To: All Early Intervention contract managers and FCFC coordinators

From: Nathan DeDino

Date: August 4, 2020

Subject: Early Intervention Program Updates, #20

**PROGRAM UPDATES**

Accompanying this communication you will find two new resources related to providing in-person Early Intervention services. The “In-person Home Visit Guidelines” document lays out mandatory guidance and best practices when providing in-person visits. The “Visual In-person Home Visit Guidelines” document is a condensed visual representation of this guidance. Both documents reflect the input of program staff from multiple state agencies that provide services in program participants’ homes. These state agencies will use this new guidance to support the work of these professionals providing in-home services.

Because this guidance serves diverse programs, DODD is providing some additional context specific to EI:

- Although DODD never prohibited in-person EI services, DODD has strongly encouraged local EI systems to utilize virtual options wherever possible. We continue to recommend that EI services be provided virtually when this is possible since this remains the safest way to provide EI services. We recognize, however, that sometimes it is not possible to serve some families through a virtual-only option and this new guidance can support local teams in safely providing some EI services in-person in those cases where it is necessary.
- Consistent with pre-COVID-19 guidance, local teams must use the Individualized Family Service Plan (IFSP) process to determine the method of EI service delivery. The IFSP process should be used to determine how best to utilize a particular EI service to meet an outcome and consider factors such as the progress being made toward the outcome using virtual options; the health risks of the child being served, caregivers, and other family members; and the extent of COVID-19 spread in the local community.
- EI professionals must continue to follow all local agency policies related to how EI services will be provided during the pandemic. These new guidance materials do not supplant local agency policies and, indeed, explicitly require that local agencies have policies in place prior to completing in-home EI services.
- As we have learned during the past several months, the pandemic is a fast moving situation. It may prove necessary to update this guidance based on new information about the COVID-19 virus. You will also find that there are many links included in the guidance document. You should check these frequently to ensure that you are following the most up-to-date best practices from the Centers for Disease Control and Prevention (CDC) and the Ohio Department of Health (ODH). ODH’s [Ohio Public Health Advisory System](https://odh.ohio.gov) also provides regularly updated information at the county level about the spread of the virus and its effect on local communities.
• EI professionals should continue to ensure that all activities, especially those related to cancellation and rescheduling, are well-documented in case notes.

Thank you for the important EI services you are providing to children and families during this difficult time. We know that these services can make a profound difference in a child’s developmental trajectory. Each person working in our state’s EI system also has an obligation to ensure that these EI services are provided as safely as possible. Thank you for familiarizing yourself with this new guidance. Please reach out to your EI program consultant if you have any questions. As we review the questions we receive, we may send additional clarifying guidance as necessary. Thank you for everything each of you does to keep your communities safe!
GUIDANCE FOR PROGRAMS THAT CONDUCT IN-HOME VISITS
(“Home Visitor” refers to a person who provides program services to individuals/families in their home)

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<th>When</th>
<th>Mandatory</th>
<th>Recommended best practices</th>
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| Prior to the home visit | • Agencies conducting home visits must ensure they have written policies in place that minimally describe how the agency will:  
  o Implement all mandatory requirements for completing home visits, complying with public health orders, and any recommended best practices the agency is using.  
  o Ensure home visitors have access to required face coverings and have been trained in the use and disposal of face coverings.  
  o Address home visiting staff who are in an at-risk group or who share a household with an individual in an at-risk group.  
  o Report employee or client/program participant infections to the local health district and work with the local health department to identify potentially exposed individuals to help facilitate appropriate communication/contact tracing.  
  • When applicable, obtain approval from clients/program participants to conduct the visit in-person prior to the date of the home visit. | • Home visitors suspected of having COVID-19 or exposed to COVID-19 should be encouraged to contact their primary care physician as necessary.  
• Agencies should provide daily temperature checks with a thermometer.                                                                 |
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| • Ensure that daily symptom assessment is conducted prior to the home visit.* |
| • Ensure Home visitors, who are symptomatic, notify their supervisor and not make any home visits. |
| • Ensure the agency follows CDC guidance for any home visitor suspected or confirmed of having COVID: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html. |
| • When scheduling the visit, the home visitor must call the individual being visited to: 1) determine if the individual(s) participating in the home visit or anyone in the household has had close contact with a person with probable or confirmed COVID-19; and 2) complete a symptom assessment for the individual(s) participating in the home visit and anyone in the household. |
| • If the individual(s) being visited or anyone else in the household is symptomatic or has had close contact with a person with probable or confirmed COVID-19, the in-person home visit should not be held and should be re-scheduled. CDC guidance should be provided to the individual(s): https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html. |
| • Prior to entering the home for the home visit, repeat the symptom assessment. If the individual(s) being visited or anyone else in the household is |

*Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea. Home visiting agencies should frequently check the CDC list of COVID-19 symptoms for updates: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
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<td>• The home visitor must utilize a facial covering (covering the individual’s nose, mouth and chin) or appropriate PPE during the visit.</td>
<td>• Ask program clients/participants to consider wearing face coverings at all times.</td>
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<td>• The home visitor must ensure a minimum of six feet between the home visitor and members of the household except when necessary to complete a required component of the visit.</td>
<td>• Consider conducting the home visit outside if possible.</td>
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<td>• The home visitor must bring only items needed for that visit into the home and not share (pens, paper, etc.) with individuals in the household.</td>
<td>• Limit home visit participants to those necessary to complete the home visit.</td>
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<td>• Consider asking household members not participating in the home visit to stay in a different part of the house from where the visit is taking place unless providing a needed support such as, but not limited to, sign language interpretation or spoken language interpretation.</td>
<td>• If possible, sit on a hard chair that can be cleaned/sanitized before and after sitting. Home visitor may also consider bringing own chair that can be cleaned/sanitized between visits.</td>
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<td>• The home visitor must avoid placing laptop, tablet, binder or other equipment on a surface that may have potential contamination.</td>
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<tr>
<td>• Home visitor must clean/sanitize any laptop, tablet, binder, pen, or other equipment used during the home visit.</td>
<td>• Clean items worn at the home visit.</td>
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<td>• Home visitor must clean/sanitize hands frequently.</td>
<td>• Clean/sanitize home visitor’s car at the end of the day.</td>
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<td>• The home visitor must clean/dispose of face covering at the end of the day or after an encounter with an individual</td>
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<td>who is confirmed or suspected of having COVID-19, or whenever the mask becomes visibly soiled or wet such that it makes breathing difficult.</td>
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<td>• The home visitor must notify their supervisor when they learn of individuals with COVID-19 symptoms.</td>
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<td>• Home visitor must maintain accurate records of completed home visits including date and time of the home visit, the name(s) of individual(s) participating in the visit, and contact information to assist in contact tracing.</td>
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Resources and Additional Information

Public Health Advisory System

Guidance based on community exposure, for individuals exposed to others with known or suspected/possible COVID-19

CDC Cleaning/Disinfecting Information

Responsible RestartOhio
For up-to-date information on sector specific operating requirements, continued closures, and other resources related to the reopening of Ohio businesses, click here.

New Guidance for Pregnant Women and COVID-19
On June 26, 2020, the Centers for Disease Control and Prevention (CDC) revised guidance on the risk of COVID to pregnant women. In a Morbidity and Mortality Weekly Report (MMWR) published last week, the CDC indicated that pregnant women may be at increased risk for severe COVID-19 illness. More specifically, the MMWR study determined that pregnant women with COVID-19 were more likely than non-pregnant women to be hospitalized and at increased risk for intensive care unit (ICU) admission and the receipt of mechanical ventilation. In its public-facing guidance, CDC notes that among pregnant people with COVID-19 “there may be an increased risk of adverse pregnant outcomes, such as preterm birth.”

