

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

ACTION TRANSMITTAL 2021.01

Extended to September 30, 2021

DATE: July 1, 2021

TO: All DCFS and Purchase of Service Agency Permanency and Intact Family Services Workers and Supervisors, DCFS and Purchase of Service Agency Foster Home Licensing Representatives and Supervisors; DCFS Residential Monitoring Staff; ILO/TLP Program Administrators and Staff; and Congregate Care Facility Administrators and Staff.

FROM: Marc D. Smith, Director

EFFECTIVE: **Immediately and to be updated or expire on September 30, 2021**

I. PURPOSE

This Action Transmittal replaces Action Transmittal 2021.01 Extended, issued on March 18, 2021, and contains instructions for immediate implementation by direct service staff.

The State of Illinois has experienced a positive shift in the management of COVID-19 during the past few months. Statewide, COVID-19 vaccination rates for Illinois adults have neared or surpassed 70%. In light of this positive development in our State, and based on CDC, IDPH, and regional health data, the Department is directing all direct service staff to immediately resume regular in-person visitation and contacts.

II. PRIMARY USERS

Primary users include all DCFS and Purchase of Service Agency Direct Service Staff, including Permanency Workers, Intact Family Services Workers, Residential Monitors, Foster Home Licensing Representatives and their respective Supervisors; and Residential/Congregate Care Facilities licensed by DCFS, including Group Homes, Shelters, Child Care Institutions/Residential Treatment Facilities.

III. BACKGROUND AND SUMMARY

Beginning very early in 2020, through the present date, the Department has been continually assessing the status of the COVID-19 public health crisis in Illinois and its impact on the safety of in-person contacts. Encouraged by the recent statistics for the State of Illinois from the CDC, IDPH, and regional health data, and Department data related to youth in care affected by COVID-19, the Department has determined that in-person visitation and contacts may resume at this time.

The Department has reviewed the Action Transmittals listed below, dated between June 2020 and February 2021, that addressed in-person visitation and contact involving direct service staff, youth in care (regardless of living arrangement/placement type), family members, caregivers and others in response to the COVID-19 pandemic. The Action Transmittals listed below are now rescinded or superseded:

These Action Transmittals Remain in Effect (Extended to September 30, 2021)

- Action Transmittal 2020.06, Child Welfare Staffing Needs During COVID-19 Crisis;
- Action Transmittal 2021.02, Expansion of DCFS Employment/Job Training/Apprenticeship Incentive Program to Support Eligible Youth Through the COVID-19 Pandemic;
- Action Transmittal 2021.03, Expansion of the DCFS Education and Training Voucher Program to Support Eligible Youth Through the COVID-19 Pandemic; and
- Action Transmittal 2021.04, Procedures 302 Appendix M, Transition Planning for Adolescents.

IV. DEFINITION

“Close contact” means someone who was within six feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period (masked or unmasked). Close contact includes living in the same household (e.g. unit, cottage, wing) as a person with COVID-19, caring for a person with COVID-19, being within six feet of a person with COVID-19 for more than 15 minutes, being in direct contact with secretions from a person with COVID-19 (e.g., being coughed on, kissing, sharing utensils), or being in close contact (as described above) in the 48 hours before a person with COVID-19 developed symptoms.

V. INSTRUCTIONS

The Department continues to monitor, and update guidance based on current recommendations from the Centers for Disease Control (CDC) and Illinois Department of Public Health (IDPH) to meet the needs of children and families served as well as continuing to meet emergency and critical needs as they arise. The instructions that follow provide enhanced guidance under the current conditions of COVID-19 cases across the state:

a) Health and Safety Measures

The health and safety of the children and families served as well as our partners and workforce are of the utmost importance. Personal Protective Equipment (PPE) continues to be made available, to all DCFS staff, and can be ordered for all DCFS offices. Purchase of Service agencies may be assisted by DCFS in securing PPE supplies as needed.

Permanency Workers are encouraged to continue to carry additional PPE at all times to ensure that every adult and child, over 2 years of age and developmentally able, wears a mask for the duration of in-person contacts. Staff should follow IDPH guidelines, dated May 13, 2021, regarding masking for fully vaccinated versus unvaccinated individuals.

Congregate settings should update their agency visitation policies to reflect IDPH guidance dated May 6, 2021. These written guidelines should include the agency's response regarding any person(s) refusal to wear a mask. This guidance should include a short, easy-to-read fact sheet on visitation policy for residents and visitors. The agency should distribute the visitation policy to residents and post the visitation policy on the facility's website.

