

Alternative care funding support during a state of emergency

I wanted to update you on some recent changes that have been made to provide additional reimbursement funding to foster parents and relative caregivers for supervision needs due to the COVID-19 stay at home directives. You may know "childcare" as defined in our certification and payment rules is specific to when the supervision needs are for work or school. Additionally, the childcare provider must meet certain criteria in order to access the up to \$375/month childcare reimbursement. This new alternative care funding is an additional reimbursement of up to \$375 with different stipulations, as explained below.

Due to COVID-19 and the stay-at-home directives, we have heard of circumstances where foster parents are needing alternative caregiving that does not align with the current childcare rule, and utilizing providers who do not fit the strict categories defined in the childcare rules. Questions have been asked if the foster parent or relative caregiver can be reimbursed for the costs incurred due to these supervision needs.

Some examples are (but are not limited to):

- If a foster parent/relative caregiver has necessary errands (grocery store, etc.) and pays an individual to care for the children
- If a foster parent/relative caregiver needs to help supervise/facilitate a meeting with a child's therapist/parent/caseworker and needs help with other children in the home and pays an individual to care for the children
- If a foster parent/relative caregiver is working from home, utilized child care previously, and pays 17 year old neighbor to come to the home to care for the children while foster parent works
- If a foster parent/relative caregiver is assisting with distance learning requirements and utilizes an individual to help supervise children

To that end we have drafted rule language and procedure for "Alternative Care" specific to a state of emergency.

Oregon Administrative Rule:

(6) Alternative Care

During the declaration of any state of emergency, a supervisor may approve the use of an alternative care provider, and the certified family may be reimbursed for payments made to the approved alternative care provider for the care provided. The alternative care provider may include, but not be limited to respite provider, a child care provider, or a babysitter as defined in 413-200-0260 A supervisor may approve alternative care providers that do not fit within the above definitions if the alternative care is needed to meet the safety, permanency or well-being needs of the child or young adult.

Beginning April 1st 2020, and extending through the current pandemic, DHS has made these Alternative Caregiver funds available for certain reimbursements for additional supervision costs incurred due to the COVID-19 crisis.

The reimbursement must be approved by either your caseworker, certifier or a supervisor. A form will need to be completed with the name of the person who has been paid. That person will need to sign an invoice (provided by the department) that they were paid and the amount they received. Payments made during the month of April are eligible for reimbursement. The MAXIMUM amount to be reimbursed for Alternative Care is \$375 per month per child.

Reimbursement for alternative care provided outside of the Child Care OAR and Child Care Procedure is intended to provide additional financial support to foster parents and relative caregivers who, due to a state of emergency in their community, require support regarding the supervision of the foster children placed in their home.

Please refer to:

OAR: 413-090-0010 (6)

Procedure:

http://www.dhs.state.or.us/caf/safety_model/procedure_manual/Oregon-DHS-Child-Welfare-Procedure-Manual.pdf



Background Check Unit Shared Services



Kate Brown, Governor

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<http://www.oregon.gov/DHS/chc/>

TO: Lacey Andresen, Deputy Director, Office of Child Welfare Programs
Christina Crabtree, OPA3, Office of Child Welfare Programs

FROM: Jeff T. Akin, Administrator, Background Check Unit

RE: Variance Request during state of emergency

Pursuant to your request for a variance received on 03/27/2020, the Background Check Unit, servicing the Department of Human Services and the Oregon Health Authority, is granting this variance.

For all subject individuals associated with contracted service providers regulated by the Department of Human Services, Child Welfare, the Background Check Unit is suspending the need for fingerprints as indicated in OAR 407-007-0250, effective on 3/27/2020 until the end of the state of emergency in Oregon. This variance impacts all new background check requests as well as all background checks currently pending with the Background Check Unit.

Once the state of emergency is lifted, qualified entities shall submit new background check requests on those subject individuals whose fingerprints were suspended. Submission of the new background checks shall take place over a period of time to be determined at the end of the state of emergency.

We all can agree:

- ✓ Children need to hear their parent's loving words (and, if on a screen, loving face).
- ✓ Children need to hear (or see) familiar songs or conversation with their parent.
- ✓ Children need to talk about themselves. This means the adult asking about details at the child's level ("Tell me about something funny that happened to you today").
- ✓ Children need to know their parents are OK and parents need to know their children are OK.



Visitation is essential for a parent's and child's well-being:

The primary purpose of visitation is to maintain the parent-child attachment, reduce a child's sense of loss, preserve their sense of belonging as part of a family and community, and reassure parents and support them to continue to engage in case progress. A child needs to see and have regular contact with their parent(s) and siblings, as these relationships are the foundation of child development and well-being. The same is true for parents.

Children in foster care who visit frequently exhibit significantly fewer behavioral issues than children who visit infrequently, or not at all. Overall, children who have frequent contact with their parent(s) show less anxiety and depression than children whose parents' visits were either infrequent or nonexistent. (Cantos & Gries, 1997)

Parents who are offered, encouraged to participate in, and have frequent visits are more engaged in their case plan, more motivated to move toward change, have a more positive view of their own strengths and achieve reunification at a higher rate.

Visitation is fundamental to permanency

Visitation facilitates permanency planning, promotes timely reunification, and helps in the decision-making process to establish alternative permanency plans. Visitation maintains and supports the parent-child relationship necessary for successful reunification. Visitation is considered the heart of reunification, even when reunification is not likely, parents, siblings and extended family continue to be important in a child's life.



Visitation is vital to a child maintaining family relationships and cultural connections

Maintaining family connections has life-long significance for a child. Regular visitation maintains their relationships with siblings and others who have a significant role in a child's life. When a child loses family connections, they also lose family history, medical history and cultural information.

Benefits of parent-child visitation:

- ✓ Supports parent-child attachment
- ✓ Eases the pain of separation for all
- ✓ Maintains and strengthens family relationships
- ✓ Reassures a child that their parents/primary caregiver are alright and helps the child to not blame themselves for placement
- ✓ Supports the family in dealing with changing relationships
- ✓ Motivates parent to make positive changes in their life by providing reassurance that the parent-child relationship is important for a child's well-being
- ✓ Provides opportunities for parent(s) to learn and try new skills
- ✓ Supports a child's adjustment to the foster home
- ✓ Enables the parent(s) to be active and stay current with their child's development, educational and medical needs, church and community activities
- ✓ Provides opportunities for parent(s) to assess how their child is doing, and share information about how to meet their child's needs
- ✓ Assists in the assessment and decision-making process regarding parenting capacities and permanency goals
- ✓ Reduces the time in out-of-home care
- ✓ Increases the likelihood of reunification.

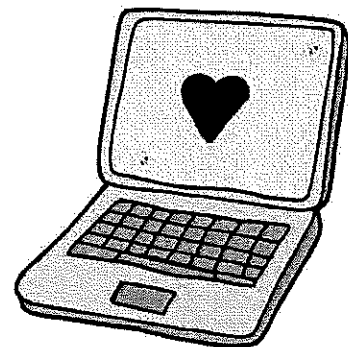
Activities for virtual visitation:

****It is very helpful when workers/SSAs connect with providers and parents prior to the visits to be able to help coach them through if the conversation dries up or is off to a rough start. Caseworkers/SSAs can talk with the provider about what the children have been doing and sharing that with the parent prior to the visit so the parent can ask about certain things, i.e.: "I heard you baked a cake this week!" Also helping parents come up with ideas prior to the visit to support quality connections.**

Read children a story or write a story together

Help with homework

Show off a new hairdo/outfit/dance move or anything else that is of current interest



Have a dance party

Sing together

For babies/toddlers: sing, smell stinky toes through the screen (have the child hold their feet up to the screen and the parent can “sniff” their toes), play peek-a-boo

Color pictures and show each other

Play hide and seek

For older youth: Play Coke v. Pepsi (questions that they can ask each other to start conversation – found online), talk about their friends/activities/what books they are reading or want to read, what shows are they watching, if they had a million dollars what would they spend it on

COVID 19 Recommendations for Contact in Certification Work:

We want to take the opportunity to underscore that these recommendations are outside of what is best practice; however, it is our goal to balance the safety of our staff, caregiver families and children in our care during these unprecedented and challenging times. The information provided are suggestions for ways to manage the safety of staff, children, families, and our communities while also taking steps to confirm safe environments. We acknowledge that not all possible scenarios are listed, and Foster Care Coordinators are available for consultation on unique circumstances if needed.

