

Coronavirus Disease (COVID 19) Guidance for Strong Families VT Nurse Home Visiting Program

- Strong Families VT Nurse Home Visiting Program (MECSH) is not considered an essential service.
- Face to face MIECHV Sustained Nurse Home Visiting Program visits are suspended until further notice. Use telehealth or phone visits to continue to provide MECSH services as your agency's capacity allows.
- This document serves as a supplement to Vermont Department of Health's [home-based service delivery](#) and [Department for Children and Families CIS Guidance CIS Guidance to the Field Re: COVID 19](#)

Health Resources and Services Administration (HRSA):

- Supports the appropriate use of alternate methods to conduct home visits in alignment with model fidelity standards.
- Encourages MIECHV awardees to take advantage of all flexibilities, such as using technology for alternative service delivery strategies to protect their health and safety.
- Until operations return to normal, HRSA **WILL NOT** penalize awardees for slow/stalled activities resulting from COVID-19-related restrictions.
- 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. Even with the growing availability of virtual home visits, lower caseloads and interrupted service are to be expected in many locations and programs.
- MIECHV grant funding cannot be used to support salary costs for MIECHV-funded staff that are reassigned to non-MIECHV duties.
- Some emergency response activities, such as assisting families in emergency planning and providing parenting and other supports during this time of social isolation, are within the scope of the MIECHV grant.

MECSH International:

- With regard to alternative visiting strategies, as MECSH philosophy is that 'home' is a construct and not an address, the MECSH model already supports telephone/video and other methods of 'visiting'. MECSH International encourages sites to use other means than in person for visits at this time. All phone/video visits should still be recorded in the data system as per usual.

- We recognize that at this time **fidelity** may be difficult to maintain, either because families are more difficult to contact and/or keep engaged, or nursing staff may be re-deployed into acute care or other COVID-19 related roles. *We ask that as much effort as is practically possible be made to continue to engage families, as we know that the added stress of this time are likely to exacerbate mental health issues and issues such as family violence and child abuse and neglect.*
- Although deemed in many sites as non-essential, doing whatever is practical to maintain MECSH contact with families is very important at this time. We will not, however, be holding any site to any form of accountability with regards to fidelity at this time.
- Continue to use family strengths and incorporate these into navigating these challenging times. For your clients that are more seasoned, the adapt and self-management concept could serve clients well during this unprecedented time.

Enrollment Paperwork

- Verbal consent to enroll is not sufficient however, completing enrollment paperwork can occur the following ways: email of completed forms, photo/scan/text of completed forms, regular mail, fax) as long as the signature is clear and there is a way to save it in your agency file.

Guidance for telehealth or phone visits according to MECSH model:

- Visits may be conducted over the telephone or other online media when face-to-face visits is not feasible.
- Our usual benchmark of a phone visit (as opposed to a courtesy call, or call to set up a contact) is that they should last about 30 minutes, as they should include MECSH content and not just be a ‘how are you doing?’ These visits are considered ‘valid’ visits where they include some topical or therapeutic discussion, that is, discussion that covers at least three of the following discussion domains:

1. infant wellbeing
2. maternal wellbeing
3. family wellbeing
4. preventive health care
5. planning and goal setting
6. environmental health and resources
7. and referrals.

Online MECSH Resources

- Log in to www.mecsh.scodle.com
- Go to the left: Click: Document Tab> My Files> MECSH Resources
 - Learning to Communicate Parent Handbook USA

- Learning to Communicate teaching cards (AUS). USA version is in your SFV MECSH Program schedule book and is available by PDF electronically as well.
- Healthy Beginnings 'booklets' for a clients: Click: Document Tab> My Files> MECSH Resources> Healthy Beginnings> Australia> booklets.

Healthy Beginnings

- In addition to www.mecsh.scodle.com
- The Healthy Beginnings talking point pages is in your spiral SFV Program Service Schedule (also available by PDF).
- In the back of your spiral SFV Program Service Schedule are websites categorized by Healthy Beginnings stages that could be sent by mail/email to help support content.
- There is PDF Healthy Beginning Linkages document available that has websites hyperlinked to make it easy to access the links.

