Moving to **In-Person** Visits during COVID19: Dispelling Myths, Fears and Assumptions

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- Supported by: Washington OPD, Washington CITA and Washington DCYF

## Welcome What we will cover

- DCYF In-Person Visitation guidance
- Data on the types of visits occurring
- Myths, fears and assumptions: how these may be informing decisions
- Impact of separation on children and parents
- How to discuss the fears and plan an inperson visit
- Balancing the need for in-person visits with concerns of COVID19

## The Transition

www.dcyf.wa.gov



## Returning to In-Person Visitation

- Based on consultation with the Department of Health (DOH), we are confident that some children can safely return to in-person visits.
- As DCYF works to reinstate in-person visits, and in light of other limitations during the COVID-19 pandemic, visits may still be provided through a combination of remote and in-person visits.
- Parents or their attorney will contact the assigned case worker to manage this transition.



# High-Risk for Serious Health Problems from COVID-19

- If anyone who will be exposed to the child (parent, child, caregiver that the child is living with and/or others in the caregiver's household) falls within the CDC's high risk categories, DCYF case worker will request that remote visitation occur instead of in-person.
- While Proclamation 20-33 on in-person visits remains in place, if the case worker changes the modality of the visit from in-person to remote the case worker will notify the parent. If a court has ordered the in-person visit to happen, the case worker will contact the Department's counsel in that dependency case.



## **Screening Process**

- In order to ensure the health and safety of children, families, parents and caregivers, DOH has provided health guidance and protocols that need to be followed to make the visitation as safe as possible for all participants.
- DCYF has either contracted providers, foster parents, kinship provider and case workers providing visitation services. Those providing visitation services shall ask prior to a visit CDC/DOH screening questions.



## **Screening Questions**

Per the CDC and DOH Screening Guidelines, that cannot be attributed to another health condition:

- A cough
- Shortness of breath or difficulty breathing
- Two or more of the following symptoms
  - $\checkmark$  A fever or feels feverish
  - $\checkmark$  A sore throat
  - ✓ Chills or repeated shaking with chills
  - $\checkmark$  New loss of taste or smell
  - ✓ Muscle aches
  - Have you or anyone in your household, within the last 14 days, had close contact with someone currently sick with suspected or confirmed COVID-19



## **Screening Questions Continued**

If the responses to the screening questions are in the negative, those providing visitation services can move forward with the scheduled visit.

- If the responses of the parent are in the affirmative, those providing visitation services shall:
  - Offer to change the visit from in-person to remote. If the remote visit is not an option;
  - Cancel the visit and reschedule.
- The contracted providers and caregiver shall contact the case worker immediately (within 1 business day) to let them know the change in modality and/or cancellation of the visitation.



## Safety Protocols During Family Time Visitation

- Visit participants over the age of 2 years old will need to wear a <u>mask or</u> <u>cloth face covering that covers the mouth and nose</u>. Children ages 3 to 6 this may be a challenge.
- Visit participants will be asked to wash hands for at least 20 seconds using warm water and soap or use hand sanitizer when the visit begins (DOH recommends hand sanitizer to be 60 percent alcohol).
- Visitation is limited to the person(s) identified in the court's order on visits. If the case worker has approved others to participate in the visit, the parent may use their phone or video conference equipment to include any additional participants remotely.
- If the parent wishes to bring toys/items to the visit, the toy/item must be sanitized and the toy/item should not go with the child back to their foster or caregiver home.



## Safety Protocols During Family Time Visitation

- Those providing visitation services should practice social distancing during visitation. Parents and child(ren) should practice social distancing during a visitation, but understand this may be a challenge.
- If there is blatant disregard by visit participants in following the health and safety protocols then the in-person visit will be cancelled and remote visitation could be offered or a reschedule of the in person
- Providers and Caregiver are required to inform the case worker with in one business day of any cancelation or changes which occur.



## **Governor's Proclamation**

- How does the DCYF Interim Policy interact with the extension of the Governor's proclamation?
  - The proclamation gives DCYF the flexibility to limit in-person visits when they cannot be done safely. But it also allows in-person visits to be provided when they can be done safely, in adherence with the policy. In light of the fact that Washington is taking a phased, county-based approach to reopening, we want to support case-specific decisions to be made so in-person visits can happen when they can be safely provided.