IDPH and DCFS advise the following measures be taken:

The Illinois Department of Public Health (IDPH) and DCFS strongly advise and recommend that all providers eliminate pre-admission testing requirements. Requiring pre-admission testing prevents the fluidity of movement of youth into residential and congregate care settings. A negative result for COVID-19 on pre-admission testing creates a false sense of security. This has resulted in failure to follow appropriate quarantine recommendations, multiple preventable COVID-19 exposures, and has caused significant delays in transition of youth to less restrictive environments.

The residential/congregate care placement should communicate directly with youth for screening questions; it is best not to rely on second hand information.

- 1) Delay transfer if COVID symptoms are present.
- 2) Regional, unit and agency staff should prescreen for COVID-19 symptoms and possible exposure before in-person contacts.
 - Interview youth and caregiver for COVID-19 symptoms.
 - Delay in-person contact if symptoms are present.
- 3) Mask and practice infection control when transporting children and youth.
 - Youth and caseworker must wear a mask during the entire trip.
 - Masks must be worn appropriately covering both mouth and nose.

- 4) Follow guidelines of IDPH with adherence to isolation or quarantine when advised.
- Initiate appropriate COVID testing protocol, if asymptomatic testing is deemed necessary, after arrival to facility. If the test is positive, proceed with isolation per CDC protocol. For the initial precautions, providers should ensure:
 - That youth is social distancing; and practicing good infection control
 - When it is necessary to be in the presence of others the youth should wear a mask.
 - If prior to admission, during the interview process, a child or youth is exhibiting physical signs or symptoms of COVID-19 or has been in close contact, within **6 feet of an infected person** (laboratory-confirmed or a **clinically compatible illness**) for a cumulative total of 15 minutes or more over a 24-hour period, the child or youth shall be quarantined for 14 days. Quarantine is not required after exposure to COVID-19 for: 1) fully vaccinated individuals; or 2) individuals who have tested positive for COVID-19 in the previous 3 months.
 - Isolation separates sick people with a contagious disease from people who are not sick.
 - Caregivers entering the room of an isolating person should continue to wear mask, gown and gloves.
 - These items should be removed at the door when exiting the room.
 - Quarantine separates and restricts the movement of people who were exposed to COVID-19 to determine whether they develop symptoms or test positive for the disease.
 - Residents, known to be in close contact with a confirmed case, are restricted to their unit and monitored for symptoms.
 - Staff should be designated to the effected unit and not float between units.
 - Only staff assigned to care for minors on the specific unit should be allowed to enter the unit.
 - All therapy interactions should be virtual while a unit is under quarantine as therapists frequently go to various units and or facilities.

- Off unit school, routine healthcare, and any form of visitation must be rescheduled or completed virtually.
- Every effort should be made to vaccinate youths 12-17 years old with the Pfizer vaccine.

Direct service staff are urged to follow IDPH guidelines in all activities. These are kept up-to-date and available to all staff on the Department's D-net.

**http://www.dph.illinois.gov/sites/default/files/20210513_COVID-19_Guidance_Fully_Vac.pdf*

b) Updates to Service Delivery

For all levels of substitute care, intact family services, ILO/TLP and residential/congregate care, a minimum of one monthly in-person contact must occur every 30 days. Direct service staff must ask all COVID-19 prescreening questions when scheduling and upon arrival at any in-person visits. For specialized foster care cases, in-person worker-child contacts shall occur a minimum of twice per month, along with one additional video conference contact, for a total of 3 worker-child contacts per month.

Child Protective Services investigative contacts shall continue to occur as required in Procedures 300.

1) Parent - Child Visitation

In-person parent-child visitation shall occur weekly, as required by DCFS rules and procedures, when reunification is the permanency goal;

For medically complex and fragile children/youth, a medical professional shall be consulted to assess the well-being of the youth, and the arrangements before in-person weekly parent-child visit resume.

The location of parent-child visitation shall be determined by the agency or region, (home, DCFS offices, family environments, Purchase of Service Agency offices, or other community-based resources).

Unsupervised in-person visitation shall continue. Any considerations for modifications based on safety and well-being should be addressed in a formal Child and Family Team and documented with a Critical Decision case note. Administrative and legal consultation should be considered when warranted.

2) Sibling Visits

Sibling visits shall occur in-person, twice per month, as required by DCFS rules and procedures.

3) **Required Caseworker Contacts**

With Youth in Substitute Care. Permanency Workers shall continue to conduct at least one in-person visit with each child in substitute care every 30 days. Visitation should be increased when warranted.

