



**Office of Children
and Family Services**

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Governor

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Novel Coronavirus of 2019 Disease (COVID-19) Guidance for

Child Protective Services Staff

Department of Health 24/7 Hotline: 1-888-364-3065

March 15, 2020

Dear Commissioners:

The New York State Office of Children and Family Services (OCFS) has developed this bulletin to provide guidance and technical assistance for Child Protective Services (CPS) staff in response to the novel coronavirus of 2019 disease (COVID-19).

Please review this information, including the links, with your leadership and staff. OCFS encourages local departments of social services (LDSS) to make any necessary adjustments to local program policies and protocols in response to this rapidly evolving health crisis. While this guidance is not intended to address every potential scenario, it is designed to answer the questions that have arisen to date. OCFS will continue to provide updated guidance.

OCFS encourages districts to monitor the websites for New York State Department of Health (DOH) and your respective local health department (LHD) for new information about COVID-19. Additionally, we urge you to remain in close contact with your OCFS regional office staff who have been instructed to immediately elevate COVID-19 questions and concerns.

A. Local Partnerships and Protocols

In addition to following processes outlined in existing emergency preparedness plans, LDSSs are encouraged to consult and partner with their local health department. Developing a collaborative (LDSS, public health, and law enforcement) response to COVID-19 will help maintain the health and safety of the workforce, the children and families we serve, and possibly, prevent the further spread of COVID-19.

LDSS administrators must take appropriate steps to:

1. Administer DOH screening protocols for all LDSS staff (*see, Scheduling Home Visit, below*); and
2. Ensure CPS workers know:
 - a) how to contact and receive information from their local health department;
 - b) how to partner with local law enforcement; and
 - c) any current local protocol for conducting visits for households with sick individuals.
3. Make certain all staff/providers follow the CDC's guidelines for infection control basics including hand hygiene:
 - a. [Infection Control Basics](#)
 - b. [Hand Hygiene in Health Care Settings](#)
 - c. [Handwashing: Clean Hands Save Lives](#)

B. CPS Investigation in Light of COVID-19

CPS is charged with investigating alleged cases of child abuse or maltreatment and assessing and determining the level of safety and risk for the child. LDSSs are required to conduct full CPS investigations in accordance with applicable statutory and regulatory requirements and the procedures outlined in the *OCFS Child Protective Services Manual* (See, Chapter 6 section B2, of the Child Protective Services Manual, entitled "Full Investigation").

The steps taken during the first 24 hours of a CPS investigation may differ depending upon the allegations contained in the report, the information found in the record review, and the information received from the initial contact(s). However, the initial contact(s) must be sufficient to determine whether the child may be in immediate danger of serious harm. CPS is encouraged to utilize alternative technologies, as discussed below, if practicable and sufficient under the circumstances.

i. Assessments

As a reminder, there are many ways a CPS caseworker, in consultation with their supervisor, can assess child safety. Caseworkers are always encouraged to utilize a variety of tools which may enable the caseworker, when appropriate, to remotely assess the safety and risk posed to a child. This may include, but is not necessarily limited to:

- Initiating contact by calling the family before going to the home;
- Use of Skype, Facetime, videoconferencing or other technological means; or

- Interviewing subjects, including children, in alternate locations that are not the home.

If a CPS worker has questions about the sufficiency of a particular type of remote assessment, they are encouraged to review the *OCFS Child Protective Services Manual Chapter 6 Section B-1 (Initiation of the Investigation)* and discuss this determination with their supervisor.

i. Scheduling Home Visit

When scheduling or conducting any visits in the community, CPS workers should first administer the NYS Department of Health screening protocol outlined in the March 9, 2020 *Guidance for NYS Office of Children and Family Services Programs (funded, operated, licensed, regulated, or designated providers)*. This screening - *conducted by phone, text message, video conference, or, in person* - is designed to determine whether the person is at risk of exposure to COVID-19:

1. Have you traveled to a country for which the CDC has issued a [Level 2 or 3 travel designation](#) within the last 14 days?;
2. Have you had contact with any [Persons Under Investigation \(PUI\) for COVID-19](#) within the last 14 days, OR with anyone with known COVID-19?; and
3. Do you have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?