We emphasize the priority for our agency is the safety, health and wellbeing of children. We want to assure that children are placed with relative families as often as possible and that their permanency is moved forward and not stalled. Placement of children with their relatives includes children who await relative home studies, Adoption Home Study Updates and Current Caretaker Adoption Update home studies. We also prioritize the support of our current foster parents.

We recommend that if a decision is made to utilize a virtual contact in lieu of a face to face contact that this is noted in a provider note with the following message:

“Due to the COVID 19 virus pandemic and the requirement of social distancing to quell the spread of the virus, and to manage worker, child and caregiver safety, alternate methods of contact were implemented in consultation with the certification supervisor (and/or others).”

Definitions:

“Face-to-face” means an in-person interaction between individuals. During the declaration of any state of emergency, a supervisor may authorize face-to-face contact to be completed via videoconferencing or telephonically.

“Home visit” means a face-to-face contact at an individual’s residence. During the declaration of any state of emergency, a supervisor may authorize a home visit to be completed via videoconferencing or telephonically.

Face to Face Contacts during the Certification and Assessment Period

- Anyone planning a home visit to a family must assess their own health and not be at work or conduct home visits if they are ill.
- Call the caregiver to assure that no member in the household is ill. If any family member is ill, the recommendation is to postpone and reschedule the visit.
- A decision to make contact in other than an in-person contact should be staffed with the supervisor and documented in the provider notes.
- When virtual contact is approved, video conferencing (What’s App, Skype, Face Time, etc.) is recommended so that visual communication can occur. If this is not possible, phone contact is acceptable.
- Contact must be documented in OR-Kids. These virtual contacts are temporarily considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19. Documentation must include information regarding confirming safe environments, child safety, well-being and needs, and care provider needs.
- Foster Care Coordinators are available for consultation with branches in order to assist in talking through options for contact with family caregivers and children.

Applicable Rule:

413-200-0275 Assessment for Issuance of a Temporary Certificate of Approval (Amended 01/01/2020)

(1) The *Department* may only use the assessment described in this rule for the purpose of issuing a *Temporary Certificate of Approval*.

(2) To complete an assessment of an *applicant* and issue a *Temporary Certificate of Approval*, the *certifier* must:

(a) Review the completed application.

(b) Have face-to-face contact with each *applicant* and each other *member of the household*. If an *applicant* or other *member of the household* is unavailable when conducting face-to-face contact for a *Temporary Certificate*, the *certifier* must:

(A) Obtain approval of the supervisor to delay face-to-face contact with an *applicant* or other *member of the household*, and document the approval on a form approved by the *Department*; and

(B) Determine a date and time for the face-to-face contact within seven calendar days of the date the *applicant* or other *member of the household* becomes available.

(j) Complete a home visit:

(A) Observe and assess the safety of the physical environment;

(B) Walk through each room in the primary residence and each surrounding building and structure on the property, unless the building or residence is a self-contained, separate-entry residence rented to or owned by another individual;

(C) Complete a safety assessment of the home and surroundings using a form approved by the *Department*;

(D) Provide the home with age-appropriate documents outlining the Oregon Foster Children's Bill of Rights under ORS 418.201 and OAR 413-010-0180, Oregon Foster Children's Sibling Bill of Rights under ORS 418.608 and OAR 413-070-0860 (3); and

(E) Provide of copy of the Oregon Foster Parent Bill of Rights under ORS 418.648.

Recommendation:

- Prior to issuing a new certificate, one in person face-to-face with at least one of the applicants is still required due to the need to assess the physical home and surroundings by completing the Safety Assessment/Home and Surroundings Checklist (979).
- Supervisor should exercise their ability to approve the delay of meeting with one of the applicants or another household member, including:
 - a. If a household member is a higher risk group, such as an older member, someone who has an underlying medical condition, or is immune compromised.
 - i. Face to face contact with another member of the household may occur via video conferencing or phone call in this circumstance.
- The Safety Assessment/Home and Surroundings Checklist (979) as described above (j)(C) should be conducted in person when issuing an initial certificate to a newly certified family. See later guidance for information regarding when Renewal of a certificate or when a certified family moves.
- Current practice for obtaining and completion of application, criminal history background checks and child welfare background checks is unchanged as they are not required to be

done in person. See also the guidance on the temporary suspension of fingerprint requirements. (Available on OWL.)

Applicable Rule:

413-200-0274 Assessment for Approval of an Adoptive Resource or Issuance of a Certificate of Approval or Child-Specific Certificate of Approval (Amended 01/01/2020)

(1) To complete an assessment of an applicant and approve a potential adoptive resource or issue a Certificate of Approval or Child-Specific Certificate of Approval, the certifier must:

- (b) Have face-to-face contact with each applicant and each member of the household.
- (g) Evaluate with the applicant, the children and young adults appropriate for placement in the home and the placement capacity.
 - (i) Complete a minimum of two home visits.
 - (A) Observe and assess the safety of the physical environment.
 - (B) Walk through each room.....(additional language)
 - (C) Complete a safety assessment of the home and surroundings...(additional language)

Recommendation:

A minimum of one home visit and face to face contact with the applicants will occur, with considerations:

- Evaluate with the supervisor, employee, and caregiver family whether additional contacts and interviewing could be done with the family through phone or video conferencing.
- A decision to only have the minimum of one home visit with the applicants should always be made with the supervisor and documented in the provider notes.

Applicable Rule:

413-200-0276 Assessment to Move from a Temporary Certificate of Approval to a Certificate of Approval or Child-Specific Certificate of Approval

(1) To complete the assessment of an *applicant* that already has been issued a *Temporary Certificate of Approval* and issue a *Certificate of Approval* or *Child-Specific Certificate of Approval*, the *certifier* must complete the following activities as soon as possible, but no later than 180 days from the date the *Temporary Certificate of Approval* is issued, unless the certificate has been extended under subsection (3) of this rule:

- (c) Conduct a home visit at least every 90 days, and when necessary, additional home visits. During each visit, review and assess the *certified family's* compliance with certification standards and the conditions that appear to exist in the home that affect safety, health and well-being for the *child* or *young adult placed in the home*; and document the *certified family's* compliance with the certification standards after each visit in the *Department's* electronic system.

413-200-0278 Responsibility to Determine the Maximum Number of Children or Young Adults in a Certified Family Home

(5) When a Child Welfare Program Manager or *designee* approves exceeding the maximum capacity in a certified home, the *certifier* must:

- (a) Visit the home every 90 days as long as the home exceeds the maximum capacity; and

(b) During each visit, review, assess and document the *certified family's* compliance with certification standards as outlined in OAR 413-200-0283 and the conditions that appear to exist in the home that affect safety, health and well-being for the *child* or *young adult* placed in the home.

413-200-0283 Responsibilities to Monitor Certification Compliance
(Amended 01/01/2020)

(1) A *certifier* must conduct the following home visits:

- (a) A minimum of one home visit every 90 days during the period a *Temporary Certificate of Approval* is effective;
- (b) A minimum of one home visit every 90 days when a *certified family* has been approved to exceed the maximum capacity as prescribed in OAR 413-200-0278(1), for the duration of the management approval; and

Recommendation:

90-day face to face contact requirement should be completed via telephone or video conferencing capability, with considerations:

- Providers with Temporary Certificates or who are overfilled may have the need for additional supports and services.
- Explore with casework staff what contacts have been made by others with the family and child. Having a discussion with the team about the family's needs is imperative if our staff are meeting virtually with families and children.
- Consider more frequent virtual contact to connect with the family on services and supports.
- A decision to make contact in other than an in-person contact should be staffed with the supervisor and documented in the provider notes.

Applicable Rule:

413-200-0283 Responsibilities to Monitor Certification Compliance
(Amended 01/01/2020)

(1) A *certifier* must conduct the following home visits:

- (a) A minimum of one home visit every 90 days during the period a *Temporary Certificate of Approval* is effective;
- (b) A minimum of one home visit every 90 days when a *certified family* has been approved to exceed the maximum capacity as prescribed in OAR 413-200-0278(1), for the duration of the management approval; and
- (c) A minimum of one home visit to any *certified family* every 180 days, which must include:
 - (A) Face to face contact with at least one certified individual, and
 - (B) Verbal contact with both certified individuals.

Recommendation:

Delay the 180-day visit until it can occur in-person or perform it virtually, with considerations:

- Given the challenges and uncertainty of this this time, families may have the need for additional supports and services.
- Explore with casework staff what contacts have been made by others with the family and child. Having a discussion with the team about the family's needs is imperative if our staff are meeting virtually with families and children.

- Whenever possible utilize videoconferencing in order to complete a walkthrough of the home environment in order to confirm safety.
- Consider more frequent virtual contact to connect with the family on services and supports.
- A decision to make contact in other than an in-person contact should be staffed with the supervisor and documented in the provider notes.

