GROUPS

1A. During Phase 4, can home visiting programs have group meetings and group celebrations outdoors, with social distancing?

   Answer: During Phase 4, in the interest of health and safety, in-person group meetings and group celebrations are not allowed.

BRIEF IN-PERSON CONTACTS

2A. During Phase 4, can the brief in-person contacts be extended, and count as a visit?

   Answer: Each home visiting model defines what counts as a visit. During Phase 4, in the interest of health and safety, only brief in-person contacts are allowed, with distancing and face coverings. These brief contacts are optional, not mandatory. In general, these contacts are expected to last no longer than 15 minutes. During Phase 4, these in-person contacts should not be extended. All families and staff must be given the opportunity and option to decline in-person contacts, if they do not feel comfortable (for example, if they have health conditions or if they have household members with health conditions or other risk factors).

2B. Home visitors will be supporting e-learning for their own children in the fall. What happens if home visitors are no longer able to continue dropping off materials or making in-person brief contacts?

   Answer: We understand the multiple demands on home visitors during the pandemic. While brief in-person contacts are allowable during Phase 4, they are not required. The intent of allowing brief in-person contacts is to provide an option for connecting with families with acute needs and those families who have been unable to participate in virtual visits. For these priority families, if brief in-person contacts are not possible, check-ins by phone or text are an option (follow model guidance as to whether these can be counted as a visit). Materials and supplies may also be mailed to families.
ENROLLMENT

3A. While visits are virtual, can a program keep a family enrolled if the family moves to another location?

Answer: Programs may continue to provide services to these families for a transition period. Programs are asked to work with the family to develop a transition plan to connect the family with a home visiting program in their new community.

3B. Will program funding will be cut due to reduced enrollment? Providers are concerned about families aging out and then filling those slots with new participants.

Answer: In recognition of the unique challenges presented by virtual engagement as well as the multiple family and work burdens shouldered by home visitors, all funders continue to offer maximum flexibility throughout the pandemic. For example, ISBE’s ECBG FAQ states: “Programs that are unable to serve their funded enrollment will not receive a reduced allocation.”

CASELOAD CAPACITY

4A. As we progress through COVID, our staff are becoming increasingly likely to use federally supported "COVID FMLA". If a staff member uses this FMLA for a portion of their scheduled week, it reduces their FTE and Caseload Capacity. How will this impact expectations relative to our site’s FY21 projections? How would we best report out this temporary shift in Caseload Capacity (Quarterly Reports)?

Answer: Funders will continue to offer maximum flexibility during the pandemic, and programs will not be penalized for reduced enrollment or reduced caseload capacity due to COVID-related staffing reductions. For example, ISBE is allowing flexibility in the number of children served. Programs are asked to document the reasons for reduced caseload capacity in their quarterly reports, and to let funders know immediately of any significant events that are affecting performance. Programs are asked to do their best in continuing to support home visiting families. For example, programs could consider flexible work hours on weekends and evenings to meet staff and family needs. Programs are encouraged to work together at the local community level to equitably address any gaps in services.

POST-PANDEMIC

5A. Families benefit more from in-person contacts, and this is the reason why many home visitors entered the field. Will virtual visits become the norm?

Answer: There is no current movement in Illinois to make virtual visits become the norm for home visiting after the health crisis passes. Models are conducting studies to measure the effectiveness of virtual visits, and funders will look to the models for future guidance.