If the answer to questions 1 and 2 are “Yes” or questions 1 or 2 and 3 are “Yes”, or in the event that a CPS worker is aware that the subject of the report or any of the members of the household is under the mandatory or voluntary quarantine, the CPS worker must follow the specific local procedures and protocols for conducting home visits for households with sick individuals, including any local COVID-19 specific procedures or protocols developed in partnership with your local health department. If the CPS worker has questions, they should immediately consult with their supervisor. If the supervisor is unclear how to proceed, they should promptly consult with their local health department, and, if warranted, law enforcement.

If it is determined that CPS **must** visit the home, and there is a known or suspected risk of exposure to COVID-19, the guidelines outlined in the preceding paragraph should be followed.

To foster engagement, the CPS worker may indicate that they have been screened through these same questions and have no known risk of exposure to COVID-19.

ii. Clients or Contacts Displaying Symptoms

Should a CPS worker encounter a client who may be displaying symptoms, who responds “Yes” to questions 1 or 2 and 3, (i.e., reports having symptoms) the worker must then:

- Instruct the client to remain at home and contact the client’s medical professional immediately.
- Assist the client by contacting 911 if emergency assistance is needed.
- Alternatively, refer the client to the local health department for additional guidance.
- In all circumstances, instruct the client or family member to notify the receiving medical provider and transporter, in advance, of potential concern for COVID-19.

In addition to the steps enumerated above, the CPS worker should immediately contact their supervisor and follow all local protocols for home visits with sick individuals and any local protocols for COVID-19.

iii. Denial of Entry into Home

In accordance with OCFS existing regulations (18 NYCRR § 432.2), in the event that a CPS worker is denied access to the home for any reason, they are to consult with a supervisor, in part, to determine whether further interventions (such as a court order) are warranted. This includes:

- Where a family denies access to a CPS worker on the grounds that they are concerned the worker may expose them to COVID-19; or
- If entry is denied on a claim that the home is under a voluntary or mandated quarantine.

In such instances, LDSSs should consult with the local health department, local emergency medical system, and possibly local law enforcement, regarding what actions are appropriate, safe, and recommended under the circumstances. LDSSs are strongly encouraged to begin developing these protocols now. LDSSs that have questions regarding the development of such protocols are encouraged to reach out to their OCFS regional office contact or OCFS Associate Commissioner David Bach by email (David.Bach@ocfs.ny.gov) or phone (518-474-3894).

C. Removal of Children Known or Suspected to Have COVID-19

Should it become necessary for CPS to remove a child or children:

1. Known or suspected to have been exposed to COVID-19 as a result of contact with a Persons Under Investigation (PUI), the LDSSs should consult with the local health department prior to the removal; or

2. Presenting symptoms of COVID-19 with no known or reliable relevant travel or exposure to a PUI, the LDSS should consult with the local health department prior to the removal.

LDSSs are strongly encouraged to proactively work in consultation with their local health department, provider agencies, and community stakeholders to establish locations for children who are known to have been exposed to COVID-19 who require immediate removal from their homes. Examples of placement options include residential treatment centers or identifying foster boarding homes that have no children placed and are willing to provide support to a child subject to a quarantine. LDSSs should notify OCFS of placement locations identified through this process.

D. Elevating Issues and Technical Assistance

CPS workers should continue to elevate questions through their chain of command. The LDSS may raise issues for subject matter guidance to their OCFS regional office.

E. Helpful Resources

- The New York State Department of Health's (DOH's) 24/7 hotline:
1-888-364-3065
- DOH's Website: <https://www.health.ny.gov/diseases/communicable/coronavirus/>
- The CDC's website: <https://www.cdc.gov/coronavirus/2019-ncov/summary.html>
- CDC's Infection Control Basics:
<https://www.cdc.gov/infectioncontrol/basics/index.html>
- [OCFS' CPS Manual: https://ocfs.ny.gov/main/cps/cps_manual.asp](https://ocfs.ny.gov/main/cps/cps_manual.asp)

Thank you for the work you do every day and for your ongoing dedication to the children and families of New York State.

Sincerely,

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Division of Child Welfare and Community Services
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