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 may be updated at any time as more information is available. This guidance is not intended to address every potential scenario that may arise as this event evolves.

**Guidance for employees at Wilder Youth Development Center and Child Abuse Hotline.**

- All staff at the Hotline who are not working from home will be required to complete a daily health questionnaire prior to each shift.
- Following guidance from the CDC, COVID-19 symptom and temperature checks will be conducted on all employees at Wilder and other essential personnel (such as attorneys visiting youth and contract nurses) prior to entry into Wilder. Per CDC guidelines, those running a temperature of 100.4 or higher will not be permitted to enter Wilder.
- Employees who refuse to follow the guidance will not be allowed to enter the facility and will be required to use personal leave for the missed shift.

**Guidance for employees making face-to-face home visits in foster homes and CPS family visits**

*Effective November 1, 2020, based upon the recent upward trending in reported positive COVID-19 cases, the Department is recommending limited Face to Face visitation until further notice.*

- Face-to-face visits will continue for all initial CPS visits. Subsequent visits should utilize videoconferencing when possible unless there are safety concerns in the home, which warrant a face-to-face visit. This decision should be made in consultation with the supervisor.
- For youth placed in DCS or private provider foster homes, DCS FSWs should utilize videoconferencing except in circumstances where it is deemed appropriate/in the child’s best interest to have a F2F visit. In such instances, Health Department guidance for face to face visitation will be followed which includes use of masks and other PPE equipment if indicated.
- For youth placed on a Trial Home Visit (both D/N and JJ), DCS FSWs will visit the youth 1 time per month face to face in the home and the second visit can occur by video conference unless there are safety concerns in the home in which case more frequent visits may be indicated.
- Foster parent support staff may utilize videoconferencing for the monthly face to face home visit unless safety concerns indicate otherwise.
- For youth placed in private provider foster homes, private provider agency staff will utilize video conferencing for visits in the foster home, except in circumstances where it is deemed the child’s best interest, or the provider requires an in home face to face visit. All other required visits to meet requirements of contract/provider manual, can occur by video conference unless there are safety concerns in the home or the youth’s behaviors require more face to face visits to meet the child and family’s needs.
- For youth placed on a Trial Home Visit and being served by private provider agency, the agency staff will visit the youth a minimum of 1 time per month face to face in the home. All other required visits to meet requirements of contract/provider manual, can occur by video conference unless there are
safety concerns in the home or the youth’s behaviors require more face to face visits to meet the child and family’s needs.

- 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 risk based upon the most recent TDH guidance and CDC COVID-19 symptoms list.
  a. Have you had contact within the last fourteen days with any person under investigation for COVID-19, or with anyone with known or suspected COVID-19?
  b. Have you been exposed to anyone who has been tested for COVID-19? If so, have results been received? If no results received, then visitation should not occur until after the appropriate quarantine period.
  c. In the past 72 hours have you had nausea/vomiting, diarrhea, cough, sore throat, fever over 100.4, chills, shortness of breath, fatigue, muscle/body aches, headache, loss of taste or smell, congestion or runny nose? If so, document the results of the inquiry, complete a videoconferencing visit, and schedule a face to face visit for later in the month.

- Staff should adhere to standard safety practices during home visits such as social distancing and wearing masks.

**Guidance for DCS employees making face-to-face visits with youth in DCS or provider facilities**

*Effective November 1, 2020, based upon the recent upward trending in reported positive COVID-19 cases, the Department is recommending limited Face to Face visitation until further notice.*

- For youth placed in a congregate care setting, DCS FSWs should utilize videoconferencing except in circumstances where it is deemed appropriate/in the child’s best interest to have a F2F visit.
- 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 wear masks in addition to following all other CDC, TDH and provider guidelines. Additionally, regions should adhere to protocols that limit the number of staff visiting a facility and schedule in a manner that allows a minimum number of staff to see multiple children during a visit.

**Guidance on reporting**

- Staff will immediately report to Deputy Commissioner of Child Health, Dr. Deborah Lowen (Deborah.lowen@tn.gov) if any visitors to a DCS office have been exposed to, exhibit symptoms of, have been tested positive for COVID-19. This includes children, parents, foster parents and DCS staff.

**Guidance regarding court appearances**

- From the date of this document and until further notice, if the child/youth has a pending court date, DCS staff should check with the DCS attorney assigned to the case to ensure that the court date has not been re-scheduled.

**Guidance for visitors in DCS offices**

- All visitors should complete a health questionnaire to determine risk prior to visitations or meetings.
  a. Have you had contact within the last fourteen days with any person under investigation for COVID-19, or with anyone with known or suspected COVID-19?
b. Have you been exposed to anyone who has been tested for COVID-19? If so, have results been received? If no results received, then visitation will not be permitted.
c. In the past 72 hours have you had nausea/vomiting, diarrhea, cough, sore throat, fever over 100.4, chills, shortness of breath, fatigue, muscle/body aches, headache, loss of taste or smell, congestion or runny nose?
• No more than two visitors per staff member should be “scheduled” for an office visit at one time.

Guidance for travel
• Non-essential staff out-of-state travel has been suspended until further notice.
• Essential travel has not been affected at this time.
• Out of state travel request for foster children should be reviewed by Regional Administrator/JJ Director, then forwarded to Debbie Miller (Debbie.Miller@tn.gov) for final approval or denial.

Guidance for meetings
• If you have been pre-approved to attend any conferences or out-of-state meetings, please check with your Deputy Commissioner, Assistant Commissioner or Executive Director for further instruction.
• Large group meetings (10 or more participants) are suspended or have been rescheduled as a WebEx meeting until further notice. All in person meetings must follow the social distancing guidelines as well as all participants must wear mask or facial coverings.
• Non-essential trainings will be cancelled or rescheduled as a WebEx meeting until further notice.
• New Employee Orientations and Pre-service will continue under guidelines issued by the Training Division.

General guidance for staff
Staff should continue to follow these guidelines set forth by the TN Department of Health:

Everyone Should:
• Keep hands clean
  o Wash with soap and water for 20 seconds several times per day OR sanitize hands with an alcohol-based hand sanitizer that is at least 60% alcohol
  o Avoid touching the eyes and face with unwashed hands
• Avoid close contact
  o Put six feet of distance between yourself and others, when possible
• Cover mouth and nose with a mask or homemade cloth face cover when around others
  o A cloth face covering should be worn to protect you and others
  o N-95 and surgical face masks are not necessary for public interactions
  o Do NOT place face coverings on children younger than age 2 or unconscious individuals
  o Use of a face mask does NOT replace frequent hand washing
• Cover coughs and sneezes and immediately wash or sanitize hands
• Clean and disinfect frequently touched surfaces throughout the day
  o Remember doorknobs and handles, light switches, phones, faucets and sinks

Links to Tennessee Department of Health Guidance
General Guidance and Use of PPE by Non-Medical
Close Contact Guidelines
Case Guidelines