Guidance for DCS Staff
COVID-19 (Coronavirus Disease 2019)
September 29, 2021

The following guidance is based on the most current Centers for Disease Control (CDC) and Tennessee Department of Health (TDH) recommendations for the prevention of the spread of COVID-19. This guidance is not intended to address every potential scenario that may arise as this event evolves. TDH and CDC recognize that COVID-19 vaccinations are safe and the most effective means of preventing COVID-19. Vaccination and wearing masks are encouraged for the safety of children and adults.

Guidance for employees at Wilder Youth Development Center

• Following guidance from the Tennessee Department of Human Resources, because Wilder contains a clinical setting, staff should continue to pose COVID-19 screening questions to all employees and other essential personnel (such as attorneys visiting youth and contract nurses) prior to entry into Wilder. Any staff or visitors who answer YES to any of the following questions, should not enter and staff should contact their immediate supervisor:

1. Are you experiencing any of the following? Cough, Shortness of Breath or Sore Throat
2. Have you had a fever in the last 48 hours?
3. Have you had a new loss of taste or smell?
4. Have you had vomiting or diarrhea in the last 24 hours?
5. If you are unvaccinated, have you had close contact with a confirmed case of COVID-19?

• Individuals who refuse to respond to the screening questions will not be allowed to enter the facility and staff will be required to use personal leave for the missed shift.
• While not required, wearing a mask is strongly recommended.

Guidance for employees making face-to-face home visits

Effective May 1, 2021 all program areas resumed normal in-home face-to-face visits in accordance with departmental policy. However, some flexibility in face-to-face requirements was established through a departmental waiver memo, effective September 1, 2021. This includes policies governing CPS, Juvenile Justice, Child Programs, Foster Parent Support.

• If arrangements other than a face-to-face visit need to be made, prior approval is required through the appropriate chain of command to include Team Coordinators.
• For scheduled visits, staff should call the family home in advance of the visit to complete the following health questionnaire with the family to determine any potential risk factors.

  1. Are you experiencing any of the following? Cough, Shortness of Breath or Sore Throat
  2. Have you had a fever in the last 48 hours?
  3. Have you had a new loss of taste or smell?
  4. Have you had vomiting or diarrhea in the last 24 hours?
  5. If you are unvaccinated, have you had close contact with a confirmed case of COVID-19?

• Staff should adhere to standard safety practices during home visits such as social distancing and wearing masks if indicated.
Guidance for employees making face-to-face visits with youth in DCS or provider facilities

- For youth placed in congregate care settings in state, DCS family services worker resumed monthly visitation per department policy effective May 2021. Out-of-state visitation should continue via video conferencing until further notice. Health Department guidance for face-to-face visitation will be followed if there are active positive cases of COVID in a congregate care facility. Central Office Network Development and the Child Health Unit will apprise regions when visits should not be made to facilities for precautionary reasons. When DCS staff are making face-to-face visits at a facility, they must follow the agency’s requirements regarding whether a mask is necessary. Wearing a mask is strongly recommended even when not required.

Guidance on reporting

- Staff will immediately report to Executive Director of Human Resources Martha Shirk if any staff or visitors to a DCS office have tested positive for COVID-19. This includes children, parents, foster parents and DCS staff.

Guidance for visitors in DCS offices

- All visitors should complete a health questionnaire to determine risk prior to visitations or meetings:
  1. Are you experiencing any of the following? Cough, Shortness of Breath or Sore Throat
  2. Have you had a fever in the last 48 hours?
  3. Have you had a new loss of taste or smell?
  4. Have you had vomiting or diarrhea in the last 24 hours?
  5. If you are unvaccinated, have you had close contact with a confirmed case of COVID-19?

- Appropriate social distancing should occur with visitors in the office. Face coverings in offices are optional for state employees and visitors but are encouraged.

Guidance for travel

- Staff non-essential work-related out-of-state travel will be approved on a case-by-case basis.
- Travel requests for foster children to accompany foster parents out of state are to be reviewed by Regional Administrator/JJ Directors for approval/denial.

Guidance for meetings

- While remote video meetings are still encouraged, large or small group face-to-face meetings are acceptable with adherence to local guidelines and appropriate social distancing
- New Employee Orientations and Pre-service will continue under guidelines issued by the Training Division until further notice.

General guidance for staff

- Wash and sanitize hands frequently
- Put six feet of distance between yourself and others, when possible
- Cover coughs and sneezes and immediately wash or sanitize hands
- Clean and disinfect frequently touched surfaces throughout the day
• Encourage mask wearing around other individuals, especially in areas of high transmission and if any individuals are unvaccinated

• Any medical questions from staff about exposure to the virus, including quarantine periods, should be directed to the employee’s primary medical provider or to the local health department. Guidance on isolation and quarantine from the Tennessee Department of Health can be found here.

**Guidance for COVID-19 vaccination**

• Foster parents and other care providers are entrusted with authority and responsibility for the daily upbringing and care of children in their care consistent with the child’s individualized circumstances and in consultation with the child’s medical provider, including routine authority for matters such as well-care treatment, vaccination, vision, and hearing.