

Visitation

Rhode Island Department of Children, Youth and Families

Policy: 700.0040

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The Department of Children, Youth, and Families is mandated by Federal Law 96-272 and by State Law to maintain the family unit, to prevent and eliminate the need for removal of a child from his/her home, when possible, and to make reasonable efforts, if the child is removed to return the child to his/her home. Once a child is removed from his/her home, regular, frequent, and progressive visitation is an integral part of the reunification process and serves to maintain, strengthen, and/or redefine the parent/child relationship. Any unnecessary delay in initiating and maintaining a regular visitation schedule could adversely affect and delay the reunification process. Therefore, it is the policy of the Department to begin visitation as soon as possible after removal and to maintain a regular and progressive visitation schedule.

As part of the Case Plan/Agreement (DCYF #032), developed within thirty (30) days of the child being placed in DCYF foster/relative/institutional care, a parent/child visitation schedule must be arranged which is focused on the individual needs, limitations, strengths, and weaknesses of the family members and which allows for the maximum of parent/child contact with the minimum of risk of physical and/or emotional harm to the child. The Department defines regular, ongoing visitation as primary (face to face) contact between parent and child a minimum of once every two weeks starting after the formulation of the Case Plan/Agreement. Exceptions to this every two-week standard include situations where the child's physical and/or emotional well being is endangered or situations where the worker and/or supervisor determines that the nature of the family's problems (reason the child came into and/or continues to reside in foster care) makes an initial standard of every two-week visitation inappropriate. However, all reasonable efforts must be made to institute and maintain every two-week visitation and to progress towards a more frequent standard in the shortest possible time frame. Any deviation from the minimum every two-week visitation standard must be explained fully in the Case Plan/Agreement and must have supervisory approval.

Contact and visitation is both a right and a responsibility of the parent. The parent bears the primary responsibility to maintain the formulated visitation schedule including transportation for himself/herself. At the time of the formulation of the visitation plan, the worker must make it clear to the parent(s) that failure to maintain contact/visitation could constitute grounds for termination of parental rights. The Department has the responsibility to establish with the family a reasonable visitation plan suited to the needs and limitations of the child, the family, and the Department. The Department also has the responsibility to adhere to the agreed upon plan.

Each child in placement shall have a written visitation plan, included in the Case Plan/Agreement, which is consistent with the specified permanent planning goal. This visitation plan shall specify the duration, frequency, location, and limitations of the parent/child visitation schedule. In formulating the visitation plan the worker must not

only be cognizant of the social issues necessitating placement but must also pay special attention to the child's school schedule, the parent's work schedule, holidays, birthdays, and other special events significant in the child's/family's life and special visiting situations.

This policy may not be applicable to those placement sites where a special visitation plan is a regulation of the facility/agency and an important element in the Particular Case Plan (ex. Eckerd, ACE).

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Visitation Plan

Procedure From Policy 700.0040: Visitation

1. An ongoing visitation plan developed as part of the Case Plan/Agreement (DCYF #032) must be formulated within thirty (30) days of the child being placed in DCYF foster/relative/ institutional care:
 1. This plan is preceded by the Initial Visitation Plan/Agreement (DCYF #032A) which is formulated within five (5) working days (excluding weekends and holidays) after the child is placed;
 2. This Plan specifies the frequency, duration, location, and limitations of the Parent/child visitation including transportation arrangements for parent and child and issues of supervision:
 - a. Foster parents may voluntarily provide transportation for the child to and from visits with natural parent(s). The foster parent shall receive payment at the prevailing mileage rate for state employees. Foster parents may also receive an hourly wage;
 - b. Parents may be eligible to receive RIPTIKS (bus tokens) to be used for visitation purposes; and
 - c. If the parent(s) requires visitation location that is handicapped accessible, the worker must accommodate this need.
 3. The parent(s), primary service worker, and child (if of appropriate age and intellectual capacity) each have input into this plan. If the foster parents, relative caretakers, or other child care providers are to be directly involved in the visitation, they must be included in the planning.
- B. In formulating a reasonable visitation plan, special attention is paid to the following:
 1. The worker must be cognizant of the social issues necessitating placement including any element of physical and/or emotional risk to the child;
 2. Visitation should not disrupt the child's education process. When possible, visits should be scheduled during non-school hours;
 3. In keeping with the goal of reunification and to ensure stability of the family, visitation cannot jeopardize the employment of the parent(s);
 4. Additional child/family visitation may be necessary around holiday times, birthdays, and other special events significant in the child's/family's life to maintain and strengthen bonding and to strengthen the prospect of reunification:
 - a. These visits should be reflected in the Case Plan/Agreement and must be consistent with the goals and objectives; and
 - b. These visits should be scheduled to be the least disruptive to all parties involved.
 5. In certain instances visitation is affected, limited, or determined by the special circumstances of the parent or child. Such situations include but are not limited to:

