

Supporting Parent-Child and Sibling Visitation during the COVID-19 Pandemic: A Guide for CP&P Resource Families

Parent-child and sibling visitation is important now more than ever to reassure children that their parents and/or siblings are safe and to maintain and strengthen family bonds and positive attachment during an otherwise uncertain time.

In light of the COVID-19 pandemic and the need to protect the health of children, parents, resource families, and Child Protection and Permanency (CP&P) and service provider staff, the Department of Children and Families (DCF) is temporarily suspending all in-person visits. Related (relative) resource families who were already having regular ongoing contact may continue in-person visits if all parties agree and abide by standards to ensure the health and safety of participants.

In an effort to ensure that children and families continue to have meaningful contact during the COVID-19 pandemic DCF is asking for your support in certain situations to allow parent-child and sibling contact through the use of remote technology. This document provides guidance for resource parents on how to support parent-child and sibling visitation during the COVID-19 pandemic.

I. Role of Related and Unrelated Resource Families in Supporting Parent-Child Visits

Your CP&P case worker will discuss the family's visitation plan with you. Below please find an overview of the possible options for visits:

Visits Supported by CP&P or Providers

In some instances, parent-child and/or sibling visits are supervised by CP&P or a visitation provider for safety and/or risk concerns. This will continue through remote technology. If CP&P or a provider is conducting a visit, they will reach out to you to find a good time to conduct the remote visit.

Visits Supported by Resource Families

Talking to children and families about COVID-19

Remain calm and reassuring. Assure families that this is a new situation for all of us and that we are working together to keep them safe. Allow children and family members to talk about their concerns and respond with suggestions to help reduce anxious feelings.

Limit or monitor media exposure, particularly social media. Coach parents to rely on factual news sources and provide them links to the Department of Health, Centers for Disease Control and Prevention, or state and local official websites.

Maintain a routine as much as possible and focus on engaging the child in learning activities. Many schools, childcare centers, and businesses are closing temporarily or shortening their hours. Children or parents may be out of work. Encourage healthful activities, sleep routines, and schoolwork. Talk with parents about access to resources for food or other necessities.

Review hygiene and sanitization procedures to help foster a sense of safety. Provide factual information about the signs and symptoms of the virus and risk factors. Talk with families about screening visitors and avoiding congregate settings. In addition, details should be discussed related to social distancing, avoiding crowded areas, and maintaining a distance of approximately six feet from others when possible to minimize risk.

In many instances, families do not need supervision by CP&P or a provider. In these cases, DCF is asking resource families to assist children in their care to connect directly with their parents and/or siblings using remote technologies. (See *Section II: Remote Visit Technology*.) Especially for young children, resource families will need to help support parent-child contact, preferably through video technologies or by telephone. If children are older, less support may be necessary (To learn more about activities to do during remote visits, please refer to *Section III: Supporting Successful Remote Visits*.)

In-person Relative Visits

If related resource families were having unsupervised, in-person visits, they can continue if all parties agree and abide by standards to ensure the health and safety of participants. (See *Appendix A: Promoting Safe, Healthy In-Person Visits*.) When in-person visits are continuing, it is important to use the recommended pre-screening questions to ensure visits are safe and appropriate to occur. If a parent or child is unable to participate in an in-person visit because of sickness or health concerns, parents, resource caregivers, CP&P, and service providers will collaboratively identify alternative ways to allow parent-child and sibling contact to continue until all parties are healthy. (See *Section II: Remote Visit Technology*.)

II. Remote Visit Technology

Resource Parents may use two-way audio/visual communication technology. Services such as Zoom, Webex, Skype, Facetime, Google Duo, etc. may be used. Resource families and parents will need a device (smart phone, tablet, laptop, or desktop) with an internet connection, microphone, and a camera for video conferencing technology. If not available, parent-child visitation should be conducted using another remote alternative, which may include electronic communication (telephone contact, and if not available, email), or by mailing pictures, drawings or at a minimum letter writing. Telephone contact may be used for facilitating parent-child visits with an incarcerated parent.

