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## Maine's Foster Care Committee

Thursday, May 14, 2020 - 4:00 - 5:00 pm

### Agenda/Notes

**Committee Members present:** Amy Belisle, Adrienne Carmack, Dana Goldsmith, Kristen Heil, James Jacob, Bobbi Johnson, Shawn Kalback, Sydney Kotredes, Sarah Labonte, Kristen Martin, Joanne Perry, Mark Rains, Joyce Wientzen, Jean Youde

### Welcome and Introductions

Adrienne Carmack, MD opened the meeting and noted Andrea Tracy, current committee chair, was on vacation this week.

### Updates from the Office for Child and Family Services and DHHS

Bobbi Johnson reported the department is working on re-opening efforts for the department which includes investigations, case worker contacts and family visits, PREP visits and services and office re-opening for staff. Phase 2 begins on June 1<sup>st</sup> – OCFS is partnering with other agencies to develop a plan to 1) make sure kids can safely participate in visits with their family of origin, 2) learn about availability of PPE and secure use for the visits, 3) find outdoor settings kids can meet families in that allow proper social distancing, 4) facilitate visits by providing spaces that can be properly cleaned and 5) work with transportation companies to find drivers that follow safe practices. May have to start with more remote visits. Resource parents acknowledge lack of family visits are having an affect on some children – but remote visits help and work better with older children.

Evaluations going well – MaineGeneral/Ervin Center still only doing telehealth by phone. PCHC and Spurwink having success with video and audio visits. Dana at PCHC reports doing 2 – 3 visits per day. Acknowledges it is hard to do sibling visits – but that is often what the parent/family prefers. Some frustration from parents having to do more than one visit in a few day span. All acknowledge a reduced rate of no-shows with virtual visits.

Six month follow up visits scheduled in most cases at Edmund Ervin Center. Spurwink doing the visits with NP and psychologist by Zoom. For kids 9 yrs and older, trying to meet the child privately – the NP will step out. Easier to communicate directly when using video.

All urging families to call the case workers when there is an acute need. Also recommend in person medical visit if needed.

### Transition to next phase – what will it mean for foster kids, medical services, etc.

Family First funding in place. Christine Theriault hired as prevention coordinator. Kids getting verbally screened for COVID as they enter care. If there is an indication they have been exposed, should be seen within 72 hours – not mandated by Governor's order. Mark noted importance of minimizing risk for the foster families. Case workers should be notified immediately if there are symptoms. May need to update the health screening questionnaire given to families.

Bobbi noted there was a call with resource families to discuss their concerns and urge them to call a provider if the kids have any symptoms – appear to be Covid or not.

Congregate care settings are concerned about the spread of COVID in the facilities.

Using good judgement and postponing visits for anyone who isn't feeling well still logical.

## **Member Concerns & Messaging**

Still many concerns that reports of abuse are down – but that is due to lack of people seeing children in person. Expect that reports and formal cases will increase as we re-open. ER visits in some places are much higher. Kids in care is at a high level.

Home visitors trying to connect with families by dropping off food and games.

Historically, the more serious abuse cases and volume of cases increases with economic downturn.

State continues to drop off safe sleep and period of purple crying resources to families with infants.

**May is foster care month.** Promote on social media.

<https://www.childwelfare.gov/fostercaremonth/>

**Subcommittee** – recommend tabling standardization discussions until we are through the COVID-19 issues and can meet in person