Addendum to Emergency Policy April 1, 2020 from Dr. Coleman, )100.06 of the Wayne County Policy Handbook, HHVS-JYS Department services for CMO, JAC, Prevention and Diversion Services implementation during State Directives regarding Covid-19 and duties regarding Wayne County Juvenile Justice youth:

Addendum to JJ Policy from HHVS-JYS Department Director Shenetta Coleman, PhD commensurate with DHHS Communication Issuance 20-032\* June 30, 2020

The following provides guidance for, Wayne County HHVS-JYS Department Providers regarding policy required face to face contacts, in response to COVID-19 health concerns. The safety and health of staff, children, parents, and caregivers is the HHVE-JYS Department's highest priority.

## By July 1, 2020, all face to face visits must occur according to policy, based on the health status of individuals involved and using guidance outlined below, and in the county/agency specific emergency plan.

If in person contact or in person participation is determined to be unsafe or infeasible due to local conditions, individual staff and/or case circumstances related to COVID-19 concerns, caseworkers should communicate with their supervisor for guidance on how to proceed with allowable methods of contact to mitigate risk of exposure or the spread of COVID-19. When in a person contact is not feasible providers must utilize alternative strategies to comply with weekly face to face contact requirements. Documentation of rationale for using an alternative method for contact must be entered into JAIS within the required timelines.

## ALLOWABLE ALTERNATIVES

Allowable alternatives include Skype, FaceTime, or other visual technological platforms that allows verification of child safety and ability to address identified concerns. Allowable alternatives should be documented within the social work case note contact section of JAIS for Wayne County Juvenile Justice Youth with the rationale "COVID-19" and a brief description of efforts made and contact accomplishments along with the allowable alternative used.

## **GUIDANCE FOR IN PERSON CASEWORK**

All visits and in person contacts should occur in accordance with applicable Executive Orders/policy addendums and using guidance below as outlined in the county/agency plan for resumption of in person casework activities.

1. **Staff and household members are healthy** – Ensure all involved participants and members of their respective households are not displaying symptoms of COVID-19, have fully recovered from any illness, including COVID-19, and have not had recent known exposure to anyone with COVID-19.

2. Screenings completed with "no" responses – The case worker or contact worker should inquire and document in JAIS the screening questions and responses. Ensure the following screening questions are asked of all involved participants/case members and inquired of for each participant's household members prior to in person contact:

a. <u>Is there any reason you have been instructed to self-quarantine or isolate? If yes,</u> <u>why?</u> <u>b. Have you had contact with any Persons Under Investigation (PUIs) for COVID-19</u> within the last 14 days, OR with anyone with confirmed COVID-19?

c. Do you have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, shortness of breath or difficulty breathing, chills, muscle pain, new loss of taste or smell, nausea or vomiting, diarrhea)?

3. In person contact is safe for all participants – If an individual is at high risk due to age, compromised immune system, or other risk factor, they may request that in person contact not occur. Caseworkers should honor this request but should discuss with their supervisor ways to resume visits/in person contact as quickly as possible; the matter should be escalated to your supervisor.

4. All participants have face coverings to use indoors and outdoors if medically able to **do so** – Children 2 years of age or older should be encouraged to wear a cloth face covering when they are within 6 feet of their parents to the extent that it does not lead them to touch their face more frequently or cause them to feel scared.

5. Social distancing (6 feet) is able to be maintained – Social distancing is not required among the parent, child and siblings during a visit.

6. The caseworker's supervisor is in agreement that the in person contact may be safely facilitated.