With Pregnant and Parenting Youth. All visitation with pregnant and parenting youth in care shall occur as required by DCFS rules and procedures. A medical professional shall be consulted as needed.

With Parents. For families with children residing in the home, worker – parent visitation shall occur in-person at least every 30 days and as required by DCFS rules and procedures. Permanency Workers shall ensure that children who reside in the home are seen in-person and separately during these visits. Visitation can be increased when warranted.

When there are no children are residing in home of parent, monthly worker-parent visits shall continue to be in-person.

With Unlicensed Relatives. Unlicensed HMR/Fictive Kin foster care shall have two in-person visits per month as required by DCFS rules and procedures.

With Youth in Specialized Foster Care. On an interim basis; at minimum, Specialized Foster Care client contact shall be: two in-person worker-child contacts monthly when there are no safety issues present. A required third monthly contact can be completed using video conferencing. All contacts must be documented in SACWIS. If there are safety concerns, there is an expectation that all three-monthly contacts occur in-person .

Licensing Staff Visits (Foster Family Homes and Congregate Care). In-person visits shall resume as required in the applicable DCFS licensing rules.

With Youth in Congregate Care Facilities.

- A) Residential monitors will conduct at least one unannounced on -site observation monthly to the congregate care facility as safety and risk factors allow.
- B) Permanency staff will resume monthly in-person visitation and contact the Residential/Congregate Care facilities by phone or email prior to visitation to inquire regarding their ability to host in-person visits. If the facility cannot allow in-person visitation due to COVID-19 mitigation measures, permanency staff will document this information in a case note and shift their visitation to virtual until the medical concern has been mitigated.

- C) While concurrently adhering to the IDPH Long-Term Care Facilities Guidelines and DCFS requirements; in-person family visitation will be at the discretion of the residential/congregate provider and done in collaboration with DCFS Residential monitoring while considering individualized health and safety factors such as:
- IDPH and CDC guidelines during the duration of in-person contact;
 - Underlying health conditions of the youth and family or residents within the facility;
 - Other youth in the residential/congregate care setting who have tested positive with COVID-19 or who have been exposed to someone who tested positive with COVID-19.
- D) Permanency Workers are encouraged to supplement in-person contacts with video conferencing as it has been demonstrated that, during peak pandemic periods, these youth benefited from the increased contact with their Permanency Workers.

4) **Reunification Services**

As it relates to Reunification/After Care; in-person contact and services shall continue as required by DCFS rules and procedures.

5) **Child Welfare Services Referrals (CWS)**

CWS referrals/intake evaluations shall be assigned to a caseworker within 24 hours. The assigned caseworker shall conduct an in-person visit with the children and family within 48 hours, but no later than 5 working days, of assignment, to assess the safety of the children and service need.

6) **Intact Family Services**

All in-person contacts and services shall occur as required by DCFS rules and procedures or as required by court order.

In-person contact shall occur during joint initiation of new investigations, in coordination with the Child Protection Specialist/Supervisor.

7) **Child Protection Services**

All investigations, case handoffs, court referrals and services shall occur as required by DCFS rules and procedures.

c) **Video Conferencing Use Guidance:**

- 1) In the interim; video conferencing can be used as an alternative to in-person ACR, CIPP, Countdown to 21 or clinical staffing's when its clinically appropriate and applicable. When used; there must be strict adherence to HIPAA guidelines and attention to the privacy of our youth and parents. **Additionally, in all instances, youth must have an assigned caseworker or support (caregiver, treatment provider, therapist, etc.) present with them during a video meeting.**
- 2) **Video conferencing cannot be utilized in the place of required in-person contact.**
- 3) Video conferencing can be used to allow additional contacts with a youth in a congregate care setting, foster/relative home placement or with a parent or caregiver. **Video conferencing does not replace, and cannot be used as a substitute for, a required in-person contact.**
- 4) Child and Family Team Meetings are recommended to be in-person, when applicable. Consideration should be given for the preference of the family's team members when deciding whether to conduct the CFTM in-person or virtually. The caseworker shall document this decision in a case note.

VI. QUESTIONS

Staff, supervisors and managers may direct their questions through their chain of supervision. Purchase of Service agencies may contact their APT monitors for additional guidance. All other staff can direct their questions by e-mail through Outlook at DCFS. Policy. Non-Outlook users may send questions to DCFS.Policy@illinois.gov.

VII. FILING INSTRUCTIONS

Remove and recycle Action Transmittal 2021.01 Extended, dated March 18, 2021, and replace it with this Action Transmittal 2021.01 Extended to September 30, 2021.