

June 29, 2020

Revision made July 2, 2020

Dear Kinship and Foster Caregivers,

Your continued commitment to serve children and meet their needs through these challenging times is one of the primary reasons the Department has been able to manage through this public health crisis. The stability of caregiver placements and the continued support by accepting placement of children who are entering care clearly demonstrates how blessed Arizona is to have caregivers who continually fill the gap for children in need.

During these challenging times, the children in foster care, caregivers, DCS staff and our providers have been blessed that the spread of the disease has been minimized. At the time of writing this letter, there are roughly a dozen positive cases of COVID-19 among the children in care. The communication from caregivers all over the state also indicate that they too have been blessed with relatively low infection rates compared to what we are observing in the broader community.

Despite the encouraging outcomes realized thus far, we fully understand the spread of COVID-19 has grown significantly over the past month. As the virus spread continues additional flexibilities are required to further support the birth parents, caregivers and staff who are working so diligently to protect children in care.

Effective June 29, 2020 and lasting through **July 31, 2020** individual birth parents, kinship and/or foster family caregivers may opt into virtual visits if one or more of the following situations exist:

1. Immunocompromised/high risk individual in the home; birth parent or foster child themselves is immunocompromised/high risk, based on the CDC guidelines.
 - a. Foster licensing agencies may verify the medical need of the family. Do not request medical records from the family.
2. Birth parents not actively attending visitation (DCS Specialist to confirm with PA/SVO in case notes)
 - a. Active attendance is attending more than 50% of visits in the last month.
3. Any individual on the case was exposed (foster child, caregivers, birth parents, others in the home such as caregiver's children), and this must have been communicated to CMDP.
4. Birth parents are living in a congregate care setting such as a homeless shelter, halfway house, substance use rehabilitation center, are currently incarcerated, are living in a facility that is not currently allowing in person visitation, **or are currently experiencing homelessness** (Case Specialist to confirm).
5. Birth parents or caregivers are in a high risk for exposure occupation such as hospital nurses and first responders (all parties should be in agreement with virtual visits in this case).
6. Birth parents are inviting others to participate in visits (in person should remain only the biological parents)

Page 2

7. Birth Parents and Caregivers are both voluntarily electing to participate in virtual visits for the next 4 weeks.
8. Other situations may be approved by the Regional Program Administrator.

If one of these situations exist and the birth parent or caregiver would prefer virtual visitation, please contact the Department at 1-877-543-7633 Option 3, or directly communicate with your assigned DCS Specialist. A DCS representative will review the situation and connect you with the appropriate individual at the local DCS field office. The team will document the specifics and communicate with all parties that virtual visitation has been approved for the designated period. Please note, it may take 2-4 days to complete the process and begin virtual visits.

The Department is reviewing caregiver, children and staff infection rates on a daily basis. Through this detail data, additional actions may be taken in the coming days/weeks including potential extension of option virtual visitation period as well as the approved scenarios described above.

Thank you again for all you do to support children in care,

Mike Faust
Director