



**Policy: Visitation - Development/Implementation Plan for all
Children under ChildNet Supervision**

ChildNet Number: 003.068

Original Approved Date: June 30, 2003

Policy Revised Date(s): June 24, 2010; September 16, 2010; July 9, 2014

Policy Sunset Date:

COA Standard(s): FKC 7.01, 7.02, 7.03, 7.05, 7.06, 12.01, 12.03, ASE 6.04

Statement of Policy:

It is the policy of ChildNet to facilitate visitations as required by court order, court accepted case plan and the administrative code in order to promote, maintain and strengthen familial connections.

Board Chair's Signature:

Date:

07-29-14



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ChildNet Number: 003.068

Original Approved Date: June 30, 2003

Procedure Revised Date(s): June 24, 2010; September 16, 2010; November 17, 2010; October 11, 2012; July 9, 2014, March 8, 2017, April 25, 2018

Procedure Sunset Date:

COA Standard(s): FKC 7.01, 7.02, 7.03, 7.05, 7.06, 12.01, 12.03, ASE 6.04

Related policies: CN 007-024 Staffing & Case Reviews
CN 007-022 Reunification and Use of Home Study Checklist
CN 004-018 Freedom to express and Practice Religious Beliefs
CN 004-023 Normalcy for Children
CN 003-035 Independency Living Services

Definitions (If any):

Statement of Procedure:

A. Developing the Individual Visitation Plan

Regular visits and ongoing contact is to occur between the child, parents, and siblings in support to help the child maintain positive relationships with extended family, individuals with who the child had a prior relationship, and members of the child's faith community or tribe. Contact with the child may be contraindicated due to legal requirements or court findings, safety reasons, or when parental rights have been terminated. An individualized visitation plan is developed and updated in collaboration with parents, caregivers, and the child and is appropriate to the child's age and development stage; the parent's strengths and needs; the schedules of caregivers and parents; the social and cultural context of the family; and the status of the case and the permanency goal.

1. Prior to developing the plan, ChildNet or subcontracted agency staff will:
 - a. Review all court orders to determine court order visitation, specified frequency and duration of visitation, which individuals are to have contact and which are prohibited, and if there are any additional provisions in regarding to visitation.
 - b. Contact the caregivers, agency contract providers, and Guardian-Ad-Litem (GAL) (if appointed), who are involved with the case and family, in order to establish their willingness to participate in the visitation plan. (Example: a



provider may be willing to supervise visitation at a local park and the foster parent may be willing and able to provide transportation of children).

- c. Obtain commitment from caregivers when siblings are placed separately, to allow written/letter or phone contact, and to initiate their own visits between siblings.
- d. Visitation location/Family time may include attending any type of school, sporting or extracurricular activity in accordance with the Court Order. Attend (in person or by phone) a doctor's appointment, medication management, therapy session or special needs training.
- e. Upon confirmation that the case involves an American Indian child(ren), the tribe will facilitate the child's connection to his/her extended family and the tribal community to support the child's cultural identity and improve sense of belonging. Please refer to CN 004.022 Indian Children.
- f. Provisions for special requests by parents are to be taken into consideration in developing the visitation plan. Cultural and religious sensitivity must be maintained to allow visits for religious events and holidays.
 - 1) Once the above information is determined, the state approved visitation plan in the Comprehensive Child Welfare Information System (CCWIS).
 2. shall be completed, reviewed and signed by all individuals involved in the visitation plan. As restrictions and/or expansions occur, the visitation plan must be updated and signatures obtained to validate all parties' understanding of visitation stipulations.
 3. The individualized visitation plan will be provided to the Attorney General's Office / Children's Legal Services to file with the Court.

B. Preparation:

As appropriate to the status of the case and purpose of visitation, the Child Advocate/Dependency Case Manager, or designee provides the child, siblings, foster parents/caregivers, and parents with guidance before visits to help prepare for the visit, and after visits to help families learn from issues that arise during visits; assesses relationships and parenting skills during visitation; and documents events that occur.

Although visitation is the right of both the parent and the child, it should be recognized that visits may be traumatic and disruptive for the child. In some cases, it is necessary for the Child Advocate/Dependency Case Manager to set parameters for the parents to ensure the safety and well-being of the child, as well as, carefully structure and supervise the visits. In the event a visitation involves a perpetrator of domestic



violence, physical abuse, or sexual abuse, additional steps are taken to ensure all interactions between the perpetrator and the victim are monitored and managed to ensure psychological and physical safety. These factors may include the skill set of the person supervising the contact to warrant a licensed clinician, the location and setting of the contact, and direct supervision with additional staff available if needed.

C. Setting Parameters for Visitations

Visitation plans that have clearly stated rules for all parties will provide for the most successful outcomes. Therefore, all parties should have input as follows:

1. Time, location and duration of visit:

Unless otherwise indicated, visitation between a child and their parents, siblings or other family members are to occur in a relaxed, natural setting such as community visitation centers, parks, playgrounds; or with the caregiver's consent, at the their residence. However, if there is concern for the safety of the child, community visitation centers are unavailable or a need exists to control or structure the parent/child interaction a more restrictive setting will be utilized.

The Child Advocate/Dependency Case Manager should note that parents may be employed and scheduling should be flexible - e.g. visits to occur every other Thursday evening at 6:30 p.m. after parents finish working. The Visitation plan is to clearly state the frequency, time, location and duration of the visit.

2. Transportation Details

Visitation Plans are to clearly state who shall provide transportation for the children and parents, to and from the visitation location.

3. Who will Participate in the Visits

The visitation plan is to clearly state which individuals are to participate in the visit. Though it is important for familial to be maintained, if too many individuals participate in every visit, the main focus of the visits (i.e. the parent-child relationship) may be lost. Early visits should stress maintaining ties between the child and parent and then later can include extended family.