Applicable Rule:

413-200-0287 Assessment for Renewal of Certification
(Amended 01/01/2020)

- (b) Conduct a minimum of one visit to the home of the certified family and:
- (A) Have face-to-face contact with each member of the household.
 - (C) Observe and assess the safety of the physical environment.
 - (D) Walk through each room...*(additional language)*.
 - (E) Complete a safety assessment of the home and surroundings using a form approved by the Department.

Recommendation:

Upon timely receipt of a renewal application, extend the current Certificate of Approval until assessment activities can occur in person OR perform renewal activities virtually, with considerations:

- Evaluate the family's experience and standing with the Department.
- Consider if ongoing issues and concerns have been present during their time being certified and whether in person assessment should occur to assess these concerns prior to issuing a new certificate.
- Evaluate if videoconferencing technology is available in order to virtually complete the Safety Assessment/Home and Surroundings Checklist (979).
- A decision to make contact in other than an in-person contact should be staffed with the supervisor and documented in the provider notes.

Applicable Rule:

413-200-0292 Responsibilities Regarding a Previously Certified Family and When a Certified Family Moves
(Amended 01/01/2020)

(1) The Department may conduct an assessment to reopen the previous certification when all of the following apply:

- (a) The certification has been closed less than six months.
- (b) The certificate would not have expired during the months the certification has been closed.
- (c) There have been no additions to adult members of the household, and the previously certified family remain the same.
- (d) The former certified family continues to live in the same residence.
...*(additional language)*

(2) When a former certified family requests that the Department reopen the family's previous certification, and the requirements of section (1) of this rule are met, the certifier must undertake the following actions:

(d) Conduct a home visit to identify and assess any changes in the environment or family:

- (A) Have face-to-face contact with each member of the household.
- (C) Observe and assess the safety of the physical environment.
- (D) Walk through each room...(additional language).
- (E) Complete a safety assessment of the home and surroundings using a form approved by the Department.

(6) When the certified family moves to another residence in the State of Oregon, the Department terminates the certification. The Department may issue a new certification for the new residence after the activities described in this section have been completed. Within 10 business days, the Department must complete the following actions:

(a) Conduct a home visit.

- (C) Observe and assess the safety of the physical environment.
- (D) Walk through each room...(additional language).
- (E) Complete a safety assessment of the home and surroundings using a form approved by the Department.

Recommendation:

Upon receipt of a Renewal or Change of Status application, complete assessment activities in person OR perform activities virtually, with considerations:

- Evaluate the family's experience and standing with the Department.
- Consider if ongoing issues and concerns were present during their time being certified and whether in person assessment should occur to assess these concerns prior to reopening the certificate.
- Evaluate if videoconferencing technology is available in order to virtually complete the Safety Assessment/Home and Surroundings Checklist (979).
- A decision to make contact in other than an in-person contact should be staffed with the supervisor and documented in the provider notes.

SAFE Home Study Implementation and Interviews:

Message from the SAFE Consortium: *"As Covid-19 affects work throughout the world, the Consortium has received several inquiries regarding the protocol surrounding home visits and SAFE. While the SAFE team continues to encourage an adherence to best practice standards, during this pandemic, you will need to follow your state, provincial, and agency policies and protocols."*

The way SAFE Home Study Interviews are conducted is not dictated in policy, but in order to have fidelity to the SAFE Model, interviews are recommended to occur in person within the family home. In person interviews help the certifier assess the applicant's answers, observe the demeanor, reactions and behavior of the applicant(s). In addition, many of the questions are very personal in nature and often the certifier is assessing past trauma. In person interviews are best practice; however, accommodations may be made during this time to assure safety of all involved.

Questionnaire 1 can be completed by the applicant separately from the interview and returned to the certifier. The certifier can interview the applicant either in person or by virtual format for additional detail and information.

Questionnaire 2 and the Update Questionnaire are administered in person and is not to leave the sight of the certifier.

There are two options in order to complete the home study interviews:

Option 1: The supervisor and then the Program Manager can authorize a Management Approval to extend the Temporary Certificate to allow for more time for in person interviews to occur, in order to complete the interview/assessment process for 30 and then 60 days and possibly more.

Option 2: Allow a videoconferencing interview in order to complete interviews within the 180-day timeline and follow recommendations for social distancing. The certifier should ask the questions in an open-ended manner, so they are not reading all of the multiple-choice options aloud to the applicant. The certifier would interview for content and may select the options on the questionnaire that most closely match the answers provided by the applicant. The certifier would take notes for more extensive content. Questionnaire 2 and/or Update Questionnaire would be signed by the worker as completed via video conference and the applicant would not be asked to sign the form.

- Considerations:
 - Technology must be available for both certification staff and applicants to ensure videoconferencing is possible;
 - The process of interviewing via videoconference may be more time consuming because of the need to administer the questionnaire verbally as opposed to having it read by the applicant.

Foster Care Coordinators are available for consultation with branches as needed.

Oregon Child Abuse Hotline Child Abuse Reporting Guide



When in doubt, call

Any time you suspect abuse, call. Hotline screeners accept voluntary calls from all concerned citizens. Make an immediate report to the Oregon Child Abuse Hotline if you are a mandatory reporter (see Oregon Revised Statute 419B.050) and have reasonable cause to believe that:

- Any child with whom you have been in contact has suffered abuse, or
- Any person with whom you have been in contact has abused a child.

How to make a report of child abuse

The Oregon Child Abuse Hotline accepts reports 24 hours a day, 365 days a year.

When calling, you can choose from the following options:

- Spanish speaking
- Law enforcement
- Mandatory reporter
- General public
- Call back feature

1-855-503-SAFE(7233)

If the child is in danger, please call 911 immediately.

Mission

The Oregon Child Abuse Hotline's mission is to receive reports of child abuse and provide excellent customer service with equitable and consistent decision making to ensure safety for Oregon's children.

Be prepared to provide the following information (if known):

- Name, date of birth or age for all adults and children involved
- A description of the abuse, including whether the child has current injuries
- Alleged perpetrator's name, location and access to the child
- Whether the child has American Indian or Alaska Native heritage
- Telephone numbers, including area code
- Any cultural or language considerations, race and ethnicity
- Addresses, directions or other means to locate the individuals of concern
- Additional information related to family functioning, resources and supports
- Detailed observations and statements made by the child or others
- If applicable, a description of the child's disability or any special needs.

Abuse types:

- Neglect
- Physical abuse
- Mental injury
- Sexual abuse
- Threat of harm

Possible abuse indicators:

- Inadequate supervision
- Failure to provide food, clothing or shelter
- Unexplained or suspicious injuries
- Intimate partner violence
- Substance abuse and misuse that affects the child
- Fear or changed behavior in child
- Atypical interest in sex, knowledge of sexual behavior or acting out sexually
- Rejecting or terrorizing the child.

What you can expect from the hotline:

A focus on safety

- National data reveals with a centralized hotline, more families are found to be eligible for supportive services.
- Screeners are trained and trauma-informed.
- All reports are also reported to law enforcement.

A focus on consistency

- Call center software captures real time data and provides information to improve screener performance.
- Consistent application of Oregon Revised Statutes when screening reports of child abuse.
- Your feedback is used for continuous quality improvement (CQI).

A focus on customer service

- Hotline screeners and supervisors are available 24/7/365 to accept reports of suspected child abuse.
- You are notified of the outcome of your report.

The Oregon Child Abuse Hotline wants to hear your questions, comments and training needs.

Feedback.OregonChildAbuseHotline@dhsosha.state.or.us

You can get this document in other languages, large print, braille or a format you prefer. Contact the Oregon Child Abuse Hotline at 1-855-503-SAFE (7233). We accept all relay calls or you can dial 711.

In the Matter of Imposing "Level 3")	CHIEF JUSTICE ORDER
Restrictions on Court Operations)	No. 20-006
)	
)	ORDER IMPOSING "LEVEL 3"
)	RESTRICTIONS ON COURT
)	OPERATIONS

The conditions and impact that result from the spread of the COVID-19 virus are changing rapidly. In accordance with Governor Kate Brown's emergency declaration and the current thinking of those in the public health community, and in consultation with our OJD Advisory Committee, I am directing institution of **Level Three** restrictions on operations, through at least March 27, 2020. All courts must take steps to ensure that these restrictions are in place no later than the beginning of business on Thursday, March 19, 2020. These restrictions may be extended beyond March 27, and further restrictions may be implemented. On the other hand, we may be able to increase our operations through the use of technology.

