please use the process mentioned earlier in this memo.

D. Guidance for Area Office Staff and Supervisors:

Supervisors should ask any staff members concerned about being positive for coronavirus the three questions outlined above. If the answer to any of those questions is yes, staff should be advised to stay at home and the supervisor should contact Human Resources for further guidance.

E. Guidance for Screening Visitors/Members of the Public to DCF Facilities and Congregate Care and Non-Congregate Care Programs Funded, Licensed or Regulated by DCF:

The below protocol is applicable to any facility or program that receives visitors or members of the public as a part of its daily operations.

• All facilities, programs and offices receiving regular in-person contact with members of the public should immediately develop policies to schedule and pre-screen over the telephone all visits by non-client/residents-or-staff entities, including families, attorneys, case managers and social workers, using the three questions above.

• Upon screening, if a potential visitor answers “Yes” to any of the three questions above, please politely instruct them not to visit the facility, program or office until the specific scenario can be further assessed.

• Any potential visitor who answers “Yes” to the first question should be instructed to immediately contact their medical provider and to call 911 if they are experiencing serious symptoms (e.g., shortness of breath).

• Please also instruct the screened individual to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.

• If facilities/program providers receive unscheduled visitors, either politely instruct them to leave and
call to schedule a visit, or screen them appropriately before allowing entrance into the facility/program.

- If upon screening, the unscheduled visitor answers “Yes” to any of the questions above, politely ask them to leave and reschedule a visit after 2 weeks. Also recommend that they contact their own medical professional for further instructions.

- In all circumstances above, please also instruct the screened individual to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.

F. Screening for Current Residents at DCF Facilities and Congregate Care and Non-Congregate Care Programs Funded, Licensed or Regulated by DCF:

All DCF facilities and congregate care programs funded, licensed or regulated by DCF should be certain to also screen any incoming residents using the guidance above, and should respond accordingly if a resident is experiencing symptoms. Please utilize the following procedures if an incoming resident answers “Yes” to any of the above questions:

- Provide a mask for the recipient of services/resident.

- Isolate the recipient of services/resident in a private room with the door closed if possible and ensure that they are kept separate from other tenants.

- A program medical provider should then immediately assess the individual using appropriate personal protective equipment if possible, or if no qualified program medical provider is available, the person should be asked to contact their own medical professional immediately. The programs should also contact the CT DPH for further recommendations including transport to their recommended medical facility if necessary. Please also instruct the program to notify the receiving medical provider and transporter in advance of potential concern for COVID-19.

All DCF facilities and congregate care and non-congregate care programs funded, licensed or regulated by DCF should continue to review their own emergency preparedness plans and assess for continued operation in case of an emergency. We ask that particular focus occurs on the following points:

- All facilities and programs should assess both their facility and workforce capacity to accommodate the potential need for an increased number of isolation rooms and the potential decrease in staffing availability.

- As a result of the above assessment, programs may need to prioritize service provision and planning.

- If the needs or the facility/program exceed current capacity or ability, please contact the relevant DCF program lead/Central Office for further assistance.

Additionally, all the above facilities/programs/providers should contact any entities that have staff regularly visiting their programs (e.g., contracted/per diem staffing agencies, pharmacy delivery organizations, itinerant provider staff, cleaning agencies, etc.) to review and approve their screening protocols. If the protocols of
outside entities do not meet these standards, providers should take responsibility for screening these visitors.

Finally, as a reminder, all Staff/Providers should follow the CDC’s guidelines for infection control basics including hand hygiene:

- Hand Hygiene in Health Care Settings
- Handwashing: Clean Hands Save Lives
- Infection Control Basics

Additional information can also be accessed here: ct.gov/coronavirus.

The Department has previously provided the follow guidance to our foster parents via an e-mail sent a few days ago: Coronavirus (COVID-19) Preparedness memo

The Department previously provided this guidance to our contracted providers regarding continuity of operations as we work through this very difficult time: COVID Preparedness Memo To Providers

Again, these are extraordinary times that will cause us to take extraordinary measures to keep children safe and keep you safe at the same time. As this pandemic evolves daily, we will have to adjust our practice accordingly.

We will make sure we communicate to you accurately and timely of any practice changes we will need to make related to this situation. We appreciate your patience as we travel through these uncharted waters and sometimes we may need to change our course on a moment's notice.

Please know that every decision we make is with you and your safety in mind.

Thank you in advance for your continued cooperation with us because we are truly all in this together.