- a. Visitation between a child and a parent in a correctional institution must be viewed in relation to the goal and objectives of the Case Plan/ Agreement:
 - (1) Consideration must be given to the nature of the offense(s) which caused the incarceration as it affects the frequency and duration of the parent/child visits;
 - (2) If the plan is reunification following the release of the parent(s) from a correctional institution, frequency and duration of visits must reflect the time span anticipated for reunification. As reunification approaches, visitation should be increased;
 - (3) Consideration must be given to the physical setting for the visits within the correctional facility. Whenever possible, a setting should be chosen which provides the most opportunity for quality interaction and a minimum degree of risk to the child;
 - (4) The visitation plan must be discussed with and approved by the appropriate prison Social Service/ Administrative staff; and
 - (5) All visits in a correctional institution must be supervised by Departmental staff to ensure the safety of the child.
- C. Visitation between a child and parent who is hospitalized for medical or psychiatric reasons is contingent upon the regulations of the hospital, the goal and objectives of the Case Plan, condition of the parent, degree of risk to the child, and the ability of the child to understand the nature and/or seriousness of the parent's illness. With increased physical or emotional risk to the child, visitation must be limited even more.
- D. For parents who live out of state, the extent of visitation is contingent upon the feasibility of reunification and the reasons why the parent is residing out of state. No child may visit out of state unless the out of state parental home has been assessed and approved through the Interstate Compact on the Placement of Children.
- E. For children in out-of-state placements, visitation is contingent upon the goal and objectives of the Case Plan/Agreement and the regulations/visiting plan of that particular agency or facility.
- F. For a putative father who may wish to visit his child in placement, a visitation plan cannot be developed until paternity has been adequately verified by the courts. The primary service worker shall assure that the putative father is made aware of the need for this verification. Any visitation plan would then be made in conjunction with a viable Case Plan/Agreement. Fathers should be allowed visits after paternity has been established.
- G. Siblings who are placed in foster care should maintain contact with each other to have continuity in their relationships:
 - 1. Sibling visits should be seen as part of the overall Case Plan;
 - 2. Sibling visits are an integral part of the assessment of family relationships and the determination of the feasibility of established goals; and

3. The determination of the appropriateness of continued sibling visitation is independent of the proceeding for termination of parental rights.
- H. For relatives or significant others who request visitation or for the child who requests visitation with these relatives or significant others, the parent(s) if available must be informed. An assessment must be made as to the quality and degree of the relationship of the child and the proposed visitor prior to the placement, the current motivation for the proposed visit(s), and the impact such visiting will have on the child:
1. Once a preliminary decision has been made to possibly allow the visit(s), the worker must make an evaluative home visit and request a Division of Criminal Identification check on the relative/significant other to assess any possible risk to the child;
 2. The proposed visitation must not conflict with the goal and objectives of the Case Plan/Agreement; and
 3. If a parent poses an objection to visitation between a child and a child's relative or significant others the Department does have the authority to allow such visitation over the objections of the parent(s) when the child is committed to our custody. However, the allowance of visitation in the face of objection from the parents should occur only after careful consideration would deem the visitation in the best interest of the child and not counter productive to the goals and objectives set forth in the Case Plan Agreement.
- I. Changes may be made in the visitation plan/agreement either increasing or restricting contact:
1. Such changes can be requested by the worker, parent, or child (if of appropriate age) and are approved by the supervisor. If foster parents, relative caretakers, or other child care providers have concerns regarding visitation, they should bring them to the attention of the assigned worker;
 2. Any change made in the visitation plan must be reflected in the Case Plan/Agreement and must include reasons for the change. Once a Case Plan has been incorporated into a court order, any changes in the provision thereof must occur pursuant to a subsequent court order. If all parties are in agreement with the change, it will generally be necessary only to present an order reflecting the change to the court. Such requests for change are properly put before the Court in the form of a motion filed in advance of the court date and with notice provided to other involved parties. Requests shall be brought to the attention of DCYF legal staff prior to the court date so that the proper documents can be filed;
 3. Increasing visitation aids in strengthening parent/child bonding, especially as reunification approaches, and includes but is not limited to overnight visits, visits during school vacations, increasing duration, and/or decreasing or eliminating supervision;
 4. Restricting contact is used only to prevent physical and/or emotional harm to either party:
 - a. Contact is limited or restricted when parental behavior is inappropriate, irresponsible, and/or threatening to the child or