## Supply Support

How will everyone involved get access to PPE?

- Currently, all field offices have a limited supply of mask that can be provided to the parents, caregivers, staff and caregivers.
- A large bulk order of adult and child cloth masks has been placed. Once received they will be dispersed to the field offices for distribution for the parents, caregivers and providers.

What are the expectations of visit providers in wearing masks and social distancing?

• Guidance was provided for all providers to follow DOH safety protocols, social distancing and utilize PPE supplies. This was the same guidance provided to parents, staff and caregivers.



## Links to Guidance Documents

Parent:

https://www.dcyf.wa.gov/sites/default/files/pubs/CWP\_0057.pdf

Foster Parents and Caregivers:

https://www.dcyf.wa.gov/sites/default/files/pubs/CWP\_0058.pdf

Provider:

https://www.dcyf.wa.gov/sites/default/files/pubs/CWP\_0056.pdf



## Thank you!

#### **Contact:**

#### Deanna Morrison Deanna.Morrison@dcyf.wa.gov



## Poll

- On what percentage of your cases have you or your staff made efforts to have In-person visits occur (whether or not it ended up actually occurring)?
  - None
  - 0-10%
  - 11-25%
  - **26-50%**
  - **5**1-75%
  - **76-100%**
- Repeat this question for the following types of visits.
  - Zoom, skype or other live video interaction visits
  - Phone calls or online chats
  - No live interactions

# **DCYF** Visitation Data

https://www.dcyf.wa.gov/sites/default/files/pd f/ContractedFamilyTimeVisitation.pdf Family Time Visitation contracts are paid monthly therefore, numbers should be considered draft until a full month has passed.

						Con	tracted V	isits by R	legion & I	Modality								
Week of:																		
Region/Modality 3/29/2020		020	4/5/2020		4/12/2020		4/19/2020		4/26/2020		5/3/2020		5/10/2020		5/17/2020		5/24/2020	
Region 1		-								-				- 8-		-		
Missed-no-show	19	3%	17	2%	17	2%	16	2%	17	2%	11	1%		196	13	2%	12	23
No Visit Recorded	71	9%	61	9%	69	10%	70	10%	76	10%	80	11%	89	12%	97	13%	113	15%
Regular	237	31%	190	27%	163	23%	153	21%	140	19%	129	17%	119	16%	1.09	15%	104	149
Virtual	426	57%	448	63%	463	65%	493	67%	507	69%	522	70%	527	71%	527	71%	518	697
Region 2																		
Missed-no-show		2%		4%		3%		3%		3%		2%	11	4%	10	3%	10	37
No Visit Recorded	66	31%	58	26%	55	23%	62	24%	69	24%	68	23%	77	25%	95	29%	122	35%
Regular	39	18%	40	18%	36	15%	34	13%	34	12%	25	8%	24	8%	26	8%	23	73
Virtual	104	4975	118	53%	143	39%	156	60%	176	61%	198	66%	195	64%	193	60%	194	56%
Region 3																		
Missed-no-show		375		2%		2%		2%	10	3%		3%	-	2%	11	3%	11	33
No Visit Recorded	78	2375	79	24%	78	23%	82	24%	87	24%	81	23%	89	2:4%	98	26%	103	27%
Regular	48	16%	39	12%	33	10%	30	9%	27	8%	24	7%	23	6%	23	6%	22	67
Virtual	175	57%	201	61%	218	65%	228	66%	235	65%	242	68%	249	68%	249	65%	249	65%
Region 4																		
Missed-no-show	30	7%	30	7%	27	6%	30	6%	28	6%	27	5%	27	5%	27	6%	25	5%
No Visit Recorded	150	34%	133	29%	111	25%	113	24%	117	24%	122	25%	115	2.3%	116	24%	140	28%
Regular	46	10%	41	9%	39	9%	35	7%	35	7%	38	8%	35	7%	30	6%	29	63
Virtual	219	49%	250	55%	264	60%	289	62%	301	63%	304	62%	315	64%	311	64%	308	613
Region 5																		
Missed-no-show	23	3%	25	3%	26	3%	20	3%	20	3%	15	2%	16	2%	15	2%	13	23
No Visit Recorded	131	17%	131	16%	113	15%	105	14%	104	14%	99	13%	112	1.5%	130	17%	157	213
Regular	222	28%	190	24%	156	20%	147	19%	143	19%	118	16%	110	14%	104	14%	93	123
Virtual	416	53%	454	57%	468	61%	488	64%	503	65%	516	69%	521	69%	513	67%	502	663
Region 6																		
Missed-no-show	10	1%		1%		1%		1%		1%		1%	11	1%	в.	1%		13
No Visit Recorded	117	15%	124	16%	120	15%	117	15%	119	15%	107	13%	111	13%	131	16%	180	21%
Regular	181	24%	164	21%	157	20%	153	19%	144	18%	133	16%	126	15%	112	14%	102	127
Virtual	460	60%	478	62%	519	63%	527	66%	340	67%	363	69%	381	70%	573	69%	364	663

