

**TO: Directors, Local Department of Social Services
Assistant Directors, Local Department of Social Services
Public and Private Resource Providers**

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DATE: March 15, 2021

SUBJECT: Child Welfare Services COVID-19 Stage Two Guidance

In March 2020, due to the COVID-19 pandemic, the Maryland Department of Social Services (SSA), under the guidance of the Children’s Bureau, altered its guidance in the way services were provided to families in three (3) areas of practice:

- Response to appropriate reports of child abuse and neglect;
- Monthly caseworker contacts with parents, children and resource parents; and
- Parent/child contact for children in the custody of the Local Department of Social Services.

As the State of Maryland continues to implement the COVID-19 “Roadmap to Recovery” plan in a manner that ensures the health and safety of all Marylanders, DHS/SSA developed a plan to gradually resume in-person visits, effective March 15, 2021.

Child Protective Services

When conducting CPS response or response to an assessment (Request of Another Agency, Services to Families with Children –Intake, etc.) a caseworker will wear a face covering when arriving at and entering the home. The caseworker will ask whether any household members are showing signs of COVID-19 (reciting symptoms) or have been recently exposed to COVID-19. A caseworker should avoid having contact with any sick individual or household member who has been directly exposed to the virus unless the caseworker and the household member both wear face coverings and can be at least 6 feet apart.

Regardless of illness, the caseworker will ask all household members, including children over 2, to wear face coverings while the caseworker is in the home. Caseworkers will have extra face coverings if the household does not have them available. The explanation for this is very simple: wearing face coverings is the best way to prevent the spread of the virus and to protect both the family’s household and the caseworker’s family, as well. If a household member chooses not to wear a face covering, the caseworker will maintain a distance of 6 feet whenever possible.

A caseworker will attempt to interview children or other household members outside in an open space, maintaining 6 feet of distance, if privacy from others can be maintained. Even in an open space with 6foot distancing, a caseworker may choose to wear a mask, and may encourage a child and household members to do so. Otherwise, outside and with proper social distancing, masks are optional. If interviews cannot be conducted outside, the caseworker will wear a mask and attempt a 6-foot distance whenever possible.

Whether a child should be encouraged to wear a mask during an interview will depend on where the interview takes place, what social distance can be maintained, and the extent to which a child feels comfortable talking with a face covering.

While in the home, caseworkers will try to avoid touching hard and high touch surfaces, including door handles, faucets, and counters. After coming into contact with one of these surfaces, the caseworker will thoroughly wash his or her hands. Upon leaving the residence, the caseworker will once again wash hands or use an effective hand sanitizer.

Monthly Caseworker Visits with Parents, Children and Resource Parents

In-person monthly caseworker visits with parents, children and resource parents will resume with the following exceptions, in which case, visits will continue to occur by telephone/video conference and other visual communication tools:

- Positive responses as guided by the prescreening health questions (Attachment A);
- When in-person visit would increase the risk for **vulnerable individuals** (See definition, right) participating in the monthly visit (parents, children or resource parents); and
- Parents or resource parents who refuse or are unable to wear face coverings during monthly visits.

Vulnerable Individuals: Older individuals (age 65 years and older) and individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised, such as by chemotherapy for cancer and other conditions requiring such therapy.

Any scheduled monthly visits when the resource parents, parents, or children are sick or showing signs of illness will be rescheduled or completed by telephone or video conference. Exceptions to in-person contacts must be approved by the supervisor.

For in-person monthly caseworker visits, staff, parents, resource parents and children over the age of two years will be expected to wear face coverings. Children should be encouraged to wear them, but visits will not be cancelled due to a child's inability or unwillingness to wear a face covering. All participants will use hand sanitizer and adhere to hand washing and physical distancing guidelines when participating in face-to-face visits. Visits should occur in large open spaces, including outdoor settings whenever possible and confidentiality maintained.

These same criteria will apply to in-person visits with older youth in Independent Living Programs and Semi-Independent Living Arrangements and for resource workers completing emergency kinship studies and other licensing activities.

Family Visitation

Family visitation may initially consist of a combination of in-person and telephone/video conferencing based on the availability of resources.

In-person parent-child visits will resume with the following exceptions in visits, in which case, visits will continue by telephone/video conference:

- Positive responses as guided by the pre-screening health questions grid (Attachment A);
- When in-person visit would increase the risk for **vulnerable individuals** (See definition, right) either participating in the visit or caring for children visiting (parents, children or resource parents); and
- Parents who refuse or are unable to wear face coverings during family visits.

Vulnerable Individuals: Older individuals (age 65 years and older) and individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised, such as by chemotherapy for cancer and other conditions requiring such therapy.

Any scheduled visits when parents, children or the family visit supervisor are sick or showing signs of illness will be rescheduled or be completed by telephone or video conference. Exceptions to in-person contacts must be approved by the supervisor.

Resource parents will be requested to provide transportation whenever possible. It will be expected that adults and children over the age of two will wear face coverings if someone outside of the household is providing transportation for the child. Children should be encouraged to wear them, but transportation will not be cancelled due to a child's inability or unwillingness to wear a face covering.

Attachment A

Pre-screening Health Questions related to COVID-19

**If the answer to any question below is “yes,” please explain which household member(s) are affected and provide as much detail as possible.*

1. In the past 14 days, has anyone in the household been potentially exposed to COVID-19 (close contact with someone who has recently traveled, been diagnosed with the virus and/or shown symptoms, or working in the medical field)?

Yes No Unknown

2. Does anyone in the household have a cough or shortness of breath or difficulty breathing; or at least two of the following symptoms: fever, chills, repeated shaking with chills, muscle pain, headache, sore throat or new loss of taste or smell; and the symptoms could be related to potential exposure to COVID-19?

Yes No Unknown

3. Has anyone in the household tested positive for COVID-19 in the past 14 days?

Yes No Unknown

4. Is anyone in the household isolated/quarantined per doctor’s orders?

Yes No Unknown