For now, we are requiring that the Oregon circuit courts, the appellate courts, the Tax Court, and the State Court Administrator's Office and its Divisions comply with these Level 3 restrictions to significantly limit the number of persons in our courthouses and places of work. Our goal is to do our part to help slow the spread of the COVID-19 virus and to minimize any health risks to court personnel, litigants, representatives, and others who come to our courthouses, while meeting our courts' obligations to the public.

This is a dynamic situation and things are changing very quickly. I encourage all Presiding Judges, Trial Court Administrators, Division Directors, and the State Court Administrator to thank everyone – staff and community – for their patience; to let everyone know that Oregon's courts are doing their best to serve the public and protect their communities; and to convey the message that courts will continue to evaluate and adjust as the situation develops. And, as Chief Justice, I thank all OJD judges and staff for their continued diligence, commitment, and care. As my dad would say, you have been GREAT!

ORS 1.002 provides that the Chief Justice of the Oregon Supreme Court is the administrative head of the judicial department of government in this state; shall exercise administrative authority and supervision over the courts of this state consistent with applicable provisions of law and the Oregon Rules of Civil Procedure; and, to facilitate exercise of that administrative authority and supervision, may make rules and issue orders as appropriate or take any other action appropriate to perform the functions of the office of Chief Justice.

I HEREBY ORDER, pursuant to ORS 1.002, that the following "Level 3" restrictions on court operations must be in effect no later than the beginning of business on Thursday, March 19, 2020, and will be in effect through Friday, March 27, 2020, unless further extended:

1. Definitions. As used in this order:
 - a. "Social distancing" means at least 3 feet between each participant.
 - b. "High risk" means the category of persons whom the Centers for Disease Control has identified as being at high-risk for serious illness due to COVID-19:
 - (1) Persons 60 and older;

- (2) Persons with underlying health conditions including heart disease, lung disease, or diabetes;
- (3) Persons with weakened immune systems; and
- (4) Persons who are pregnant.

2. Jury Trials

- a. This subparagraph applies to jury trials other than jury trials for defendants who are in custody on criminal charges that provide them with a statutory or constitutional right to a speedy trial. All such jury trials scheduled to begin during the period of these Level 3 restrictions shall be postponed, with no motion to that effect needed. No new jury trials shall be scheduled during that period.
- b. This subparagraph applies to jury trials for defendants who are in custody on criminal charges that provide them with a statutory or constitutional right to a jury trial, where such rights have not been voluntarily waived. Absent a party's motion to postpone such a trial, the court shall not postpone such trials unless it determines that postponement will not violate a statutory or constitutional right.
- c. Courts may complete jury trials that have commenced and that can be completed before the beginning of business on Thursday, March 19.

3. Forcible Entry and Detainer Proceedings

- a. All first appearances under ORS 105.137(1) and (2) shall be postponed without the need for a motion. All parties who are required to appear on the date set by summons shall be deemed to have appeared, and no answer shall be required at that time. When the date for first appearance is rescheduled by the court, all parties shall appear at such first appearances in person on the date set.
- b. All trials under ORS 105.137(6) shall be postponed. A landlord that wishes to have the court enter an order that a defendant pay rent pending trial must file a motion for such an order.

4. All Other Trials and Hearings

Courts shall postpone and not schedule any other in-person hearings or trials during the period of these Level 3 restrictions, except in the following circumstances:

- a. In-custody arraignments, in-custody probable cause hearings, in-custody probation violation hearings, and in-custody plea hearings;
- b. Grand jury proceedings or preliminary hearings for felony indictments;
- c. Case scheduling or docket management hearings;
- d. Civil Commitment hearings;
- e. In Juvenile proceedings:
 - (1) Protective Custody Order applications;
 - (2) Shelter hearings;

- (3) Delinquency in-custody initial appearances; and
 - (4) 10-day detention review hearings and 28/56-day detention duration hearings for in-custody youth;
 - f. In Family proceedings:
 - (1) Motion for Expedited Parenting Time;
 - (2) Immediate Danger motions and hearings;
 - (3) Protective Order applications (Family Abuse Prevention Act, Elderly Persons and Persons with Disabilities Abuse Prevention Act, Sex Abuse Protective Orders, Emergency Risk Protection Orders, and Stalking Orders);
 - (4) Contested Protective Order hearings; and
 - (5) In-custody Violation of Restraining Order trials;
 - g. In Probate proceedings, temporary guardianship or conservatorship *ex parte* motions;
 - h. Treatment court proceedings, but only if the Presiding Judge determines that those proceedings are necessary and can be conducted by observing social distancing; and
 - i. Other circumstances in which a Presiding Judge determines that a postponement or failure to schedule would violate a statutory or constitutional right.
5. All Other Direct Court Services
- a. Each court shall determine the in-person court services that the court is legally required to provide, and each court must continue to provide those services.
 - b. Courts shall not provide any other in-person services.
 - c. Courts shall answer their phones during their established business hours.
 - d. Courts shall consider their abilities to provide services remotely or telephonically.
 - e. As needed, a Presiding Judge or designee may direct that a court's legally required in-person services be provided for limited hours with limited staff. All in-person services must be provided observing social distancing.
 - f. If a person seeking in-person services exhibits symptoms associated with COVID-19, the court may refuse service to the person and direct the person to leave the courthouse.
6. Presiding Judge Authority
- a. Each Presiding Judge has discretion to order that a particular trial, hearing, or other court operation will take place if the assigned judge, after consulting with the parties and other affected persons, determines that there is a need for in-person court action, that social distancing can be required, and that the court can order other reasonable precautions to protect the health of the participants, including court staff.

- b. Each Presiding Judge shall have authority to suspend any Supplementary Local Rule that may be an impediment to Level 3 operations.

7. Requirements for All In-Person Court Operations

For all in-person trials, hearings, and operations, the court shall, when reasonably possible and considering the need for safety measures, take the following precautions:

- a. Require social distancing; and
- b. Maintain vigilance about cleaning in accordance with other OJD guidelines.

8. Expectations for Lawyers

When in-person trials or hearings are held, attorneys are expected to appear in-person, unless the attorney is excused, or the court has adopted a procedure that allows attorneys to appear remotely or telephonically. An attorney who has concerns about appearing in-person due to COVID-19 concerns should seek to be excused, request a postponement or remote appearance if desired and feasible, and, if necessary, take steps to help the client find substitute counsel.

9. Remote Work Assignments

All judges and staff must be assigned to work from home, or otherwise directed not to come into the courthouse to work, unless the Administrative Authority directs that they be at work to provide court services in accordance with these Level 3 restrictions. The Administrative Authority or designee should avoid directing persons in high-risk categories, or those with good cause, to report to the court for work.

10. Public Safety and Community

- a. Courts must work with the Criminal Justice Advisory Committee, their Local Public Safety Coordinating Councils, and other stakeholder groups to explore system issues and ensure the health of those who are incarcerated and coming to court.
- b. Courts must explore alternatives to current arrest and detention policies including use of cite-in-lieu of arrest where appropriate to keep jail population at a minimum.
- c. Courts must work with attorneys and their local bar associations to ensure that every possible opportunity to reduce risk and preserve the function of Oregon courts has been identified and explored.

11. Meetings and Conferences, and Travel

- a. No in-person meetings or conferences of more than 5 people may be held, except as authorized by the Presiding Judge, State Court Administrator, or designee. Judges and staff should hold or attend meetings of 5 or fewer persons only after weighing the benefits and risks and the available alternatives.

Participants shall maintain social distancing. Those who do not participate in person should try to attend remotely.

- b. All other meetings and conferences should be conducted remotely.
- c. All in-state and out-of-state work-related travel is prohibited, except as authorized by the State Court Administrator or designee.

12. Appellate Courts, Tax Court, and OJD Divisions

- a. The Level 3 restrictions described in paragraphs 1 through 11 apply, to the extent practicable, to the Supreme Court, the Court of Appeals, the Tax Court, and except as described in subparagraph b. below, to the Office of the State Court Administrator (OSCA) and the Divisions within that Office. To the extent that those courts, OSCA, or any divisions are able to continue to conduct their operations using remote services, they should do so.
- b. The Citizen Review Board (CRB), in keeping with paragraph 4 of this order, shall postpone and not schedule any CRB reviews during the period of these Level 3 restrictions.

13. Notice and Communication

Presiding Judges, Trial Court Administrators, and the State Court Administrator and designees must work together to:

- a. Use all reasonable means to inform judges, staff, lawyers, and the public of these restrictions; and
- b. Post information about these restrictions and local court operations on the court's webpage.