Source: Sprout

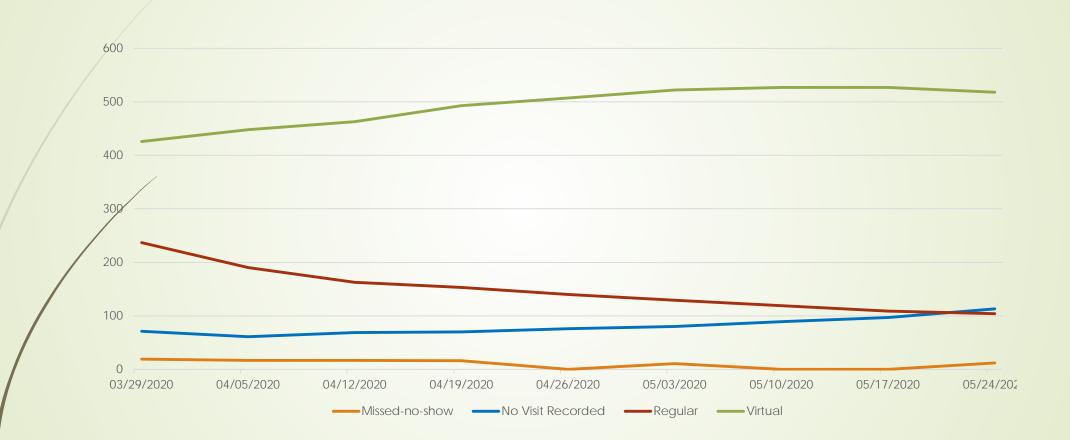
\* For Client confidentiality: Summary Numbers between 1-9 cannot be shared outside DCYF

These counts only represent children on FamLink visit plans Theses counts represent every child once

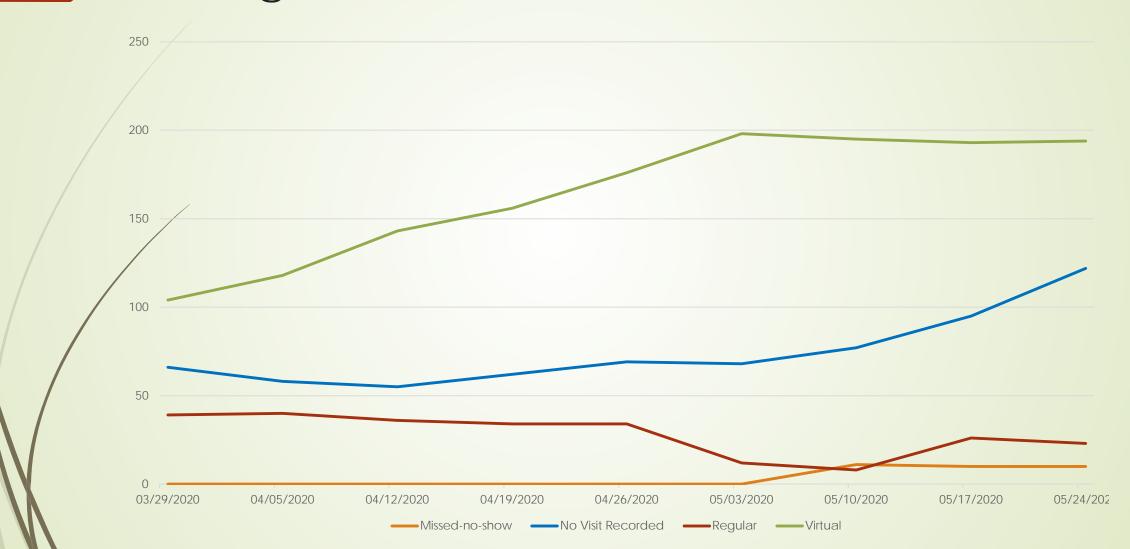
Numbers will fluctuate from week to week as the number of scheduled visits fluctuate weekly per the visit plans.

