



**State of Florida  
Department of Children and Families**

**Ron DeSantis**  
Governor

**Chad Poppell**  
Secretary

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**DATE:** July 23, 2020

**TO:** Regional Managing Directors  
Sherriff Offices Conducting Child Protective Investigations  
Community-Based Care (CBC) Lead Agency CEOs

**THROUGH:** Patricia Babcock, Deputy Secretary *Patricia Babcock*

**FROM:** Patricia Medlock, Assistant Secretary for Child Welfare *PM*  
Robert Anderson, Assistant Secretary for Operations *Robert H. Anderson*

**SUBJECT:** Home Visits and Visitation

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**PURPOSE:** The purpose of this memorandum is to provide guidance for transitioning to safe, physical face-to-face visits that must be completed by Child Protective Investigators, Case Management, and service providers conducting home visits. The guidance will further provide recommendations for ensuring safe, physical child and parent and/or child and sibling visits.

**BACKGROUND:** Beginning March 23, 2020, the Department of Children and Families transitioned to allowing tele-visits as a means for completing the 30-day face-to-face requirement outlined in federal and state policy. This guidance was put in place in an effort to ensure the safety of the staff conducting physical contact visits with children and families served through the child welfare system, including the children and caregivers for those served in out of home and in home care, and children and families served through Family Support Services for high/very high risk families.

Safe home visiting guidance and personal protective equipment (PPE) were provided to staff (enhanced version attached).

DCF and the Community-Based Care network are implementing the following steps in effort to ensure the ongoing safety of the children we serve collectively:

1. The Department and Sheriff's Offices responsible for Child Protective Investigations will continue to investigate all reports of abuse, neglect, and abandonment per current policies while adhering to the PPE and safe home visiting guidance (enhanced version attached).

2. Community-Based Care lead agencies will review and update their DCF-approved COVID-19 Guidance Plans by August 1, 2020; and as needed throughout the duration of the pandemic.
3. Community-Based Care lead agencies will conduct an updated safety assessment (contained within their COVID-19 Guidance Plans) of each child served through in home, out of home, preadoption, Family Support Services and EFC to determine children that have not received an in home, physical face-to-face visit in the last 90 days. They will conduct subsequent assessments every 30 days to determine whether a physical face-to-face visit should occur, or determine it is safe to conduct virtual visits.

Careful consideration should be given for those communities experiencing exceptionally high COVID-19 positive rates, in concert with the safety assessment and needs of the child, to make a determination when a physical face-to-face visit should occur.

Children who can safely receive a physical face-to-face visit, who are not already deemed unsafe or high risk needing more frequent visits, must receive a physical face-to-face, at minimum once every 90 day period, dependent on careful safety assessments being completed to address that child's specific circumstances. Again, at any time concerns are noted, or a new report of abuse/neglect is received on an open services case, children must be seen physically face-to-face until risk is remedied and transitioning to virtual visits is approved by the manager. It is preferable that alternating physical and virtual visitations occur every other month.

4. For this initial transition to safe, physical visits during the month of August, Community-Based Care lead agencies or case management organizations will conduct a physical face-to-face for applicable children by August 31, 2020 and document according to existing policy in FSFN, ensuring to indicate that the visit was a physical face-to-face contact in the notes.
5. Provide a listing of children who do not receive a physical face-to-face to the Regional Managing Director by September 5, 2020 with one of the exception reasons selected.

*Exception Reasons:*

- COVID-19 Positive and/or Exposure
- Exceptionally vulnerable to COVID-19 - This could include caregivers or children with medical conditions, compromised immune systems, or other conditions which place them in vulnerable categories to COVID-19.
- Medical or Behavioral Health placement type as outlined: specialized group care, therapeutic foster or group care, SIPP placements, medical homes, skilled nursing homes, or out of state residential care placements where licensed behavioral health and or medical professionals are providing input and insight as to the child's wellbeing and safety during the virtual visitation.

**Parent and Sibling Visitation:**

6. Follow current guidelines in place through the administrative order that allows for virtual visits to occur between children and their parents, as well as between siblings when possible.
  - When physical face-to-face visits occur, it is strongly encouraged to arrange for the visit in a safe, outdoor area that is monitored to ensure social distancing and other CDC recommendations are followed. The family should be assessed for COVID-19 symptoms and exposure through questions contained in the safe home visiting guidelines, and participants are requested to wear PPE during the visit to prevent the spread of COVID-19 to the child if they have available and/or that may be required by a county or municipal ordinance in which the visitation occurs; the child should wear PPE as age appropriate and available, and again as may be required by county or municipal ordinance.
  - When youth leave the facility for family or sibling visitation without supervision, to the extent possible, conduct an assessment of that parent/caregiver for COVID-19 symptoms and exposure. If there are concerns noted, the case manager should notify their supervisor immediately for guidance and legal advice if a formal legal request to alter visitation requirement is needed. When these type visits occur, the parent/caregiver should be advised of CDC guidelines and requested to follow for the protection of the child and all in the placement home upon return.

- At any time, if there are serious concerns for vulnerable persons within the home and the visits should occur only virtually, case managers should always seek supervisory consultation and legal consultation when needed.

**ACTION REQUIRED:** The lead agency is expected to ensure all children on their active cases are thoroughly reviewed for ability to conduct a safe, physical face-to-face visit and that the visits are documented in FSFN. The lead agencies are expected to approve those children in sanctioned settings who do not require a physical face-to-face visit, or other exceptions per above.

The safety of our front-line workforce is critical to this effort and all efforts being made each day to ensure those we serve and those who serve are safe and can protect themselves. The attached guidelines for field visits are always expected to be followed to the fullest when contact is made with our children and families.

Please share this memorandum and attachment with all appropriate staff in your regions, circuits, sheriff offices that conduct child protective investigations, Community-Based Care lead agencies, and subcontracted providers, as appropriate.

**CONTACT INFORMATION:** If you have any questions or need clarification regarding this memorandum, please do not hesitate to contact me at [Patricia.Medlock@myflfamilies.com](mailto:Patricia.Medlock@myflfamilies.com).