14. These Level 3 restrictions are to be in effect no later than the beginning of business on Thursday, March 19, 2020. They will continue to at least March 27, 2020. They may be extended by further order, or they may be amended by further order.

15. This order takes effect immediately.

Dated this 16th day of March, 2020.



Martha L. Walters
Chief Justice

When a child is reported to have tested positive for Covid-19 (either by a medical provider or a caregiver):

- DHS is required to inform the child's parents, other parties to the juvenile case as well as to the juvenile court.
- DHS can and should also disclose such information to service providers working with the child (including the foster parents for the child's sibling if the child and sibling are having or have had contact).
- DHS could also disclose this information to any other person/entity outside the juvenile case, again presuming that such disclosure is consistent with the best interests of the child.
- For a child 15 years or older, DHS needs to ask the child to agree to this disclosure and to work collaboratively with the child/ward's attorney to obtain this agreement.
 - If a child 15 years or older denies the disclosure to parties to the juvenile case and/or to service providers, this requires consultation with managers and DOJ before deciding to disclose the information.

When a certified foster parent is reported to have tested positive for Covid-19

- Foster parent information is protected by ORS 418.642 and OAR 413-200-0298. However, if the disclosure is authorized by the certified family or if disclosure is necessary or advisable to protect the best interests of a child or young adult, OAR 413-200-0298(4) allows DHS to disclose information about a certified family (if not otherwise prohibited by federal or state law).

If any caregiver aside from DHS-certified (DD, BRS treatment foster parent or staff, PRTS staff, etc.) is tested and confirmed positive for the COVID-19 virus, who are we responsible to notify?

- Disclosure under 409.225 to the court and the parties to the juvenile court case would be required.
- Disclosure under 409.225(3) to other service providers working with the child and family is within DHS authority IF it is determined to be in the best interest of the child and necessary to provider services to the family.

If a parent (children in home or in foster care) discloses they are tested and confirmed positive for the Covid-19 virus

- Disclosure under 409.225 to the court and the parties to the juvenile court case would be required. (Recommended to inform the parent's attorney first)
- Disclosure under 409.225(3) to other service providers working with the child and family is within DHS authority IF it is determined to be in the best interest of the child and necessary to provider services to the family.

If disclosure is not required, the most prudent course of action is to work collaboratively with the parent, foster parent, or provider to discuss their voluntary authorization for disclosure to those with a need to know.

DHS should be cautious when exercising its discretion and ability to disclose this information to persons/entities outside of the juvenile case without authorization in circumstances summarized above. There is risk that disclosure of this information to persons/entities outside the juvenile case could be challenged. It is strongly recommended that these decisions be staffed with supervisors and/or DOJ in advance. The decision should be documented in the case record with an explanation.

Consider that the disclosure of this information, even when required, may result in further disclosure by other parties/entities. To protect privacy, it may be sufficient to simply disclose that an individual in a household has tested positive without identifying the specific individual.

3/24/2020

COVID-19 Recommendations for Permanency Work

Face to Face Contacts:

- Anyone planning a home visit must assess their own health and not be at work or conduct home visits if they are ill;
- Call the parent/caregiver to assure that no member in the household is ill. If any family member is ill caseworkers must consult their supervisor for guidance on how to proceed to mitigate risk of staff exposure.
- Permanency consultants are available for consultation with branches in order to assist in talking through options for contact with parents, caregivers and children.

Out of Home Care Placements: Monthly face to face contact between case workers and children currently residing in DHS certified foster homes, and other out of home care settings including homes certified by Oregon tribes and caring for children in DHS custody and residential treatment settings for children and their parents:

- Caseworkers will temporarily be permitted to conduct monthly face to face visits with children currently residing in DHS certified foster homes, and other out of home care settings virtually and by phone.
- The ideal contact is through video conferencing (What's App, Skype, Face Time, etc.) so that visual communication can occur. If this is not possible, phone contact is acceptable.
- It is also advised these methods for contact occur more than once a month when possible to ensure the safety and well-being of our children and young adults in care. This includes relative placements.
- It is encouraged that staff talk with children on their own if possible, during some part of the virtual visit.
- Contact must be documented in OR-Kids. These virtual contacts are temporarily considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19. Documentation must include information regarding confirming safe environments, child safety, well-being and needs, and care provider needs. Please refer to the Face to Face Guide in the appendix of the procedure manual Chapter 4 for guidance on information to be documented.

In-home Placements: Monthly face to face contact between case workers and children currently residing in-home:

- If possible, monthly in-person face to face contact should still occur for children currently on in-home plans or trial reunifications.
- Before making in-person contact, please confirm with the parent/caregiver that no one in the home is confirmed to be sick or displaying symptoms of COVID19. If this is the case, please follow the precautionary guidelines on OWL (DHS/OHA shared intranet).
- Contact must be documented in OR-Kids. If the contact was virtual it will temporarily be considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19. Documentation must include information regarding confirming safe environments, child safety, well-being and needs, and parent needs and

progress. Please refer to the Face to Face Guide in the appendix of the procedure manual Chapter 4 for guidance on information to be documented.

Monthly face to face contact between case workers and certified care providers:

- Caseworkers will temporarily be permitted to conduct face to face visits with certified care providers virtually and via phone.
- The ideal contact is via video conferencing so that visual communication can occur. If this is not possible, phone contact is acceptable.
- It is also advised these methods for contact occur more than once a month when possible to ensure certified care providers are supported to care for themselves and our children and young adults during this time of rapid change.
- These virtual contacts are temporarily considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19.

Monthly face to face contact between case workers and parents whose children are not currently in their care:

- Caseworkers will temporarily be permitted to conduct face to face visits with parents whose children are not currently in their care virtually and via phone.
- The ideal contact is via video conferencing so that visual communication can occur. If this is not possible, phone contact is acceptable.
- It is also advised these methods for contact occur more than once a month when possible to ensure parents are supported to care for themselves, connect with their children, and get the trauma-informed support and engagement they need during this time of rapid change.
- These virtual contacts are temporarily considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19.

Face to face contact prior to and following a return home:

- If possible, monthly in-person face to face contact should still occur for children and parents prior to and following a return home.
- Before making in-person contact, please confirm with the parent/caregiver that no one in the home is confirmed to be sick or displaying symptoms of COVID19. If this is the case, please follow the precautionary guidelines on OWL (DHS/OHA shared intranet).
- Contact must be documented in OR-Kids. If the contact was virtual it will temporarily be considered face to face contact and should be documented as such. Please indicate there was a virtual visit due to COVID19. Documentation must include information regarding confirming safe environments, confirmation of the in-home safety plan, child well-being needs, and parent needs. Please refer to the Face to Face Guide in the appendix of the procedure manual Chapter 4 for guidance on information to be documented.

Transporting parents to residential treatment:

Recommendation: As of last week, treatment programs are requiring that DHS staff transport parents to residential treatment. Parents will not be allowed an intake if they arrive via any other transportation. We know that timely access to treatment is crucial. In order to support parents moving toward recovery we ask that staff take vans or larger cars where social distancing can be accomplished to transport parents to treatment.

Applicable Rule:

413-040-0013 Requirements for Monitoring the Case Plan

(Amended 11/01/16)

413-040-0024 Requirements for an In-home Ongoing Safety Plan Prior to Return and Next Day Contact

(Amended 10/01/15)

413-080-0054

Monthly Face-to-Face Contact Requirements

(Amended 11/1/2018)

Good morning,

The virus that causes COVID-19 is impacting every part of our daily life. It also impacts child safety. The child safety community is vast, including but not exclusive to: Child Welfare staff, educators, medical and mental health professionals, treatment providers, skills trainers, clergy, coaches, neighbors, friends and family. We rely on the community to share information obtained through expertise, insight, observations, and the self-report of children. As we navigate this health crisis, we are considering how to keep their important perspective.

The collateral impacts of COVID-19 may create or exacerbate family vulnerabilities that put child safety at risk. This document outlines some of those risk factors, vulnerabilities, and recommendations that you, as our partners, can help us to keep an eye on.

At-Risk Communities

- Young children
- Children and adults with developmental delays or other medical vulnerabilities
- Isolated children and families
- Youth and families with severe emotional/mental health needs

Risk Factors

- Social isolation
- Limited resources
- Under employed or recently unemployed
- Homeless/inadequate living conditions
- History of intimate partner violence
- History of substance misuse/overuse

Vulnerabilities Related to COVID-19

- Lack of access to medical care
- Lack of face time with mandated reporters
- Limited access to regular meals due to school closures
- Known exposure to COVID-19 or symptomatic people
- In close contact with someone who is considered high risk if infected with COVID-19

Promoting Safety and Wellbeing for Children and Families

If you are not meeting in person with your service community, what can you offer? Examples include regular phone calls, Skype meetings, e-mails, and sharing information about community resources.

