



WHAT IS COVID-19?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. Patients with COVID-19 have experienced mild to severe respiratory illness, including fever, cough and shortness of breath. The virus that causes COVID-19 is a novel (new) coronavirus. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold.

HOW DOES COVID-19 SPREAD?

The virus that causes COVID-19 is thought to spread mainly from person-to-person, between people who are in close contact with one another (within about 6 feet) through respiratory droplets when an infected person coughs or sneezes. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

FOR OB NAVIGATOR HOME VISITING PARTNERS

- Follow federal, state, and local guidance as you work to keep your staff and the patients you serve safe. Home visits should be offered over the phone or in cases where appropriate or accessible, such as over video communication.
- Continue to support families that may be in crisis and need emergency items such as cribs and diapers.

FOR NURSE FAMILY PARTNERSHIP LOCAL PARTNERS

- ISDH remains committed to ensuring Nurse Family Partnership (NFP) activities continue with the least disruption possible to mothers, children, and families during this time, including the use of alternative service delivery strategies, in alignment with model fidelity standards.
- All non-face to face home visits will be supported under NFP state funding.
- Note that Maternal, Infant, Early Childhood Home Visiting grant funding cannot be used to support salary costs for MIECHV-funded staff that are reassigned to non-MIECHV duties.
- Performance measurement and reporting remain key hallmarks of learning and accountability for the NFP Program. Fiscal Year 2020 performance data, including participants served, benchmark performance measures, and caseload capacity data will be reviewed and interpreted with the recognition that many programs will continue to experience major service delivery disruptions.

GUIDANCE FOR VIRTUAL HOME VISITS

- Home visitors should do everything possible to provide virtual home visits as they would if they were in person. Many of the larger home visiting models have provided guidance on conducting virtual visits, and programs must continue to follow the standards for their respective model(s).
- If video conferencing is used, there are security concerns to consider, and every effort should be made to use a HIPAA-compliant platform. Apps like FaceTime, Messenger, and Skype are not secure. However, Health and Human Services (HHS) has acknowledged that using a HIPAA-compliant platform may be challenging for many reasons: <https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html>.



- Using a secure video conferencing platform would be the most ideal and closest to an in-person visit. There is the recognition that telephone/apps may be the only feasible option for some families. Many families do not have all three of the following items necessary to conduct video conferencing: a screen/smartphone, internet connection, data plan that would allow for home visits. Note that many companies are extending free WiFi and unlimited data plans for their customers.
- Staff must have a device they can use if they need to conduct virtual visits from their home. For videoconferencing, it is recommended the screen be larger than a smartphone, if possible. However, smartphones may be the only option. If additional equipment needs to be purchased, that should be expedited, as shipping may take longer than usual.
- Staff will need a secure, reliable internet connection (where possible) that could be used from home to conduct visits.
- When conducting virtual home visits, confidentiality must be maintained. Staff must be able to facilitate the visits from a room where others will not be able to overhear nor see the family.
- Staff will need to explain to families via phone what to expect and obtain permission in accordance with model and/or funder guidance. Some models, such as NFP, may have specific consent forms related to this service.

GUIDANCE FOR EDUCATING FAMILIES

- Home visitors should educate families using only reliable sources such as the CDC and ISDH.
- Acknowledge any anxiety the families may have about what might happen. Avoid speculation about the future. It may be helpful to talk with parents about how to discuss this with their children, since they may also be anxious.
 - Here are some resources to guide parents and caregivers:
 - <https://kidshealth.org/en/parents/coronavirus-how-talk-child.html>
 - <https://childmind.org/article/talking-to-kids-about-the-coronavirus/>
 - <https://www.pbs.org/parents/thrive/how-to-talk-to-your-kids-about-coronavirus>
- Should a concern arise about possible infection, direct the family to call their healthcare provider prior to arriving at a facility unless there is a health emergency (e.g. difficulty breathing). Encourage families to have contact information for healthcare providers, the home visiting agency, and emergencies numbers easily accessible at all times.
- Talk to the family about what they would need in the event they were quarantined for 14 days. Now is the time to discuss how they could get formula, diapers, food, etc. if needed. Ideally, anyone on prescription medications will have enough to last 30 days.
- For parents who work, talk with them about what they would do if their childcare was suddenly unavailable. For many families, this could lead to a loss of employment if there is not someone that could help in this situation or could result in children being left with less than ideal caregivers. It may be a good time to discuss who they think would be appropriate to care for their child (if there are options), and what an alternate caregiver would need to know about caring for their child (e.g. safe sleep practices, emergency information, etc.).
- Home visitors and families can call the Maternal and Child Health Mom's Helpline or Indiana 2-1-1 for connection to needed resources and services.
 - Call 211
 - Call 1-844-MCH-MOMS (1-844-624-6667)