DCF will continue working on plans for families that do not currently have the technology to participate in visits.

III. Supporting Successful Remote Visits

Resource families may consider the following activities to support successful remote parent-child and sibling visits. Keep in mind that remote visits, especially with young children, will require work to keep the interactions going but resource families should try to watch for opportunities where you can fade into the background and let the parent engage with her or his child.

Activities for Infants:

- Put toys in front of the child, and let the parent watch the baby play.
- Talk with the parent about the baby's likes and dislikes and current routines.
- Older babies can sit in a highchair and eat or play during the visit.

Activities for Toddlers:

- Try asking the child questions about what they are doing, such as: "Where are you going?"; "What are you doing right now?"; or "Where are you running to so fast?"
- Set out favorite snacks to help the child stay occupied during the visits.
- Go with the flow of what children are doing rather than trying to gain their focus.

Activities for Preschool-Aged Children (3-5 years old):

- Set out toys for the child at the beginning of the visit and engage in some pretend play with the child.
- Set up a teddy bear picnic and set the phone or computer with the parent up on a small chair so the child can serve them tea and pretend cookies.
- The parent can read a book to the child.
- The child can give the parent a tour of their room, their artwork, or their favorite toys.

Activities for Younger, School-Aged Children (6-10 years old):

- Ask the children what they want to do during their virtual visit. Help them brainstorm some things they want to show their parents or things they would like to do together.
- Try to figure out an activity parents and children can do together. This can be a shared experience like dual art projects (coloring or drawing together).
- Read a book.

Activities for Older, School-Aged Children (11+ years old):

- Involve the child/youth in planning the virtual visit.
- Ask youth what they would like the visit to look like, where they want it to occur, etc.
- Talk about day to day activities, how learning is going.
- Parents and children can do a learning activity together.
- Parents and children can create a book for each other while contact is limited, like a journal.
- Bake or cook together. Parents can talk a child through making a favorite family dish.

IV. Ending or Suspending Remote Visits

Parent-child and/or sibling visits that happen using remote technology should be ended if the following exists:

- People who CP&P said are not allowed to be in visits appear in the video conference and a warning was provided.
- Aggressive or inappropriate language and/or behavior is used during the video conference.

CP&P staff should be notified immediately following the visit that had to be ended to follow up with the parent and/or sibling. Repeatedly ended visits could ultimately result in suspension of visits.

Questions regarding this guidance for supporting parent-child and sibling visitation during the COVID-19 pandemic should be directed to your CP&P case worker or Resource Family worker.

Appendix A

Promoting Safe, Healthy In-Person Visits

Related resource families who were already having regular ongoing contact may continue in-person visits if all parties agree and abide by standards to ensure the health and safety of participants. Families should use the following guidelines before, during and after in-person visits:

- **Ask the below screening questions** of all visit participants and for all household members of participants. If answers to any of the questions are “yes”, do not hold an in-person visit and use remote technologies instead.
 1. Have you or has anyone in your household come into contact (within 6 feet for 10 minutes or more) with any person known to be under investigation (PUI) for exposure to COVID-19 or anyone with COVID-19?
 2. Do you or any members of your household have any symptoms consistent with COVID-19 infection (cough, fever, shortness of breath)?
 3. Have you or any member of your household tested positive for COVID-19 in the past 14 days?
- **Limit the number of individuals involved in visits** and especially avoid large groups of people (10+ people).
- **Avoid handshakes.**
- **Thoroughly wash your hands** prior to starting the visit and following the visit.
- **Avoid touching your face, mouth and eyes.**
- **Cover your mouth with a tissue when sneezing and/or coughing** or do so into your elbow.
- **Visit outdoors** when possible. If visiting indoors, do your best to ensure the visiting space is thoroughly cleaned and sanitized before and after visits.