when the child has serious problems adjusting to the visits (other than normal anxiety). When a child demonstrates a sudden change of behavior immediately preceding or subsequent to a parent visit, this should serve as a warning signal to the worker to consider a referral to a qualified mental health professional for assessment of emotional harm from parent visits. Behavior signs include: hyperactivity, temper tantrums, aggressions, crying immobility, self-destructive acts, disturbances in sleep, speech or appetite disorders. It is difficult to prove that any of the preceding indicators are directly related to parent visits. Therefore, this clinical judgment is best made by a qualified mental health professional. A child's expressed refusal to participate in the visitation process may also be the basis for possible emotional harm. This situation should also be referred to a mental health professional if the child continues to refuse to follow the visitation plan;

- b. Limitations or restrictions can include increased supervision, decreased frequency or duration, and/or a more structured location for the visits;
- c. If the parent is not in agreement with the added restrictions, i.e. refuses to sign an addendum to the Case Plan/Agreement, the worker must consider obtaining a Court order:
 - (1) For Court-ordered visitation under specific guidelines, a motion to change the visitation must be filed and approved before most restrictions can be applied; and
 - (2) If conditions warranting additional restrictions pose an immediate physical or emotional risk to the child, the worker in conjunction with his/her supervisor will immediately make whatever changes are necessary to protect the child regardless of existing orders or agreements. However, a motion to the Court must be filed immediately. Reasons for immediate restrictions must be documented.
- d. If visits are disruptive enough to initiate serious restrictions, all parties must reassess the goal and objectives of the Case Plan, particularly whether or not reunification is a realistic goal;
- e. If the goal is reunification, visits cannot be terminated altogether by the Department:
 - (1) A decision to terminate visitation but retain a goal of reunification is inconsistent;
 - (2) Parents by law have the right to visit until their parental rights have been terminated. However, once a termination petition has been filed, serious consideration must be made to restrict visitation for the good of the child;

- (3) Limiting different aspects of the visitation plan must be tried before consideration is given to terminating visitation. Efforts must be documented in the case record; and
- (4) Before terminating visitation the worker must petition for a Court order regardless of whether or not the parents agree to this plan. Documentation detailing reasons for termination of visits must accompany this petition.

- J. When the parent does not maintain visitation as agreed, the worker will make reasonable efforts to:
1. Ascertain the reason, if any, for the lack of visitation follow-through;
 2. Make reasonable adjustments in the visitation plan if appropriate:
 - a. These efforts must be documented in the Case Plan/Agreement; and
 - b. It must be documented that the parent(s) is aware of these changes.
 3. Encourage the parent(s) to maintain the visitation schedule;
 4. Document in the case record the steps taken to promote the visitation plan; and
 5. Have the supervisor notify the parent(s) in writing that the goal of reunification is in jeopardy if, after reasonable agency efforts have been made, the parent(s) continues to violate the terms of the visitation plan:
 - a. This shall be done before the end of the fifth (5th) month of the Case Plan/Agreement, but not prior to the end of the first (1st) month of the schedule; and
 - b. The parent shall be informed that failure to maintain contact/visitation may constitute grounds for termination of parental rights.

Frequency of Visits

Procedure From Policy 700.0040: Visitation

- A. Visits between the child and family are scheduled at a minimum of once every two weeks, once the Case Plan/Agreement is formulated. Exceptions to this policy are as follows:
 - 1. When the child's physical and/or emotional health is endangered;
 - 2. When the primary service worker determines that the nature of the family's problems (reason the child came into and/or continues to reside in foster care) makes every two-week visitation inappropriate; and
 - 3. When the child is placed in a setting where a special visitation plan is a regulation of the facility/agency and an important element in the particular Case Plan.
- B. Any deviation from the minimum every two-week visitation standard must be fully explained in the Case Plan/Agreement (DCYF #032):
 - 1. All other viable means of limiting risks for the child, such as but not limited to duration, location, and/or supervision of the visits, must be explored before limiting the frequency of the parent/child visitation;
 - 2. All changes in the frequency of visitation must be approved by the supervisor; and
 - 3. A schedule of less than every two-week visitation is reviewed by the worker and supervisor every three months.
- C. As progress is made towards reunification, a progressive increase in the frequency of visits is initiated by the worker:
 - 1. Increasing contact furnishes opportunities for the parent(s) to learn and demonstrate parenting skills and to secure the parent/child relationship; and
 - 2. A progressive visitation schedule allows for the gradual preparation and mutual adjustment towards reintegration of the child into the home.

