

 <p>Children's Services Agency</p> <p>Communication Issuance</p> <p>20-060* *Revised 8/17/20 Prior versions obsolete</p>	Subject/Title	COVID-19 Response: Initial Placement-Placement Change and Best Practices for COVID-19 Positive Individuals
	Type	<input checked="" type="checkbox"/> Informational Memorandum <input checked="" type="checkbox"/> Program Instruction <input type="checkbox"/> Policy Guide
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Distribution	<input checked="" type="checkbox"/> CSA Central Office Managers/Staff <input checked="" type="checkbox"/> MDHHS BSC and County Directors <input checked="" type="checkbox"/> MDHHS Juvenile Justice Managers/Staff <input checked="" type="checkbox"/> MDHHS Child Welfare Managers/Staff <input checked="" type="checkbox"/> Native American Tribes <input checked="" type="checkbox"/> Office of Workforce Development and Training <input checked="" type="checkbox"/> Private Agency Child Welfare Managers/Staff <input checked="" type="checkbox"/> Private Residential Abuse/Neglect Managers/Staff <input checked="" type="checkbox"/> Private Residential Juvenile Justice Managers/Staff <input type="checkbox"/> Other:	

This version replaces prior versions of 20-060. Prior versions are obsolete.

The following provides guidance for children's protective services (CPS), foster care, and juvenile justice caseworkers regarding initial placements, replacements, respite care, and travel in response to current COVID-19 health concerns. Also included are best practices for caring for youth who have or are being placed in a home with someone who has symptoms or confirmed COVID-19.

Caseworker Responsibility

Prior to each placement or replacement of a child into a family home setting, caseworkers must inform caregivers of the child's health status. Caseworkers should ask the following screening questions of all household members in the child's current home or placement and the child's prospective home/placement(s):

1. Is there any reason you have been instructed to self-quarantine or isolate? If yes, why?
2. Have you had contact with any Persons Under Investigation (PUIs) for COVID-19 within the last 14 days, or with anyone confirmed to have COVID-19?
3. Do you have any symptoms of COVID-19 (e.g., fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea)?

In cases where placement must occur and someone in the removal household has COVID-19 or symptoms of COVID-19, caseworkers must inform the prospective placement setting, without providing identifying information. If the child has symptoms at the time of placement or subsequently develops symptoms, the child's parent or placement caregiver should contact the child's physician. If anyone in the child's removal household or prospective home reports symptoms, advise the individual to contact their health care provider.

Best Practices - Caring for Children with Symptomatic or Confirmed COVID-19

Children being placed into foster care or needing a replacement may develop COVID-19 or symptoms consistent with COVID-19. During this health emergency, it is important that we work together to find each child a loving, least restrictive placement setting and support caregivers to meet each child's physical, medical, and emotional needs. The following guidelines should be followed:

- Watch for signs or symptoms of COVID-19, such as fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.
- If the child has symptoms, immediately contact the child's doctor by phone and notify the caseworker.
- Keep the sick child at home and separated from others as much as possible.
- Have the child sleep in a separate "sick room" and use a separate bathroom if available.
- Follow Centers for Disease Control and Prevention (CDC) guidance on "[What to do if you are sick.](#)"
- If others in your home are at particularly high risk for severe illness from COVID-19, consider extra precautions to separate the sick child from those people.
- Make sure children practice every day preventive behaviors, such as washing their hands often with soap and water for at least 20 seconds. This is especially important if you have been in a public place. If soap and water are not available, clean hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Clean and disinfect high-touch surfaces daily in household common areas (e.g. tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks).
- Launder items including washable plush toys as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from a sick child can be washed with other people's items.
- Support children through this difficult time. [Talking to Children About COVID-19](#)

Incident Reports

Please see Communication Issuance 20-061 regarding notification and incident report requirements for youth who develop symptoms or are diagnosed with COVID-19.

Respite Care

Respite care may occur utilizing screening questions for all participants and household members. Respite should not occur if screening criteria indicates any "yes" responses.

Reunification

If consistent with the case plan, reunification assessment, and court order, caseworkers should continue to reunify children as soon as possible. There are no COVID-19 related restrictions on placing a child with their parent in accordance with case plans and court orders.

Travel

Discretionary travel for children under the care and supervision of MDHHS may occur in compliance with [Executive Order 2020-160](#) or applicable subsequent Executive Orders. Precautions for how to stay safe when leaving your home can be found on the [CDC website](#).