Learning to Communicate

- In addition to www.mecsh.scodle.com
- There are videos, toy tips, photo walls and the essentials of communication and the Parent Handbook embedded into this resource
<http://www.learningtocommunicate.com.au/>

Promoting First Relationships

- Each program site should have a handbook and the DVD inside includes PDF copies of the handout resources
- A PDF is also available of the visit handouts that can be printed/mailed.
- At this time due to copyright, you are not permitted to share the PDF handouts electronically.

IT HOME

- All the questions item could still be asked. For the observation items, if telehealth allows your observations to occur, excellent, then it could be completed in full.
- Write notes in the data collection form comments area if attempted but unable to fully complete (incomplete, phone visit, etc). Once we go live with the MECSH database, you can capture notes in the IT HOME area.
- A reminder that IT HOME assessment has a wide time frame in which it can be done, so as long as it's completed before the next one is due it still counts.

Lactation Telehealth

- Vermont Medicaid will allow lactation consultation services to be delivered via telemedicine and/or audio-only from the date Governor Scott announced the emergency (3/13) until the end of that emergency. Lactation Consultants will need to follow the billing modifier and Place of Service guidance included in the memo that is on the [DVHA Covid-19 page](#).
- U.S. Lactation Consultant Association (USLCA), the US affiliate of ILCA.
<https://uslca.org/covid19-breastfeeding>
https://www.lactationtraining.com/images/web/c19/Fact_Sheet-In_Home_Visits.pdf
https://www.lactationtraining.com/images/web/c19/Fact_Sheet-Telehealth.pdf

Florida State Curriculum Partners for a Healthy Baby

- The ability to **Text** the Handouts to families has now been added to the Digital Curriculum.
- Currently, this functionality is only available within the “Curriculum” tab and not inside the “Visits” tab. This function was rapidly developed and released to help with the COVID-19 crisis.
- You will find the texting ability within the **“Curriculum”** tab. Once you’ve searched and selected the desired information, you will see the “speech bubble” icon in the top bar. To use it:
 1. Click the “speech bubble” icon
 2. Enter the phone number of the family member.
 3. You can enter a short message. This is optional.
 4. Then click “Send”
- The family member will receive a link to the Handout you were viewing on-screen. At this time they cannot reply to this text-message.
- Here is a link to complete instructions: <https://cpeip.fsu.edu/resourceFiles/digitaltexting.pdf>

Continuing Education

If time permits, this may be an opportunity to work on professional development



- The Institute for the Advancement of Family Support Professionals and National home visiting leaders are working to provide model-neutral, field-wide guidance and training for home visitors in making this transitioning to telehealth. This will be available here <https://institutefsp.org>. Initially, a series of webinars will be held & posted on using technology; conducting virtual screenings; and conducting virtual home visits. Following these rapid-response webinars, additional, longer-term and more robust training and technical assistance is planned.
- <https://institutefsp.org> is a free platform for home visitors in the field of maternal, early child home visiting. You can do a self-assessment and the system will develop a learning curriculum for based on your areas of growth.
- Review MESCH E- Learning, and your key program materials.

Stress & Coping

- The American Academy of Pediatrics also has some great information on their parenting website: <https://healthychildren.org/English/Pages/default.aspx>
- CDC has a page dedicated to Stress and Coping: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>
- Coronavirus and our Mental Health: <https://mentalhealth.vermont.gov/Corona-MH>

COVID 19 Resources

- Please continue to refer to the [Vermont Department of Health website](#) for the most up to date information. We are also working on building out the COVID children and family's section.
- If there are resources or supports that you or clients would benefit from, please let me know.

THANK YOU FOR YOUR WORK SUPPORTING FAMILIES DURING THIS UNPRECEDENTED TIME