How can we maintain some sense of continuity of services and/or practices around child safety intervention?

How can our providers continue to stay connected to the children utilizing alternative communication methods? What are some observations they can make when communicating via telephone, video conferencing, text message, and communication methods?

Consider observations that typically inform decisions to make a mandatory report to the hotline. Are there insights that can be picked up through a telephone call, e-mail, video call or text message that you would look out for when considering if a child is safe?

Please consider the following questions over the course of your work:

- Are vulnerable children alone, without the care and attention of a safe adult?
- Can children identify a safe adult and have the means to reach them?
- Do non-parental caregivers have the capacity to meet the needs of the children they are supervising? Do these children have exceptional needs?
- If you know there is a history of intimate partner violence, when was the last time someone saw and interacted with the child(ren)? Talked to them? Saw the household? Asked if they need help and/or assistance?

Are there resources that can be shared with vulnerable families? Examples include Next Door App, Food Banks, Schools and Churches offering resources.

If you are continuing to meet with members of the community, please follow the social distancing and share that information with the members you are communicating with:

<https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Pages/emerging-respiratory-infections.aspx>

If you believe that a child is the victim of abuse, please make a report to the Oregon Child Abuse Hotline: 1-855-503-SAFE (7233)

Other Important Resources:

- **Call for questions on local resources and guidance: 211info.org or call 211**
- **Partnership for a Hunger Free Oregon: list of school districts and locations across Oregon offering school lunches**
- **Lines for Life, a nonprofit dedicated to substance abuse and suicide prevention: 1-800-273-8255 or text '273Talk' to 839863**



Guide for facilitating inclusive virtual meetings

OEMS
Office of Equity &
Multicultural Services

Why use inclusive facilitation for online meetings?

The Oregon Department of Human Services is operationalizing our Core Values of Respect and Service Equity through initiatives like [RiSE](#). Building an inclusive organizational culture is challenging in normal times, but in the age of COVID-19 creating inclusive virtual spaces can seem especially daunting. Social distancing is requiring staff and community partners to use online meetings to get work done which often leads to feelings of human disconnection and a loss of productivity. Watch this [humorous video](#) that illustrates some of these challenges. It is imperative to our collective success that each person is able to be fully present and contribute their authentic selves in every meeting.

Beyond the technological challenges, research shows that for in-person meetings:

- In a four-person group, **two** people do 62 percent of the talking.
- In a six-person group, **three** people do 70 percent of the talking;
- In an eight-person group, **three** people do 70 percent of the talking.¹

Usually those individuals dominating the conversation do not realize their impact. They leave believing that the meeting went well, while their teammates feel excluded. Moreover, studies show that women, people of color, and other underrepresented groups are often silenced, interrupted, dismissed, or talked-over at twice the rate of their colleagues. This inequitable dynamic gets amplified on virtual meetings if meeting facilitators are not actively managing it.

When using online meeting technologies it is crucial to be organized and communicate clearly before the meeting, much more than if it were an in-person meeting. Interpersonal cues are more difficult to read in a video or phone call such as body language or tone of voice. Building teamwork, relationship, and a sense of community is challenging in these conditions. Facilitators need to be mindful of ensuring that there is equity for all people to participate, whether they are in the room or online.

This guide offers tips for facilitators to help make your meetings more welcoming and productive for everyone - no matter *who* or *where* they are. We would love to hear your ideas for practices that build inclusive meetings to keep improving this guide for everyone.

¹ Leigh Thompson "How to neutralize a meeting tyrant" *Fortune* (2013)

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A word about facilitator preparedness

When discussing excellence in inclusive meeting practice, the facilitator doing their own work around cultural humility and self-awareness is of highest importance. We use the term “facilitator” in this guide to refer to the meeting organizer and/or the person that is responsible for setting the space for a group to have an open, productive, and inclusive meeting. A skilled facilitator continuously hones their knowledge and skills around their own implicit biases, communication style, intercultural conflict style, work preferences, motivations, triggers and hot buttons around diversity and equity issues. A skilled facilitator asks for honest feedback and seeks new learning opportunities. The facilitator sets the tone for the meeting and it is vital they continuously do deep self-exploration into their positionality, privilege, and impact on others.

Questions, comments, or suggestions?

Contact Jason Mak, Diversity and Inclusion Manager at jason.d.mak@dhsoha.state.or.us

PARTICIPANTS

Review your list of attendees: are you missing underserved communities or those that represent diverse or differing points of view?

- Subject matter experts (SME) that also have an equity lens?
- Diversity of stakeholders, staff, and/or community members across gender, race, ability, sexual orientation, gender identity, position, program, and other differences?
- Based on available data and historical patterns of inequities are the people, families, and communities disproportionately impacted included?
- Tribal partners?
- Employee Resource Group representatives?
- Local Equity and Inclusion Committee (EIC) members?
- DHS Tribal Relations or Office of Equity and Multicultural Services (OEMS) staff?

MEETING INVITATION

What is the most welcoming way to invite participants?

- Are there elders, management, staff, community, or honored guests that need to be consulted or contacted prior to sending an invitation and agenda?
- If community members are invited how have you ensured that barriers such as internet access, technology, and other considerations have been addressed appropriately? If they are appearing in-person, have we offered to pay for travel costs or address childcare needs?
- Does the meeting date or time conflict with a religious, cultural, holiday, or other important observance or event? (See <https://www.diversitybestpractices.com/diversity-holidays>) If it is unavoidable, did you acknowledge, explain and apologize to participants?
- Are there participants from other time zones? If so, have their needs been considered?
- Do you include a description of the meeting that makes clear what the meeting purpose and goals are?
- Is the meeting invitation and materials sent out at least a week prior to the meeting?
- Did you ask potential participants for agenda items or ideas for the meeting?

- Did you include an agenda and all meeting materials in the calendar invitation?
- Is there information about and a contact person for ADA reasonable accommodations?
See DHS Required Accommodation Requests Language for Public Documents
- Are interpreter(s), open captioning such as CART (Communication Access Real Time), or other accommodations needed? If so, have they been scheduled well in advance? Did you list what will already be provided on the invitation? As a reminder, accommodations including ASL interpretation and CART are required under the ADA and that cost shall not be a factor in determining whether you fulfill the request.
 - To request American Sign Language (ASL) interpreters and/or CART captioning, complete an online request to APD's Oregon Deaf and Hard of Hearing Services as early as possible with a minimum of 48 hours in advance at:
<https://www.oregon.gov/DHS/SENIORS-DISABILITIES/SPPD/Pages/ODHHS.aspx>
 - For questions about current ASL or CART requests email request.odhhs@dhsosha.state.or.us
 - For general questions about accessibility and setting up accommodations email odhhs.info@dhsosha.state.or.us (goes to APD Policy Analysts)
 - Other ADA questions can be sent to the ADA Unit in HR.
 - For spoken language interpreters see pages 3- 5 of *the Language Access Service Guide*: <https://sharedsystems.dhsosha.state.or.us/DHSForms/Served/de0025.pdf>
- Is there a statement on who to contact if participants have technical questions or issues when connecting to the online meeting?
- Are there clear instructions and multiple options to join the meeting?
- Is there a backup plan if your primary meeting software fails?
- Is the meeting still necessary? If you cancel, be sure to give ample notification -- at least 48 hours.

AGENDA

Does the structure and method of meeting encourage inclusive participation?

- Design your agenda in a way that engages participants in multiple ways. You may want to use a combination of thought-provoking questions, virtual whiteboard exercises, mapping, polling, visualization to keep people's interest and attention.
- Have you allowed for the additional time that it might take to interact using multiple methods of communication? Does it allow for various communication needs/modes of your potential participants? (usually no more than 3 agenda items per hour)
- Are the agenda and meeting materials in accessible formats, use at least 14pt font (which is required under policy to ensure accessibility), and reviewed for plain language?

- Does your agenda include clear ground rules, community agreements, or meeting etiquette?
- Is the online meeting kept as short as possible? If it is over an hour are there breaks?
- Are agenda items framed as specific questions? For example: – What should our recommendation to leadership be about eliminating inequities in our program area?
- If you have scheduled CART or ASL interpreters, send the agenda and all meeting documents to the provider ahead of the meeting so they can understand the meeting content and take note of how names are spelled. Be sure spell out any acronyms.

PHYSICAL & VIRTUAL ROOM SET-UP

How accessible and safe are the physical and online “rooms”?

