Child Welfare Worker Safety in the Time of COVID: CDC Recommendations for In-Person Interactions with Families
Welcome

Jerry Milner,
Associate Commissioner,
Children’s Bureau,
Administration for Children, Youth and Families
Introductions

Julie Fliss, MSW
Child Welfare Program Specialist,
Children’s Bureau,
Office on Child Abuse and Neglect
Recommendations from the CDC

Jennifer E. Lincoln, MS, MEd, COMS
Health Scientist
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health
Overview of Presentation

• COVID-19 Prevention and Control
• What Child Welfare Employers Should Do
• What Child Welfare Employees Should Do
COVID-19: How it Spreads

• The virus is thought to spread mainly from person to person.
  – Between people who are in close contact with one another (within about 6 feet)
  – Through respiratory droplets produced when an infected person coughs or sneezes

• These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
Prevention & Treatment

Everyday preventive actions for respiratory illnesses

- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with others, including people who are sick.
- Stay home as much as possible, especially when you are sick.
- When in public, wear a cloth face covering that covers your mouth and nose.
- Cover your cough or sneeze with a tissue, then throw it away.
- Clean and disinfect frequently touched objects and surfaces.
- Wash your hands often with soap and water for at least 20 seconds.
  - Use an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not readily available.

Treatment

- No specific antiviral treatment licensed for COVID-19
- Supportive care to
  - Relieve symptoms
  - Manage pneumonia and respiratory failure
Social Distancing

• Also called “physical distancing”; keep space between yourself and others
• Can help slow ongoing spread of respiratory illnesses, like COVID-19
• This can include:
  – Personal protective measures
    • Maintain at least 6 ft. from others in public
    • Stay home if exposed or sick
  – Community measures
    • Postpone or cancel mass gatherings
    • Dismissal of schools
    • Encourage telework

Cloth Face Coverings

- CDC recommends wearing cloth face coverings in public settings.
- Cloth face coverings can help people who may have the virus and do not know it from spreading it to others.
- Wearing cloth face coverings may be difficult for individuals with physical, sensory, cognitive, or behavioral impairments, and is not recommended for children under 2 years or anyone who has trouble breathing or is unconscious, incapacitated or otherwise unable to remove the covering without assistance.

Cloth Face Coverings

• Cloth face coverings should:
  – Fit snugly but comfortably against face
  – Be secured with ties or ear loops
  – Include multiple layers of fabric
  – Allow for breathing without restriction
  – Be able to be laundered and machine dried without damage or change to shape
  – Should not be used by anyone who has trouble breathing, is unconscious, incapable or otherwise unable to remove the mask without assistance
  – Cloth face coverings should be washed after each use.
What Employees Can Do If They Get Symptoms

- Notify their supervisor and stay home if they have symptoms.
- Most people recover at home without needing medical care.
- Stay away from people as much as possible.
- Wear a cloth face covering over their nose and mouth if they must be around other people, even at home.
- Keep your distance and cover their coughs and sneezes if they must be around other people.
- Clean their hands often.
- Avoid sharing personal household items.
- Clean and disinfect frequently touched objects and surfaces.
- Monitor their symptoms for emergency warning signs, including trouble breathing.
- Follow CDC guidelines for returning to work.
- Follow CDC precautions for employees with sick family members.

Seek medical care quickly if you have emergency warning signs, such as:
- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or are not able to be woken
- Bluish lips or face

How to Discontinue Home Isolation

• Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:
  • Symptom-based strategy:
    – At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
    – At least 10 days have passed since symptoms first appeared.
  • Test-based strategy: Resolution of fever without the use of fever-reducing medications and
    – Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
    – Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens).

What Employers Should Do
COVID-19 Workplace Reopening Decision Tool

Have you met the criteria to consider reopening?

Are recommended health and safety actions in place?

Is ongoing monitoring in place?

Maintain Healthy Business Operations During COVID-19

- Have safety officer responsible for COVID-19 issues at each jobsite.
- Communicate with local public health officials related to local outbreaks.
- Recognize that some employees may be at higher risk for serious illness.
- Remind employee that adequate sleep (7-9 hours) is critical.
- Notify coworkers of potential exposure and assist local health department staff with contact tracing.

Keep Employees Informed About COVID-19

• Provide accurate information about COVID-19, how it spreads, risks of exposure.

• Train on prevention strategies.

• Consider using a hotline for employees to voice concerns.