GUIDANCE FOR CONTINUING IN-PERSON HOME VISITS

For essential in-person home visits:

- **Wash hands often** with soap and water for at least 20 seconds; dry hands with a clean towel or air dry.
- **Use alcohol-based hand sanitizer** when soap and water are unavailable.
- **Cover your mouth** with a tissue or sleeve when coughing or sneezing.
- **Avoid touching your eyes, nose, or mouth** with unwashed hands.
- **Stay home** when you are sick.
- **Avoid contact** with people who are sick.
- Staff should not conduct any home visits if they have any symptoms of illness or have been exposed to anyone with symptoms of illness.
- Staff should contact each parent prior to conducting the home visit to confirm no one in the home is showing any signs of illness and ask permission to come. If anyone is ill or if the family is uncomfortable with visitors, the visit should be cancelled.
- Procedures and appropriate supplies should be provided to home visitors so they can disinfect all toys, books, etc. in between home visits.

GUIDANCE FOR PROVIDERS WITH STAFF WORKING FROM HOME

- Ensure staff have an updated list of telephone numbers for all other staff.
- Establish scheduled communication updates for staff. The frequency and format may change as circumstances evolve, but plan for routine updates. It may be necessary to have frequent, scheduled meetings with a small team to discuss any recent information prior to these all-staff briefings.
- Ensure families' phone numbers are updated, along with alternate contact information. If a home visitor becomes ill, a supervisor or home visitor may need to contact them.
- All providers must have a method for continuing to enter data. If home visitors do not enter data, how will the data they collect be provided to the data entry staff? Does the organization need a secure cloud for doing so? If data entry staff becomes ill, who would enter the data, instead?
- All community events and activities for groups of parents/families scheduled within the next few weeks should be suspended until further notice. Parent groups could be offered via a platform like Zoom, if they consent and are able to do so.
- Establish how supervision can happen virtually, when staff are working from home.

GUIDANCE FOR SUPPORTING HEALTH AND WELL-BEING

- Take advantage of all available flexibilities, such as using technology for alternative service delivery strategies to protect their health and safety.
- We also encourage all to review and share the following resources with LIAs and home visitors. We understand that this is a challenging time, and appreciate all of the work that you and your LIAs do on behalf of families.
 - [Managing Stress and Anxiety – COVID-19 \(General recommendations with sub-population guidance\)](#)
 - [Emergency Responders: Tips for taking care of yourself](#)
 - [Resilience Resources for Emergency Response](#)



WHAT SHOULD I DO IF I'M EXPERIENCING SYMPTOMS?

If you are experiencing symptoms of acute respiratory illness, follow the recommended CDC guidelines:

- **Stay at home.** Notify your supervisor of your illness. Do not go to work until you are free of fever (100.4 degrees Fahrenheit or greater using an oral thermometer), signs of fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines.
- **Avoid close contact with people who are sick.**
- **Practice respiratory etiquette** (e.g., covering coughs and sneezes with a tissue or sleeve).
- **Practice frequent, proper handwashing** with soap and water for at least 20 seconds or with hand sanitizer that contains at least 60% alcohol.
- **Perform routine environmental cleaning.** Routinely clean and disinfect all frequently touched surfaces (e.g., doorknobs, countertops, workstations) with usual cleaning and disinfection products. Follow all instructions on the product label.

ADDITIONAL INFORMATION

The ISDH call center for healthcare providers and members of the public who have concerns about COVID-19 is now staffed 24/7 at 877-826-0011.

Additional information and resources for COVID-19 are available at the links below.

- CDC COVID-19 webpage: <http://coronavirus.gov>
- ISDH COVID-19 webpage: <https://in.gov/coronavirus>
- Executive Orders from Governor Holcomb: <https://www.in.gov/gov/2384.htm>
- Relating to HIPAA requirements for telehealth during COVID-19: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>
- CDC's Information on COVID-19 Pregnant Women & Breastfeeding: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/pregnancy-breastfeeding.html>