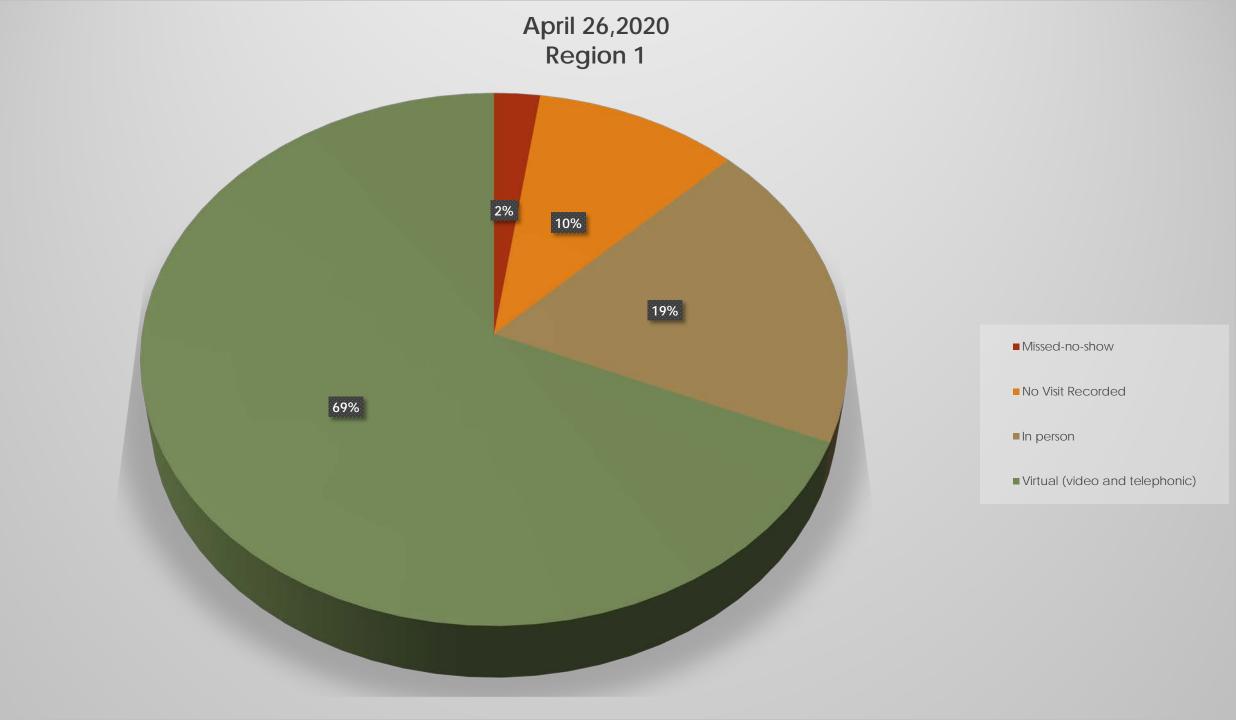
Refinement of the data collection is ongoing and may impact the numbers

