Early Childhood Home-Based Visitation Guidance (COVID-19)
October 5, 2021

The following guidance is intended to support Family Visiting and Early Intervention providers conducting in-person services in a client’s home.

**Personal Protective Equipment (PPE)**

Programs should continue to make PPE available, including N95 and K95 masks, to all staff providing in-person visits. Masks should fit snugly and be worn over the nose, mouth and chin. Masks and gloves need to be changed after each in-person visit.

**Screening**

**Home-based health and human services providers**

All home-based health and human services provider staff are required to screen themselves for COVID-19 associated symptoms prior to going to work each day. The COVID-19 screening can be found here: COVID19_Screening_Tool_English-5.18 (ri.gov), COVID19_Screening_Tool_Spanish-4.27 (ri.gov).

Staff that answer “Yes” to any screening questions should notify their supervisor and conduct virtual visits until cleared by their supervisor to resume in-person visits.

**Clients**

Clients must also screen themselves using the same checklist on the day of the scheduled visit. Screening should take place earlier in the day prior to the visit. At time of screening, confirm with the client who will be present during the visit. Anyone present must also screen themselves. Clients unable to screen themselves should not have an in-person visit and should instead be offered a virtual visit. Anyone scheduled to participate in an in-person visit that answers “Yes” to any screening questions cannot have an in-person visit that day and should instead be offered a virtual visit.

**Equity impact**

Assess the equity impact when making decisions and offering visits. Communities and individuals of color have been disproportionately impacted by COVID-19. When making decisions about in-person visits, programs should consider and assess how returning to in-person services will address inequities that staff and families face. For example, programs are encouraged to review which clients have not received in-person visits during the pandemic and examine if specific populations have been more impacted by barriers to participate in virtual visits.

To access COVID-19 resources in multiple languages, visit the Rhode Island Department of Health’s COVID-19 Information in Multiple Languages page.

**In-person visitation**

**Outdoor in-person visitation**

- Whenever possible, visits should be conducted outdoors.
- Home-based health and human services providers and clients must maintain a distance of three feet apart.
• The provider must wear an N95 or K95 face mask and gloves for the entire visit (gloves are single-patient use and should be changed if they are damaged or contaminated).
• The client and any participating family members must also wear a mask for the entire visit unless they meet one or more of the exceptions at the end of the document.

For therapeautic services such as Early Intervention, providers should carefully consider whether having direct contact with the child is necessary. Often, coaching the parent/caregiver is sufficient and does not require the provider to be hands-on with the child.

**Indoor in-person visitation**

• Visits conducted indoors should only occur during inclement weather, if a client is immobile, if there is not a safe space to meet outdoors, or if there is a specific clinical purpose for an indoor visit (e.g., the provider is supporting the child/family with a particular routine that can only occur indoors).
• PPE should be put on outside of the home before going inside.
• When entering a home, the provider should alert the household and make sure everyone participating in the visit has a mask on.
• If an indoor visit must take place, open doors and windows when possible to allow for additional air circulation within the house.
• The indoor visit should only be between the provider and client, when possible. If an additional family member must be included, only the minimum required number of family members should be present during the visit, and proper physical distancing should be followed. The client and any household members should wear cloth face coverings that cover their mouth and nose at all times, unless they meet one or more of the exceptions noted below.
• Home-based health and human services providers and clients must maintain a distance of three feet apart.
• Services should be provided by the minimum number of providers at any one time, and providers should minimize visit duration whenever possible.

**Hygiene**

Please practice proper hygiene whenever entering and before leaving a home or indoor visiting space.

• Follow the Centers for Disease Control and Prevention recommended hand hygiene guidelines upon entering and before exiting a client’s home:
  o Wet hands with clean, running water, turn off the tap, and apply soap.
  o Lather hands by rubbing them together with the soap. Lather the backs of hands, between fingers, and under nails.
  o Scrub hands for at least 20 seconds.
  o Rinse hands well under clean, running water.
  o Dry hands using a clean towel or air dry them.

• Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available:
  o Apply the gel product to the palm of one hand (read the label to learn the correct amount).
  o Rub hands together.
  o Rub gel over all surfaces of hands and fingers until your hands are dry.

• Follow proper guidance when bringing in equipment to be used during a visit:
  o Place bags on a clean dry surface with a barrier between the bag and the surface.
  o Keep all bags/equipment off the floor.
  o Wash hands prior to removing equipment from bag.
  o Zip bag closed after removing equipment.
  o Clean equipment with disinfectant wipes after use.

• Follow guidelines for removing PPE:
Ask the client if there is a trash can outside of the home or if a trash can is permitted to be left outside for the disposal of PPE.
- Remove PPE outside of the home and discard in a trash can before leaving the location.
- PPE should not be taken from the client’s home and into the provider’s vehicle.
- Sanitize surfaces and frequently touched items:
  - Providers should clean and disinfect frequently touched surfaces, such as car doors, steering wheels, phones, pens, laptops, toys, and any items used during a visit.
  - Providers should properly clean and disinfect any equipment used in between visits.

**Mask exceptions**
- Mask wearing is not required during outdoor and indoor visits under certain circumstances:
  - Masks should not be placed on children younger than age two.
  - Anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance should not wear a mask.

**Provider responsibilities**
- Each organization should have a training plan to ensure that employees are able to meet the safety guidelines described throughout this guidance.