If it is necessary to include a **physical meeting location**, consider the following:

- Can the location safely accommodate the number of participants you will have physically present given the most current guidance from federal, state and local public health officials around COVID-19? How will physical distancing standards and sanitizing procedures be ensured? If the guidelines cannot be met, a physical meeting should not be held.
- Who will be the point person to ensure the smooth operation of the meeting at the physical location?
- Find a room equipped with a Skype smartboard or other remote meeting technology. ABLENet ERG has purchased an accessibility technology called Meeting Owl that can be sent to you. Contact Glen Bason in Facilities at GLEN.E.BASON@dhsosha.state.or.us.
- Fully ADA compliant accessible facilities, including entry and restrooms.
- Meeting rooms with good lighting and acoustics
- Meeting areas large enough to provide space for interpreters, real-time captioning or CART setup, ample room for individuals using mobility aids, such as walkers, wheelchairs, or service animals to maneuver, and enough space for all participants
- Clear signage and maps that are understandable regardless of ability, culture or language
- Limited stimuli environment (consider the “busyness” of carpeting and wall coverings)
- Multiple sets of outlets in the meeting rooms for individuals using laptops or other electronic aids
- Easily accessible for those who use public transportation
- If meeting is held outside of State of Oregon facilities, choose a location that is welcoming of all people and is accessible and non-discriminatory in who it serves, particularly the LGBTQIA+ community.

Virtual Rooms

- The facilitator should familiarize themselves with the features of the online meeting software they will be using. [[Skype for Business Guide](#)]
- All users should login early enough to take care of any technical issues. A knowledgeable contact person should be listed in the meeting invitation to help participants troubleshoot technical issues.
- The meeting organizer should prepare a backup plan, such as a phone conference line, if the primary meeting technology does not operate as expected
- Ensure interpreters, captioning, and other accommodations are working and effective. Check-in with participants throughout the meeting to make sure that the accommodations and technology continue to be functional and effective.
- Find a quiet and safe place to call into the meeting. If you are driving pull over or wait until you get to your destination before joining a conference.
- Strongly encourage participants to enable all audio, video and instant messaging if technically possible. Use the audio-only option as a last option. This allows every participant to choose the manner of participation most effective for them.
- Facilitator should be trained in trauma-informed care, especially around historical and racial trauma in order to create psychological safety.

NOTETAKING OPTIONS

How will you capture the important ideas and decisions from the meeting?

- Record the meeting as a video if the function is available in your software. Participants should be notified in advance if you use this option. Also be sensitive to any concerns regarding confidentiality.
- Ask someone to take written notes
- As a less preferable option, utilize the captioning or CART file to create notes. This can be done by requesting a copy from the CART provider (with request submitted in advance) from the provider. However, the original CART file should never be sent to meeting participants as a substitute or in place of official meeting notes.

BUILDING COMMUNITY AGREEMENTS

What are agreements that explicitly foster belonging in an online forum?

Prior to or during your first meeting, it is imperative to set ground rules, community norms, and standards of online etiquette with your fellow participants. These should be sent out with the materials prior to each meeting and be reviewed at the beginning of each session. Sharing the agreements on screen is also recommended. Here are some examples and suggestions that you can customize for your meeting:

Community Agreements to Build an Inclusive Culture

The following are taken from the Community Agreements developed by District 15's Equity and Inclusion Committee - available from the OEMS intranet site:

- Confidentiality & Permission** - We agree to not share each other's stories or narratives without permission
- Fully Present and Patient** - We agree to listen to each other without distraction and without predatory listening.
- Default to Inquiry over Judgement** - We agree to be curious and ask questions before making judgements.
- Share the Air** - We agree to share our perspective, ideas, and narratives while allowing space for others to share their perspective, ideas, and narratives.
- Believe People's Narratives** - We agree to believe each other's perspective, ideas, and narratives.
- Reflection Intent/ Impact** - We agree to reflect on how our intent and impact may differ or align.
- Repair Work** - When our intent and impact do not align, we agree to acknowledge harm, make a commitment to improve, and ask what is needed to move forward.
- Self-Compassion** - When our intent and impact do not align, we agree to be compassionate with ourselves, understanding we are all lifelong learners.
- Invitation for Laughter** - We agree to laugh and have fun together.

Online Etiquette

- Log-on at least 5 minutes before the start of the meeting to troubleshoot any technical issues.
- All participants should enable and use all video, audio, and chat functions whenever possible. In times of social distancing, video helps participants feel more connected to others. Ensuring that you are also using and monitoring the chat box will help those who may have technical difficulties hearing or for people who may not feel comfortable speaking participate. Audio-only conferencing should be reserved as a last option.
- Announce your arrival (or early exit) to the meeting either verbally or in the text chat.
- Mute yourself if you are not speaking to eliminate echo and background noise.
- State your name whenever you speak.
- Do not interrupt or talk over others. This is especially important for virtual meetings as most software will shift the video display to focus on whomever is speaking.
- Speak slowly and clearly into the microphone.
- Give your full attention to the speaker, avoid distractions like email, web surfing, or texting. Be sure to silence your cell phone.
- For smaller meetings: For each agenda item, every participant will be given a chance to speak or pass before opening the floor up to general discussion. Note that the facilitator may wish to place a time limit on each person. Typically, at least going around the 'table' twice is recommended before moving to decision-making.
- For larger meetings: If you would like to speak instant message the facilitator to be recognized. If you don't have access to IM, wait until the current speaker pauses or finishes to politely ask to be recognized. The facilitator will keep a list of people who wish to speak.
- Stay on topic and follow the agenda and to avoid confusion.
- Don't forget to pause so notetakers, interpreters, and captioning can keep up. It also allows for people the opportunity to ask clarifying questions.
- Use plain language to help people better understand your message, especially when using an interpreter. Be sure to explain any acronyms or jargon that is used.
- Type questions into the group chat to be read by the facilitator.
- Read out loud anything that is shared onscreen, in the text chatroom or when referencing written materials. Remember that not everyone may have access to all modes of communication offered.
- Share or e-mail any documents used or referenced so participants can follow along.

WORKING WITH REMOTE LANGUAGE INTERPRETERS

- Any meeting materials should be translated and given to the individuals needing the interpretation service prior to the meeting.
- If possible, introduce yourself to the interpreter prior to the meeting. Politely ask if they need anything from you. Encourage the interpreter to ask questions and alert you to cultural misunderstandings or conflicts.
- When in the meeting, check-in regularly with the individual(s) who are relying on the remote language interpreter to ensure things are going smoothly for them.
- Acknowledge the interpreters presence in the meeting and ask participants to follow these best practices:
 - Speak directly to the participant, not to or through the interpreter.
 - Speak more slowly rather than more loudly.
 - Speak at an even pace in relatively short segments, remembering to pause so that the interpreter has time to interpret.
 - Assume everything that is said will be interpreted.
 - Use plain language and avoid jargon or acronyms.
 - Specifically ask the participant what they think during the meeting.
 - To check for understanding, ask the participant to repeat back important information.
 - Be patient as language interpretation can take more time.

INCLUSIVE FACILITATION

How will you create a space that ensures all people feel welcomed, listened to, and their ideas taken seriously?

- Greet each meeting participant warmly, by name, so everyone feels welcome.
- Consider opening the meeting with an indigenous land acknowledgement.
- Clearly state the purpose and goals of the meeting
- Review community agreements, ground rules, and/or meeting etiquette at every meeting. This should have been sent prior with the invitation. See the previous section on “BUILDING COMMUNITY AGREEMENTS” for more information.
- Model and invite participants to share their pronouns during introductions. For example: he/him/his; she/her/hers; they/them/theirs.
- Use people first language as the default. For example: use “people with disabilities” rather than “disabled people” or “people of color” instead of “colored people.”

However, respect the wishes of individuals if they want to be referred to by another term.