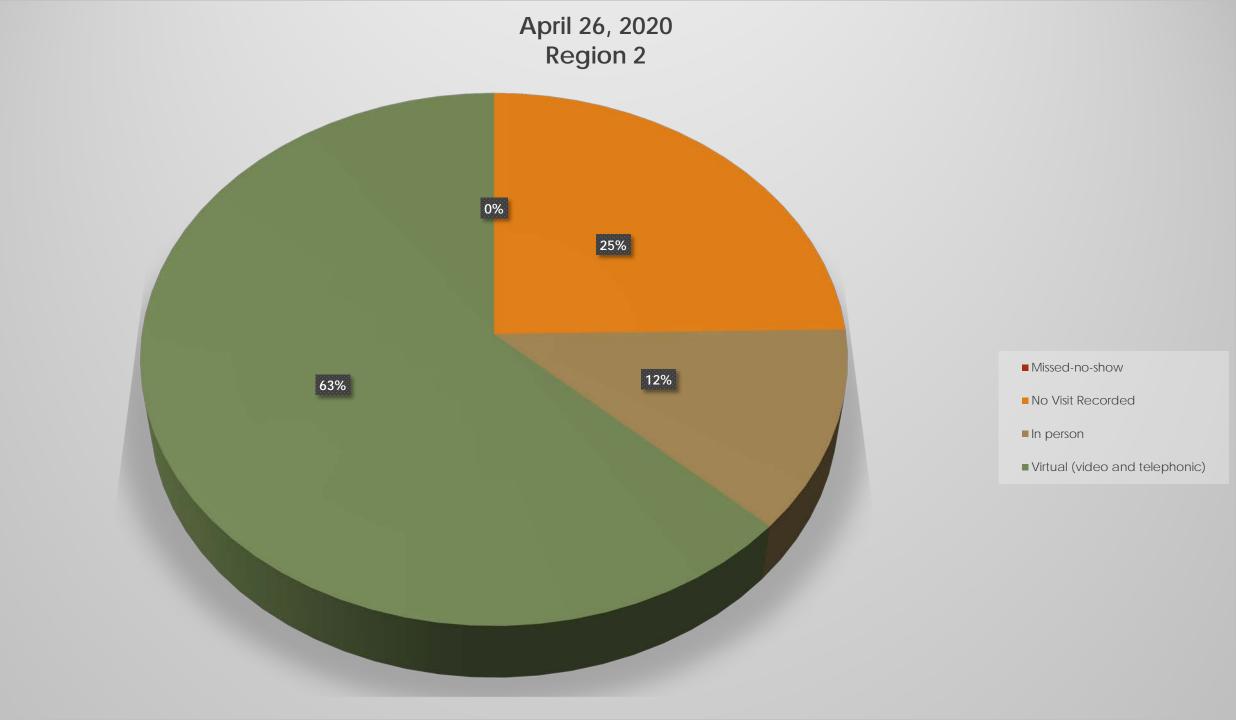
#### Region 1Visitation data



#### Region 2 Visitation Data







#### Parents, caregivers and social workers: Their perceptions of In-person visits

- Jason Bragg Social Service Worker, Parent's Representation Program
- Katie Biron Foster/Adoptive Parent Fostering Connections for Families
- Shannon Quinn DCYF Social Worker

## Poll

- What are the barriers to successful in-person visits (multiple choice, check ones that you have experienced)?
  - Caregiver resistance
  - Parent resistance
  - Child resistance
  - Provider resistance
  - Transportation for children
  - Transportation for parents
  - Lack of PPE for everyone
  - Lack of other resources needed to conduct the visit: write issue in Question box

# Trauma caused by separation, grief and loss

\*National Child Traumatic Stress network

- A traumatic event is a frightening, dangerous, or violent event that poses a threat to a child's life or bodily integrity.
  Witnessing a traumatic event that threatens life or physical security of a loved one can also be traumatic. This is particularly important for young children as their sense of safety depends on the perceived safety of their attachment figures.\*
- Trauma for child welfare families:
  - Maltreatment and family violence
  - Child removed from family
  - Separation of parents, siblings, family, family support system
  - Loss of community and my identity: school, friends, religion culture, routines, food, financial impacts

#### COVID19 – New trauma

- In-person visits with parents, siblings and other loved ones stopped for long period of time
- Loss of school (teachers, education progress, interaction with peers)
- Loss of contact with friends
- Change in routines
- Confined to home
- Placement disruptions due to COVID19 impacts on caregivers
- Lack of physical activity
- Adults experiencing stress less able to help child regulate
- Fear (reality) people important to me may become sick or die
- Protests in society how parents/caregivers handle this and what it means to my identity and safety

#### **Initial COVID19 - Visitation Decisions**

#### **In-Person Visits**

- Trauma of no visits
- Legal Rights



#### **Virtual Visits**

- Number of COVI19 cases growing fast
- Unknowns
- Fears
- Expecting this would not last too long

#### **Current COVID19 - Visitation Decisions**

#### **In-Person Visits**

- Months w/o in-person visits
- Legal Rights
- Increasing trauma
- Fewer COVID19 cases
- More is known about how to keep safe

