**[ Insert County] IN-PERSON VISITATION AGREEMENT**

Face-to-face contact between parents/caregivers and children in out-of-home care is essential to the welfare of both children and their parents, and contributes to timely, positive permanency outcomes for children. While protecting the health and safety of children, youth and families is of paramount importance, so too is ensuring that parents/caregivers and children have time together to maintain and strengthen connections. Towards that end, the guidance contained in this visitation agreement will support you and your child (ren) staying healthy through the use of best-practice safety measures.

Parents participating in in-person visitation with children in [ Insert County]custody must review and sign a copy of this visitation agreement prior to resuming in-person visits. Once signed the visitation agreement and the procedures laid out within it apply for all in-person visits until you are notified otherwise by [ Insert County].

Facilities that are providing congregate care, group home care, or mental health/intellectual and developmental disabilities services may have their own set of guidelines and requirements for visitation. Child Welfare Workers should contact these facilities prior to scheduling visitation to ensure that these guidelines are being followed.

**I. General**

a. All visit participants must be approved in advance by [ INSERT COUNTY]. [ INSERT COUNTY] will seek to minimize the risk of coronavirus transmission by limiting the number of participants to only the parent(s) and child(ren) whenever possible.

**II. Exceptions to In-Person Visitation**

a. No in-person visit will occur if a visit participant (including the child, parent, and visit supervisor) is experiencing signs of illness (as indicated by the Pre-Screening Health Questions, Attachment A), has recently traveled, or had known exposure to COVID-19.

b. No in-person visit will occur if [ INSERT COUNTY] determines that in-person contact would increase the risk for vulnerable individuals who are either participating in the visit or are caring for children who are visiting. Every effort will be made to mitigate the risk and allow for in-person visits.

i. Vulnerable individuals: Some children and youth with underlying health conditions for whom continuing virtual visits remains in their best interest. In these cases, a consultation with a medical provider prior to resuming in-person visitation will be necessary.

c. No in-person visit will occur if the parent refuses or is otherwise unable to wear a cloth face covering during the visit.

**III. Visit Schedule**

a. The visit schedule may be modified as [ INSERT COUNTY] seeks to minimize all parties’ risk of exposure to coronavirus. The social worker will work in collaboration with the parties involved to schedule visits.

c. The location of visits may be changed. [ INSERT COUNTY] is seeking to conduct visits outside or in other large open spaces whenever possible. When planning the location of the visit the caseworker will consider the confidentiality and safety of the visit participants.

**IV. Cloth Face Coverings**

a. A cloth face covering must be worn by parents during the visit. If the parent is unable or unwilling to wear a face covering during the visit, then a video or telephone conferencing visit will be held instead. If parents do not have a face covering, they should consult with staff on how to obtain one.

b. All other adult visit participants must wear a cloth face covering during the visit.

c. Whenever possible cloth face coverings will be provided for all children age two and older. They should be encouraged to wear them, but no visit will be cancelled due to a child’s inability or unwillingness to wear their face covering. Note that cloth or disposable face coverings should not be worn by children under the age of 2, or by an individual who is unable to remove their face covering on their own.

d. The CDC recommends the use of a cloth face covering when it is difficult to stay physically distant. All visit participants are required to wear a face covering when traveling to and from the visit in county vehicles. Face coverings are not recommended for children under the age of two.

e. All visit participants should follow CDC guidelines regarding the use of cloth face coverings, including:

i. Washing hands before putting the face covering on;

ii. Making sure both mouth and nose are covered;

iii. Hooking the loops around ears or tying the face covering snugly around the head;

iv. Refraining from touching the face covering or pulling it down during use;

v. Removing the face covering without touching eyes, nose, or mouth and immediately washing hands after removal; and

vi. Washing the face covering between uses and ensuring it is completely dry before using it again.

**V. Transportation**

a. No visit participant should be transported by anyone who is sick or self-isolating due to close contact with someone who has tested positive for COVID-19 or who suspects they may have COVID-19.

b. It is recommended that everyone in the vehicle wear a cloth face covering. Note that cloth or disposable face coverings should not be worn by children under the age of 2, or by an individual who is unable to remove their face covering on their own.

c. Drivers should avoid recirculating air through the cars’ ventilation systems during passenger transport. Drivers are strongly encouraged to open windows or allow passengers to lower the vehicle windows, according to CDC guidelines.

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/rideshare-drivers-for-hire.html>

d. Parents will not be permitted to get their children out of the car or car seat or put them back into the car or car seat. Parents should remain at least 6 feet from the child’s transportation vehicle and its driver.

e. All vehicles should be disinfected prior to and after each use.