- Ask for volunteer(s) to be an equity advocate during the meeting to ensure that equity, diversity, inclusion, and accessibility impacts are discussed. Ideally, the volunteer would have a deep background and interest in the subject matter. Do not always assume that the lone person of color, woman, LGBTQ+ person, or person with a disability should play this role. This role is as important a role as a notetaker or timekeeper.
- Review agenda and ask for any changes or edits
- Start with an [icebreaker \[2\]](#) get to know each other better or a short [mindfulness meditation](#) that helps the group center themselves.
- For smaller groups, call on each participant by name and give them an opportunity to speak or pass on each agenda topic before opening the floor to general conversation.
- For each agenda item, encourage participants use the Skype Room Chat box to submit comments or questions if someone else has the floor. Be sure to read them out loud after the person speaking finishes.
- Remind people that there are multiple ways of participating, keep checking in with participants to see how they are feeling or have something to say. Have a co-facilitator help you monitor the group chat.
- Invite people who wish to speak to instant message you, so not to interrupt the speaker.
- Keep the focus on one or two topics. If you must cover more items, then give people time to stretch, take a bathroom break, or replenish their coffee. Keep each segment of the meeting short - no longer than 30 minutes.
- Be vigilant of any stereotypes, [microaggressions](#) or harm in the meeting. Interrupt immediately and facilitate education and repair either during or after the meeting as appropriate. See [District 15 Equity and Inclusion Committee's Repair Tool](#).
- Pause to allow people to process and ask questions. Silence is ok in this forum as it gives folks an opportunity to think and allow folks to turn off their mute button.
- Offer a follow-up one-on-one call(s) with individuals who may need or benefit from it.
- Politely remind people of the community agreements when they interrupt others. Keep in mind research shows that women, people of color, and others are much more likely to be interrupted or not listened to. ([find out more](#))
- Repeat back or paraphrase what participants say. Listen and check for accuracy.
- Notice who has spoken and who has not. Invite them to share their thoughts. If the conversation seems one-sided the facilitator may want to ask: "What counterarguments might others have against this idea? Have we considered all angles to this?" This will leverage the diversity in the room to get you higher-quality decisions.

DECISION-MAKING

How do we consider equity issues and create buy-in for the team's decisions?

- Before making a decision, make sure everyone has had an opportunity to speak or pass.
- To avoid groupthink, ask if the group can give counter-arguments for the other side.
- Do you have a strategy for addressing intercultural conflict? What if there is strong disagreement on a decision?
- From the beginning, be clear and transparent about the process for decision-making. Is it by majority vote? Consensus? Something else?
- Did the group P.A.U.S.E. and ask questions about how their decisions impact disparities, disproportionalities, and accessibility for various populations? (see other equity lenses used by local governments)
 - **PARTICIPATION:** Do participants reflect the diversity of the people we serve and do they feel fully included?
 - **ADVOCATE:** How can we be in ally-ship to support internal, interpersonal, institutional, and societal change for equity and justice?
 - **UNDERSTAND:** How does implicit bias, power, place, & historical trauma impact this situation? What are the unintended consequences? What does the data and community narratives say? Who benefits and who is disadvantaged by our decisions?
 - **STRENGTH-BASED:** How do our proposed solutions build on individual, cultural, family, and community strengths that empower people?
 - **ENGAGE:** How do people, families and communities prefer to be engaged at every step of the process?
- It can be difficult for people with intellectual or developmental disabilities or those who are experiencing trauma to make quick decisions. Be patient and allow the person to take their time.
- After every decision, ask individuals who did not vote for the majority-backed decision whether or not it is something they can live with and actively support. If they cannot, you may need to discuss and revisit the decision, postpone, or have a private meeting at a later time depending on the situation.

CLOSING & EVALUATION

How do we continuously improve and ensure we are on the same page?

- Review and confirm with the group all decisions made including timelines, parties responsible and any next steps.

- Ask some evaluation questions such as:
 - In one word, how are you feeling right now?
 - What went well in the meeting for you?
 - What can we improve next time?
 - What technology or human need can we assist with or support? What do you need to feel fully involved and engaged?
- Thank everyone for their time and flexibility. Recognize that everyone is doing their best given the extraordinary circumstances.

FOLLOWING UP AFTER THE MEETING

- Send out a thank you e-mail to participants and include notes, recording, or transcripts. Ask for any corrections to the record.
- Invite additional feedback or thoughts
- Remind participants the dates of any future meetings and next steps

ADDITIONAL RESOURCES

- Kathryn Heath and Brenda F. Wensil “To Build an Inclusive Culture, Start with Inclusive Meetings” *Harvard Business Review*. September 6, 2019. <https://hbr.org/2019/09/to-build-an-inclusive-culture-start-with-inclusive-meetings>
- Inclusive Meetings Presentations and Materials - <http://www.nevadaddcouncil.org/wp-content/uploads/2013/10/Accessible-Meetings-Presentations-and-Materials1.pdf>
- “Driving Toward Equity – Using Racial Equity Tools”, USDN: Urban Sustainability Directors Network (2015) <https://www.youtube.com/watch?v=P4yOV8apmlw>
- Leigh Thompson. “How to neutralize a meeting tyrant” *Fortune* (2013) <https://fortune.com/2013/02/11/how-to-neutralize-a-meeting-tyrant/>
- Running an Effective Teleconference or Virtual Meeting <https://www.cio.com/article/2437139/running-an-effective-teleconference-or-virtual-meeting.html>
- [OEMS Service Guide to Language Access](#)
- District 15 Equity and Inclusion Committee’s Community Agreements <https://dhsaha.sharepoint.com/teams/Hub-DHS-OEMS/Shared%20Documents/Workforce/Articles/D15%20Community%20Agreements.pdf>
- District 15 Equity and Inclusion Committee’s Repair Tool <https://dhsaha.sharepoint.com/:w:/r/teams/Hub-DHS->

[OEMS/ layouts/15/Doc.aspx?sourcedoc=%7B6AA0B1EC-9FBE-4DFE-ABF5-D715177D50AD%7D&file=D15%20EIC%20Repair%20Tool%20\(Final%20Version\).docx&action=default&mobileredirect=true](https://oems.com/ layouts/15/Doc.aspx?sourcedoc=%7B6AA0B1EC-9FBE-4DFE-ABF5-D715177D50AD%7D&file=D15%20EIC%20Repair%20Tool%20(Final%20Version).docx&action=default&mobileredirect=true)

- Best Practices for Communicating Through an Interpreter
<https://refugeehealthta.org/access-to-care/language-access/best-practices-communicating-through-an-interpreter/>

Safety First – Consider the possibility that it may not be safe for someone to talk to you. Be mindful of how the child or caregiver responds to your questions. If responses seem out of character, strained or emotional; you should consider contacting the Oregon Child Abuse Hotline (ORCAH). Please be prepared to describe how the dynamics of the call concerned you or seemed inconsistent with the answers that were given.

Questions for Parents/Caregivers

1. Is now a good time to talk? If not, is there a better time for me to call?

Potential follow-up questions

- Is everyone okay? Is there someone I should call for you?
- Are you safe? Do you need help right now?

2. Is everyone able to get what they need to get by? (Food, clothing, housing, medical care)

Have there been any problems?

Potential follow-up questions

- Are you able to access what you need to care for your family? What would help?
- Who can help you? Do you have supportive family, friends, or neighbors to help you and your children?

3. How is everyone getting along with each other? Is anyone having a hard time?

Potential follow-up questions

- How is everyone passing the time? Do you have activities you do together? Do you need ideas?
- Are you worried about anyone? Why?

4. What's it like parenting right now? How is it different? What's going well? What are some of the challenges?

Potential follow-up questions

- Have you noticed changes in your child's behavior? Are you concerned?
- Who were your children connected to outside the home? How are they staying in touch to their friends?

5. How are you holding up?

Potential follow-up questions

- How is everyone coping with stress? Are you finding it difficult to bounce back or manage?
- Is anyone having a hard time? What seems to be bothering the most? What makes it better/worse?

Questions for Children

1. Tell me about how things are going at home. How are things going for you?

Potential follow-up questions

- Are you feeling okay?
- Are you worried about anything?

2. Who is taking care of you? What are they doing?

Potential follow-up questions

- Who makes sure you have everything you need? What do they do?
- Where do you sleep at night? Does anyone else sleep with you? Do you sleep well?
- Who wakes you up in the morning?
- Who takes care of you when you get hurt? What do they do?
- Who goes out and gets food for you? What do you like to eat? Who makes your meals? Who do you eat with?

3. How is everyone getting along with each other? Is anyone having a hard time?

Potential follow-up questions

- Who lives or stays in your home (including pets)? Who visits?
- Are you worried about anyone? Why?
- How can you tell when someone in your home is having a hard time? What do they do? What makes them feel better?

4. Tell me about what you do all day.

Potential follow-up questions

- What things do you like to do at home? What don't you like to do?
- Do you have responsibilities at home? What are they?
- What is everyone doing all day? Do you have activities you do together?

5. What do you like most about staying at home? What do you like least? Why?

Potential follow-up questions

- What are the rules in your house? What happens when someone breaks a rule? (Sibling, pet, mom, dad?)
- What are some of the best things about being at home?
- What are you doing for fun?
- What do you miss the most about school? Why?