#### **Virtual Visits**

- No vaccine
- Fears
- Reality

#### \* Dr Bruce Perry "NN COVID series"

## **Consequences of COVID19\***

- Transgenerational impacts will occur because of the COVID19 crisis. The impacts will not stop when a medical solution is found.
- The social and emotional tolls will be high especially the families who were most vulnerable before COVID19
- People will be experiencing more hyperarousal and dysregulation
- Hyperarousal Continuum
  - Your sense of time changes: hard to think about the future instead focus on minutes, seconds or not having any sense of time. Regression to more child/infant sense of time and ability to make decisions.
  - Behaviors: vigilance, resistance, defiance, aggression
  - Reactions to decisions: Avoidance, compliance, dissociation, fainting
  - Freeze, Flight, Fight

#### Solutions

- Everyone is experiencing the trauma and the impacts of COIVD19
- Sharing solutions and strategies
  - Video
  - Use question box to share your solutions
  - Shannon's email

#### How to help reduce trauma impacts

- Create or support the familiar and safe environment
- Minimize threats and stresses
- Model calmness will help to regulate a dysregulated, anxious child
- Be proactive anticipate less effectiveness
- Help parents/caregivers learn to model calmness with the child
- Be gentle with yourself and others
- Leaders provide good recommendations and decisions that are future focused
- Flexibility, nurturing, build on strengths and resources

#### Planning an In-Person Visit

- Plan with all the parties:
  - Birth parents, caregivers, attorneys, older children
- Setting expectations, boundaries
- Reactions before, during or after visits is the NORM.
  - Prepare,
  - Minimize
  - Address
- Plan activities

### Demonstration – Engaging a Caregiver in Visit Planning

- Dialogue between a caregiver and social worker about an in-person visit,
- Jacob is a caregiver for two children who are not related.
- Rose is the social worker for Emmett a 7-year-old boy who has been in this home for 8 months. The last two months there has been weekly virtual visits on zoom with Emmett's parents. Before he was having 2 in-person visits each week.

#### What is helpful to further the dialogue on in-person visits

- What did you observe that was helpful?
- What other methods, questions or resources might you use to address the issues or concerns?



#### **Engagement strategies**

- Your relationship with the person will impact the dialogue
- Help the person feel safe give them control of something, give them wins, give them power
- Understand and Affirm their world view
- Ask them for ideas or solutions
- Develop a common goal
- Correct misinformation as soon as possible
- Avoid repeating misinformation
- Provide new information in small chunks and from sources they trust
- Repeat information

The challenge is doing this when it is not possible to have in-person dialogue.

#### Trauma resources

Dr. Bruce Perry – Series of videos on stress, reliance and how to help ourselves and others during this time.

https://www.neurosequential.com/covid-19-resources

The Pandemic Toolkit Parents Need

https://www.psychologytoday.com/us/blog/pullingthrough/202004/the-pandemic-toolkit-parents-need?em

National Child Traumatic Stress network

https://www.nctsn.org/



# What Do You Need?

Please let us know in Question Box what you need. Support, training, guidance, etc.

We have to stand on guard and prepare for the aftermath of our current crisis. One, two, three or even 12 months from now, we will continue to deal with the results of the virus and the manner in which it has affected our system. Should restrictions on family time and services continue, a significant amount of time may pass before parents and children are properly served. Jerry Milner – Children's Bureau

Plan for the future...

# The Future in NOW

#### Family Time in COVID-19 Resources

Policies, handouts, videos, and the links to recordings of this and previous webinars can be found on the CITA website at:

https://www.wacita.org/category/library/

Resources include:

- The Need for In-person Parenting Time During COVID19. When protecting a child from COVID19 causes significant harm and trauma.
- In-Person Visit Planning
- DCYF Family Time data during COVID-19
- Shannon's email to begin the dialogue

## **CLE or CJE credits**

If you would like CLE or CJE Credits for attending this LIVE webinar:

- By July 2, 2020, send an email to Susan Peterson at susan.peterson@courts.wa.gov with the following information:
  - Name & Date of the Webinar (Moving to In-Person Visits during COVID19: Dispelling Myths, Fears and Assumptions, June 8, 2020)
  - Your name
  - Your WSBA#
  - Your court name (for judicial officers)

If you want CLE credit for the **RECORDED** webinar, go to your MyWSBA account and search MCLE section for the recorded activity with this webinar title (it should be available by June 23rd)