COVID-19 Pre-surge and Longer-Term Planning Toolkit for Long Term Services and Community Supports
The Ohio Departments to Aging, Health, Developmental Disabilities, and Medicaid worked together to create a toolkit for provider organizations and staff serving Ohioans who utilize LTSS or home visiting services during the COVID-19 crisis. This toolkit reflects the importance of Governor DeWine’s aggressive approach to protecting all of Ohio’s citizens during the pandemic and aligns with his direction to prepare to care for any possible “surge” of individuals contracting COVID-19. As Ohio’s pandemic has shifted to a series of COVID-19 outbreaks largely in congregate environments, the original tool kit has been updated to incorporate the most recent changes.
https://coronavirus.ohio.gov/static/docs/Pre-Surge-Longer-Term-Planning-Toolkit.pdf
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Personal Protective Equipment (PPE)

Vendor Information
Here’s the webpage that contains the information and lists of PPE vendors. The relevant parts of the page are pasted below. See the DSA/DAS list at the bottom under Additional Resources.

Ohio Emergency PPE Makers’ Exchange
The Ohio Emergency PPE Makers’ Exchange, launched by the Ohio Manufacturing Alliance to Fight COVID-19, is an online marketplace where organizations that need personal protective equipment (PPE) and related equipment can find a wide selection offered by Ohio manufacturers. This online exchange offers PPE and related equipment for health care workers, first responders, and small businesses. It’s especially well-suited for organizations that may have lower-volume needs, such as nursing homes, police departments, and small business employers.
The Alliance has screened to the best of its ability for only Ohio manufacturers, but it has not vetted each product and vendor.
The Alliance also has created this list of practical things manufacturers need to be thinking about and do today to prepare for COVID-19.

JobsOhio PPE Database
Several Ohio companies are working to increase the supply of in-demand medical PPE. JobsOhio has partnered with OMA, the Administration and with our Regional Network partners to provide assistance. A list of manufacturers, distributors and potential contract manufacturers to connect with these resources is available through JobsOhio’s Ohio Safe. Ohio Working. website.

Additional Resources
In addition to the resources available via the Ohio Manufacturing Alliance and JobsOhio, the Ohio Development Services Agency and the Ohio Department of Administrative Services has compiled another list of vendors providing various PPE is available here PDF.
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Home Visiting Screening Guide

Call individual and prescreen to identify if eligible for a home visit:

1. **Ask:** Have you had close contact with a person with confirmed or probable COVID-19?
   - **If yes:** Cancel in-person visit & inform
     - Cancel in-person visit, complete via telephone if able.
     - If needed, make a plan to follow up face-to-face in the future.
     - Encourage the individual to call their primary care physician for further assessment.
     - If individual does not have a primary care physician, provide information about how to receive care.
     - Notify your supervisor.
   - **If no:** Proceed with in-person visit

2. **Ask:** Have you or someone else in your household had symptoms in the last 14 days or been asked to maintain quarantine or isolation?
   - **Symptoms include new onset of:** fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.
   - **If yes:** Cancel visit and inform.
   - **If no:** Schedule in-person visit

Upon arrival at the home:
- When you arrive at the individual’s door (or at an alternative location) for a visit, repeat questions 1 and 2 above.
- Remain at a distance of at least 6 feet and wear face covering.

If individuals answer yes to questions 1 or 2, cancel visit and inform.
If individuals answer no to questions 1 or 2, proceed with visit.
Tips for Home Visiting

Preparing and arriving for a visit

What to bring
- Bring only items necessary for the visit into the home.
- Avoid placing belongings on tabletops and counters that might have high levels of contamination.
- Store personal items securely in your vehicle prior to arriving at the location.

Arrival and greeting
- Put your face covering on after sanitizing hands and before leaving your vehicle.
- Greet families verbally.
- Avoid physical contact.
- If possible, maintain the recommended 6 foot distance between people.
- Consider if it is appropriate to complete the visit outside (on the porch, patio, etc).

Home visit kit
- Reusable plastic bag that seals.
- Hand soap, hand sanitizer.
- Paper towels (fold several into a reusable bag, do not take whole roll).
- Cleaning wipes.

Cleaning and sanitizing during and between visits

Washing hands
- Wash hands at kitchen sink for at least 20 seconds upon arrival, departure, and when contaminated.
- Use supplies brought in your “Home Visit Kit.”
- Use hand sanitizer in situations when hand washing is unavailable or unreasonable.

Supplies
- Clean and sanitize the following items between home visits and/or as needed: cell phone, pen, name badge, clipboard, etc.