• Encourage employees to ask questions on guidance.
How Can Employers Protect Child Welfare Workers

- Implement social distancing strategies.
- Provide paperless documentation solutions.
- Implement options for virtual meetings.
- Offer virtual training.
- Train employees on proper hand washing practices and other routine preventative measures.
- Train employees on proper disinfection practices for vehicles and other surfaces.
- Train employees on safe child transport, residence entry, and meetings.
- Provide employees PPE and disinfection supplies and training on how to use them.
How Can Employers Hold Safe Meetings

• Conduct virtual meetings.
• Consider whether to alter or halt groups or visitation activities.
• Ensure meeting facilities follow recommended COVID-19 safety practices, such as:
  – Screen children and families
  – Wear face coverings
  – Limit the number of families at facilities
  – Clean and disinfect regularly

Clean and Disinfect Common Spaces

• Clean and disinfect frequently touched surfaces.
• Notify cleaners and maintenance workers when it is suspected that an infected passenger was in a vehicle.
• Conduct frequent cleaning of employee break rooms, meeting rooms, toys and games, playground equipment, rest areas, sink handles, door and refrigerator handles, light switches, desks, chairs, keyboards, mouse, and other common areas.

Clean and Disinfect Toys in Offices

- Clean and disinfect toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions.
- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned.
- Children’s books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

Clean and Disinfect Vehicles

• Clean and disinfect frequently touched surfaces after transporting children, including frequently touched vehicle surfaces, such as car keys, steering wheel, seatbelts, seat covers, gear shifts, seat adjustment levers, windows, door handles, turn signals, vehicle dashboard, digital touchscreen, and other touched surfaces.

• Provide drivers with:
  – Disposable disinfectant wipes
  – Alcohol-based sanitizers for the vehicle
  – Tissue and disposal receptacles for the vehicle

What Employees Should Do
Potential Sources of Exposure of Child Welfare Workers to COVID-19

• Close contact with:
  – Co-workers
  – Children and Families
  – Foster Families
  – Adoptive Families
  – Therapist and Doctors
  – Child Welfare/Advocacy Team
  – Court Staff and Law Enforcement
How Can Child Welfare Workers Ensure Safe Residence Entry

- Meet outside if possible.
- Before entering a residence for work, conduct a COVID-19 awareness pre-entry assessment.
- Ask if anyone in the building has been diagnosed with COVID-19 or is currently experiencing symptoms.
- Ask that ill persons be moved to another area of the building while you complete the task.
- Inform all occupants that you will be practicing safe social distancing.
- Ensure everyone wears a cloth face covering.
- Your cloth face covering should be put on outside of the home prior to entry.
- If pets are present ask that they also be moved.
- Wear face covering and gloves when handling items like clothing, medicines, and toys.
- Practice good hand hygiene.
How Can Child Welfare Workers Ensure Safe Transport

• When transporting children who do not have COVID-19 or COVID-19 symptoms:
  – Practice social distancing
  – Wear cloth face coverings
  – Ask children to wear cloth face coverings unless they are having trouble breathing, they cannot put on or remove a mask on their own or with the help of an aide, or they are under the age of 2
  – Seat children farthest from the driver
  – Practice good hand hygiene
  – Avoid using the recirculated air option
How Can Child Welfare Workers Ensure Safe Appointments and Meetings

• Conduct virtual meetings.
• Screen children and families.
• Practice social distancing.
• Wear face coverings.
• Follow COVID-19 safety guidelines given by doctors offices and state and local offices.
• Limit number of children and family members at meetings.
• Practice good hand hygiene.

How Can Child Welfare Workers Ensure Safe COVID-19 Contact

- Identify available non-emergency medical transport options for children with known or suspected COVID-19.

