

HFA – Continued Use of Virtual Home Visits

As states and municipalities make decisions about loosening COVID-19 restrictions, HFA continues to allow, and highly recommends, the continued use (for as long as needed) of virtual home visits conducted via phone or ideally, a video conference platform like Zoom, FaceTime, etc., for all families, consistent with existing HFA Best Practice Standards.

From a fidelity perspective, HFA currently regards virtual home visits and in-home visits equally, when conducted in accordance with [existing home visit definition criteria and guidance](#). We trust local service providers to make the best decision on which visit format to utilize given community conditions, family needs, and staff and family safety issues.

It is permissible by the HFA model, for as long as coronavirus precautions should be exercised - until a vaccine and effective treatments are available, to continue with 100% virtual visits. Subsequent to that, and coinciding with the release of revised HFA Best Practice Standards (BPS), additional model guidance will be provided on the long-term, permanent use of virtual home visiting services in combination with in-person visits.

Currently, decisions at the local level to resume in-person home visits must be done cautiously and be driven by the goal of minimizing public health risks and prioritizing the health and safety of all staff and families. Sites that choose to resume in-person home visiting must continue to monitor local public health incidence reporting and make adjustments to their home visiting practices as resurgence of the outbreak can and will occur within different communities at different times.

The options currently available to sites:



Conditions necessitate we stop all in-person home visiting. Sites will provide 100% virtual home visits (highly recommended by HFA)



Conditions warrant the blending of some amount of in-person contact with continued virtual home visits. While providing blended services, staff will need to make in-the-moment decisions about whether it is safe to conduct an in-person visit.

What to consider when making a decision about visiting a family face-to-face:

- How prevalent is COVID-19 currently within the community?
- How long since any incident of a new COVID case in the community?
- Even if the community is considered low-risk, is the staff member comfortable going to a home in-person? Is the family comfortable with receiving visitors?
- Have staff or participant family members self-identified at increased risk for severe illness related to COVID-19? [See CDC Guidance](#)
- Can physical distance (6 ft.+) be maintained?
- What will be the procedure if the staff member arrives at the home and subsequently determines not to enter, or to leave soon after arriving? (Which may need to happen)

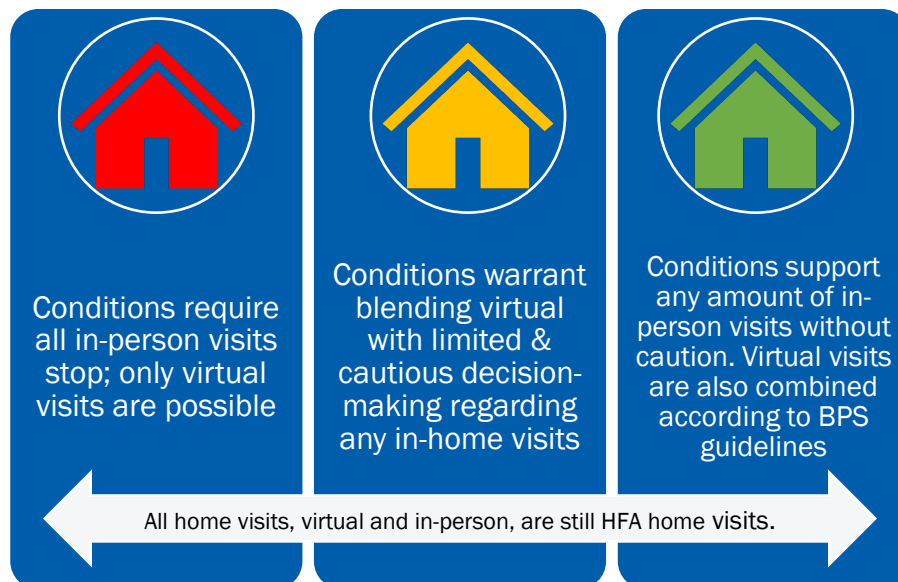
When a decision to visit in-person has been made, we recommend staff utilize all recommended public health precautions:

- Minimize contact with others (wear cloth face covering, maintain physical distance, and avoid groups). The need for PPE may be indication circumstances do not yet warrant in-person visits.
- Practice good hygiene (frequent hand washing including when entering and exiting a new environment, use of hand sanitizer, disinfecting surfaces).
- Staff and families monitor their own health status, and cancel visits if symptoms are present.

Communication tips with families:

- ✓ It is important for families to know that the site will be basing whether to do virtual or in-person visits on the safety of the family and staff, and that families will have a voice in determining when and how in-person visits resume (the decision should be confirmed with the family prior to each visit, understanding health status and community conditions can change rapidly and unexpectedly). Families who used to get home visits are probably asking about these things already, families enrolled into virtual visits may or may not be thinking about this or may be anxious about this.
- ✓ It is important for the family to be made aware of the choices available related to home visit format, and why these choices are now available. It is worthwhile, particularly for new families who enrolled virtually to explain the program's eventual return to in-home visits, and the eagerness of the FSS to eventually meet the family in-person.
- ✓ When talking with families about resuming in-person visits, it may be helpful to think about options that are a good fit for the family and staff. Not all visits need to take place inside a home. It may be more conducive for front porch visits, taking walks for a visit, visiting in parks or community locations with space for distancing (if available).
- ✓ Wearing protective masks during a visit will likely be awkward, and can be a challenge to developing and maintaining the relationship with the parent. It limits one's ability to read facial expression cues, and can impact the ability to hear clearly what another is saying. It's important to be sensitive to these nuances affecting the connection with the family

The graphic below provides the full range of HFA home visiting options, however during the pandemic and until public health risk is minimized as stated above, HFA recommends only the red and yellow options be exercised.





For sites/organizations thinking about re-opening:

- [CDC guidance is available](#) concerning cleaning and disinfecting public spaces, as well as safe behavioral practices.
- **HFA allows continuation of 100% virtual supervision sessions for as long as needed**, and will continue to provide [guidance and tips about how to do so effectively](#).
- Sites should consult Human Resources professionals for guidance about managing any requests for accommodations from employees covered by the ADA, as well as managing employer requirements as dictated in the Families First Coronavirus Response Act (FFCRA).