D. Sibling Visitation

When siblings are placed separately the Child Advocate/Dependency Case Manager must ensure that weekly visitations occur. If visitation is deemed not feasible, and/or will compromise the safety and well-being of either child, the court must be made aware of the situation. Specifically, reasons for such recommendation, and/or clinical documentation must be provided for the court's review. Visits with siblings should receive the same priority regardless of whether or not the biological family is involved and parents have had their parental rights terminated or are prohibited from having contact by the court.



In addition to regularly scheduled face-to-face sibling visitation, foster parents/caregivers should be encouraged to have the children maintain contact by phone and/or correspondence when appropriate.

E. Provisions to Cancel or Reschedule Visits

1. Scheduled family visitations should not be cancelled due to a Child Advocate's/Dependency Case Manager's scheduling conflicts or other seen or unforeseen circumstances (e.g. illness, vacation, staff vacancies). If and when the Child Advocate/Dependency Case Manager is unavailable to carry out a scheduled visit, he/she and/or the unit supervisor are to make appropriate arrangements, enlisting the assistance of other staff if necessary, in order for the visit to take place as planned and scheduled.
2. Scheduled visitations should not be withheld contingent upon the child's behavior or the parent's non-compliance with the tasks of the Case Plan. Such actions are punitive and are not consistent with sound casework practice or the legal rights of the child and the parent. Visitation should only be withheld if it is contrary to the best interest of the child. Such a recommendation can only be made to the court after the Child Advocate/Dependency Case Manager has reviewed this information with their supervisor and the assigned attorney from the Attorney General's Office.
3. All parties to the case plan should be provided with accurate phone contacts and an advanced notice clause that specifies the parties that need to be advised in the event a visit must be canceled or to reschedule a visit and the deadlines for doing so.

F. Documentation.

All visits, including those cancelled, must be documented in CCWIS within 48 hours of the event. (Refer to policy CN 003.005 Case Chronological Documentation for Client Services). If the Child Advocate/Dependency Case Manager or designee is present, their impressions regarding the interaction between the child, his/her parents and/or siblings are to be noted. If the visit was supervised by a community contract provider the Child Advocate/Dependency Case Manager is to request a written report of their observation of the visitation. Foster parents/caregivers should be contacted and asked about their impressions of the visit, unless they have submitted a written report.

It is of the utmost importance to clearly document all visits, all cancellations or schedule changes, reasons for cancellations and efforts by the department to facilitate visitation. This information must be reviewed and clearly stated in the Judicial Review and Social Study Report (JRSSR) to the court as well as the Family Functioning Assessment (FFA) progress update.



G. Terminated Visitation.

When it has been determined that continued visitation is truly contraindicated to the best interest of the child, the Child Advocate can suspend the visit. However, the Child Advocate/Dependency Case Manager must request a hearing to address this issue, within 72 hours following the incident or concern. The concern must be discussed immediately with the Unit Supervisor who will ensure that a status report and request for legal assistance is completed. Notice will be given to all parties on the case forthwith.

H. Contacts Between the Child Advocate/Dependency Case Manager, parents, caregivers, and the child.

The assigned Child Advocate/Dependency Case Manager or designee is to conduct a minimum of two contacts per week for the first 30 days of a child entering out-of-home care on shelter status. Face to face contacts with the child and caregiver are to occur weekly as long as the child remains in shelter status, and weekly during the first thirty days after removal for those children placed in relative/non-relative care. After the first 30 days the frequency of contacts will be conducted in compliance with court order, court accepted plan and in accordance with administrative code. The assigned Child Advocate/Dependency Case Manager will take into account the children's age and developmental needs, and the case plan permanency goal children's and parents' schedules and distance upon making a recommendation to the court.

1. May be modified to no less frequently than every 30 days.
2. The Child Advocate/Dependency Case Manager will maintain face-to-face contacts with each child, parent and caregiver a minimum of once every 30 days at the child's current place of residence. The Child Advocate/Dependency Case Manager meets separately with each to assess safety and well-being, monitor service delivery, and support the achievement of permanency and other service plan goals. At least once every three months the Child Advocate/Dependency Case Manager will make an unannounced visit to the child's current place of residence. The Child Advocate/Dependency Case Manager may conduct a face to face visit with the child in a location outside the place of residence, but significant to the child, no more than once per quarter.
3. The Child Advocate/Dependency Case Manager must document opportunities provided to parents in support of reunification, including involvement in service planning and access to needed services, constructive visitation and ongoing contact with the child, reduction of barriers to contact, visitation, and involvement in the child's care and use of formal and informal resources to prepare the family for reunification.
4. The Child Advocate/Dependency Case Manager will regularly communicate with the parents and visit the home at least once a month to share all relevant and



legally permissible information concerning the child, evaluate safety, needs and well-being and monitor service delivery and achievement of service and permanency plan goals.

5. In cases where the Child Advocate/Dependency Case Manager (or designee) is unable to communicate with the child due to the child's age or other barriers, the contact will be made directly with the parent, caregiver or provider. The Child Visit form will be completed to for each child after every visit within 48 hours of the visit to address safety, permanency and well-being.
6. During contacts, the Child Advocate/Dependency Case Manager (or designee) must observe and monitor the condition of the foster/shelter home or facility, the number of children currently placed there (so its licensed capacity is not exceeded), the treatment that the children receive from the foster parent or provider, and any other factors which can affect the child. All concerns noted must be relayed to the foster parent and/or provider who is responsible for the supervision of the foster home or facility, as well as to their immediate unit supervisor. Youth are helped to develop social support networks and build healthy, meaningful relationships with caring individuals.

President's Signature: _____

Date: _____

05-04-18