- When no alternative non-emergency vehicle is available and it is necessary to transport a passenger with confirmed COVID-19 or symptoms of COVID-19 or who have had close contact in the past two weeks with someone with confirmed COVID-19:
  - Contact your employer if you feel unsafe transporting the passenger or if you are at higher risk of severe illness.
  - Employee should wear an N-95 respirator or facemask (if a respirator is not available) and eye protection such as a face shield or goggles (as long as they do not create a driving hazard), and the child passenger should wear a facemask or cloth face covering. Wear the N-95 and eye protection before contact with children.
  - If employee must provide any sort of assistance to the sick passenger, also wear a gown and gloves.
  - Ensure the child over the age of 2 wears a face mask or cloth face covering, unless they have trouble breathing, is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

How Can Child Welfare Workers Ensure Safe COVID-19 Contact Continued

• Use larger vehicles such as vans to avoid or limit close contact (within 6 feet) with others.
• Avoid using the recirculated air option.
• Employees should practice regular hand hygiene, avoid touching their nose, mouth, or eyes, and avoid picking up multiple passengers who would not otherwise be riding together.
• After transporting the passenger, employees should clean and disinfect the vehicle, then remove N-95, eye protection, gloves, and gown, and clean your hands. Follow standard operating procedures for the containment and disposal of used PPE.
• After work shift, employees should launder the work uniform/clothes worn when transporting sick child.

In Summary: How Child Welfare Workers Can Protect Themselves

- Limit close contact (i.e., social distancing).
- Wear a cloth face covering if social distancing is not possible.
- Practice proper hand hygiene.
- Frequently clean and disinfect vehicles and other surfaces.
- Seat children as from the driver as possible.
- Wear an N-95 or facemask (if a respirator is not available) and eye protection if transporting a child with known or suspected COVID-19.
Factsheets

Get more recommendations employers by visiting:
More Information


• NIOSH Workplace Safety and Health Topic:  www.cdc.gov/niosh/emres/2019_ncov.html


Thank you!

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.
Example from the Field: A Facilitated Discussion

Linda D. Sagor, MD, MPH
Medical Director, Massachusetts Department of Children and Families
Professor of Pediatrics, University of Massachusetts Medical School
Executive Board member, Council on Foster Care Adoption and Kinship Care, American Academy of Pediatrics
CONFIDENTIAL & PERSONAL INFORMATION

Date: 6/4/20

Office Location/Staff Reporting/Program: Worcester East area office

Person in question: JCR

DOB (if available): 5/2/2018

Position (foster parent, child in custody, staff person, etc.):
- Check: Foster child (child in placement):
- Check: Consumer child (child at home)
- Check: Consumer adult (parent or family member)
- Check: DCF Foster Home (parent or household member)
- Check: CFC Foster Home (parent or household member)
- Check: Other

If foster parent, name(s) and age of children in home:

<table>
<thead>
<tr>
<th>Area Office</th>
<th>Foster (Y/N)</th>
<th>Consumer Name</th>
<th>Exposed (Y/N)</th>
<th>Symptomatic (Y/N)</th>
<th>PCP Contacted (Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEAO</td>
<td>Y</td>
<td>BLM</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>WEAO</td>
<td>Y</td>
<td>HRM</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
</tbody>
</table>

If child, type of placement if applicable: Kinship

CONCERN(S):
Describe symptoms and the date of symptom(s) onset:
- Cough, low-grade fever started 5/30

Tested for COVID-19: Yes ☑ No ☐

Date of test: 6/1/20

Results: Negative

Direct Exposure to COVID-19+: Yes ☑ No ☐
If yes, please explain: Foster parent (mother) developed symptoms of cough, fever, and headache—the tested COVID-19+ on 5/29. Her symptoms are resolving.

Exposure to someone in quarantine for exposure to COVID-19+ person (or even more distant exposure): Yes ☑ No ☐
If yes, please explain: Foster mother is in isolation and entire family will quarantine for 14 days. Foster father is taking care of all children.

CONFIDENTIAL & PERSONAL INFORMATION

DPH/PCP CONSULTATION:
- Has PCP been contacted: Yes ☑ No ☐ If so, advice given: Entire household should quarantine for 14 days.
- Has DPH been contacted: Yes ☑ No ☐ If so, advice given:
DON'T hug face-to-face

DON'T hug cheeks together, facing the same direction.
PLEASE AVOID!!!
facing opposite directions
When HATE gets LOUD
Love Must Not Be SILENT
Resources

- **Crucial Self-Care in the Coronavirus Crisis**

- Interim CDC Guidance on Handling Non-COVID-19 Public Health Activities that Require Face-to-Face Interaction with Clients in the Clinic and Field in the Current COVID-19 Pandemic

- Children’s Bureau COVID-19 Resources:

- Child Welfare Information Gateway: [www.childwelfare.org](http://www.childwelfare.org)

- National Child Welfare Workforce Institute: [www.NCCWI.org](http://www.NCCWI.org)

Please see downloads for additional information on resources.
Questions?