**VI. Pre-Screening**

a. Before each visit the visit supervisor will contact the parent to review the Pre-Screening Health Questions (Attachment A). If the parent answers yes to any of the pre-screening questions, the in-person visit will be postponed, and telephone or video conference visits will be held until the risk of coronavirus transmission has resolved.

b. Social Workers are expected to pre-screen the child(ren) the morning before the visit. All other visit participants are expected to pre-screen themselves before leaving for the visit.

c. According to the Centers for Disease Control symptoms may appear 2-14 days after exposure to the virus. People with the following symptoms or combinations of symptoms may have COVID-19:

* Questions to consider include, have I (or has the child):

i. Been in close contact with anyone with COVID-19 in the last 14 days?

ii. Experienced any of these symptoms in the last few days:

* + Cough
	+ Shortness of breath or difficulty breathing
* Or at least two of these symptoms:
	+ Fever
	+ Chills
	+ Repeated shaking with chills
	+ Muscle pain
	+ Headache
	+ Sore throat
	+ New loss of taste or smell.

 iii. Recently experienced a fever of 100.4 degrees or higher? (Temperature should be taken to determine the answer to this question.)

d. If the answer to any of the above questions is yes, then the person should not attend the visit in-person. The social worker and/or supervisor should be notified immediately.

e. When answering these questions, a visit participant or resource parent should consider whether anyone in their or the child’s household has experienced any of these signs or symptoms in the last 14 days. If so, the visit participant or child should not attend the visit in-person and the caseworker and/or supervisor should be notified immediately.

**VII. Visit Supervision**

1. Visit supervisors are expected to immediately end the in-person visit if a visit participant begins exhibiting signs or symptoms of COVID-19.

**VIII. Visit Procedures**

a. Parents are required to wear a cloth face covering at all times during the visit. If a parent refuses to wear a cloth face covering the visit will be cancelled or terminated.

b. Handwashing/Use of Hand Sanitizer

i. All visit participants (including the supervisor of the visit, parent, child, and any other visit participant) will be required to wash their hands with soap and water for at least 20 seconds or use hand sanitizer:

1. At the beginning of the visit;

2. After any visit to the bathroom (whether for themselves or to assist a child);

3. After diapering;

4. Before and after preparing food, snacks, or drinks;

5. Before and after eating food, handling food, or feeding children;

6. After playing outdoors;

7. After blowing one’s nose or helping a child blow their nose;

8. After sneezing or coughing;

9. After coming into contact with any bodily fluid; and

10. After handling garbage or cleaning up.

ii. Visitation supervisors will make every effort to have hand sanitizer available during the visit, but hand sanitizer should not be considered an alternative to hand washing.

 iii. Parents and visit supervisors should be encouraged to engage the children in frequent hand washing during the visit.

c. Toys and activities

i. Due to the need to minimize the spread of coronavirus and the difficulty of sanitizing fully between each visit, toys and items that cannot be easily cleaned must be removed from visitation rooms, including stuffed animals, dolls, toys, and books.

ii. Children should only bring one (1) comfort item or toy that can be easily washed, some children may need to have additional items such as a change of clothing or diapering supplies.

iii. No toys should be brought to visits if they cannot be cleaned, sanitized, or washed before and after the visit.

iv. Resource parents bringing toys to visits should immediately sanitize the toys upon returning home.

d. Parents and visit supervisor should encourage children not to touch their own eyes, nose, or mouth or the eyes, nose, or mouth of others during the visit. This should be done in an age-appropriate manner that considers the developmental level of the child.

e. Food and drinks

i. Parents bringing food and/or drinks for their child are expected to prepare these items with clean hands in a sanitary environment and transport them in closed containers that are clean.

f. Physical distancing

i. Adult visit participants are expected to maintain appropriate physical distance (at least 6 feet at all times).

ii. Children are not expected to maintain physical distance. When possible, parents should engage in activities that minimize close physical proximity.

iii. Visit supervisors may need to get closer to visit participants depending on the level of supervision directed by [ INSERT COUNTY].

g. Cleaning procedures

i. Before each visit held in a [ INSERT COUNTY] visitation room, staff will thoroughly clean and disinfect the space including, all furniture, bathrooms, door handles and handrails, etc.

I have read the above Visitation Agreement and had the opportunity ask questions regarding any portions of the Agreement I am unsure about. I understand the requirements outlined in this Agreement are critically important to ensuring my health and safety, as well as the health and safety of my child(ren), their caregivers, and any other visit participants. I further understand that failure to abide by the requirements in this Agreement could result in the immediate termination of an in-person visit and/or the suspension of in-person visits scheduled in the future.

I agree to abide by the requirements of this Agreement.

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Visit Participant Date

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[Insert County] Child Welfare Worker Date