Duration

Procedure From Policy 700.0040: Visitation

- A. In considering the length of visits and the restriction thereof, the worker must assess the Physical and/or emotional risk to the child. Factors to consider are:
 - 1. The severity of the reasons for the removal of the child from his/her home and whether or not the conditions warranting removal still exist;
 - 2. Whether or not the behavior, attitude, and/or emotional stability of the parent(s) poses a threat to the child;
 - 3. Whether or not the child is having difficulty adjusting to the visits:
 - a. The worker must determine if these difficulties are attributable to other than normal visitation anxiety; and
 - b. If necessary, the worker shall consult with a medical, psychiatric, or other appropriate professionals.
 - 4. Whether or not the family is progressing towards the goal and objectives of the Case Plan.
- B. If the child is determined to be at risk, parent/child contact must be limited or restricted for the safety of the child:
 - 1. Decreased duration of the visits can limit the degree of anxiety for parent and child;
 - 2. Decreased duration of the visits can serve to restrict the possibility of negative behaviors or reactions; and
 - 3. While family or child-centered problems may necessitate a temporary reduction in the duration of the visits, the worker must strive to overcome the child's anxieties, aid the family in the resolution of conditions warranting this reduction, and work towards reunification.
- C. Length of visits depends upon the individual needs, problems, and strengths of each family member and cannot be uniformly prescribed. Factors to consider are:
 - 1. Visits should be long enough to allow families to sufficiently interact and feel comfortable together. Consideration must be given to such issues as travel time and costs incurred;
 - 2. Visits should be long enough to maintain and strengthen the parent/child bond;
 - 3. The Case plan goal and objectives affect the length of the visit. Visitation should be realistic, goal oriented, and progressive;
 - 4. The worker must assess the parent/child interaction:
 - a. The visit should be long enough to be a positive experience for the parent and child; and
 - b. The visit should be of sufficient length to continue or improve the parent/child relationship.
 - 5. The age of the child is a factor in determining length of visit. Younger children usually need longer visits to allow for the establishment and/or maintenance of the parent/child bond.

- D. As progress is made towards reunification, a progressive increase in the length of visits is initiated by the worker:
1. Increasing contact furnishes opportunities for the parent(s) to learn and demonstrate parenting skills and to secure the Parent/child relationship; and
 2. A progressive visitation schedule allows for the gradual preparation and mutual adjustment towards reintegration of the child into the home.

Location

Procedure From Policy 700.0040: Visitation

- A. The location of the visits can have a great effect on the tenor of the parent/child interaction. To allow for the most beneficial parent/child interaction, the visits should occur in the least restrictive setting which still ensures the safety of the child:
1. The DCYF office offers the most restrictive setting for parent/child interaction but most effectively guarantees the safety of the child:
 - a. This setting is used if there is clear evidence that the child's physical and/or emotional health would otherwise be endangered; and
 - b. This setting may be preferred initially if there is suspected risk to the child and a more thorough assessment of the parent/child interaction is indicated.
 2. Supervised visits in the parent's home are less restrictive than at the DCYF office yet still ensure the safety of the child:
 - a. Visits in the natural home are beneficial because the parent and child are in familiar surroundings; and
 - b. Visits in the natural home most closely resemble normal family functioning and aid in the reunification process.
 3. Other locations may include neutral settings (relative home, park, community agency, shopping mall, etc.), the foster home/institution or unsupervised visits in the parent's home. Each setting offers varying degrees of restriction and varying degrees of insured safety to the child:
 - a. A neutral setting may serve to defuse anxiety, especially if the precipitating placement event was significantly traumatic to the child;
 - b. A neutral setting may encourage otherwise difficult communication between parent and child, especially in the case of the older child;
 - c. By using such controlled settings as community mental health agencies, the interaction between parent and child can be therapeutically monitored;
 - d. Visits in the foster home provide a more natural home setting. Such visits may only take place in the foster home with the permission of the foster parents;
 - e. The foster parent's home is not to be used when there is a threat to the safety of the foster parent; and
 - f. Unsupervised visits in the parent's home are least restrictive and provide the least protection for the child. This setting is used only once it is determined that there is minimal or no risk to the child.

Supervision

Procedure From Policy 700.0040: Visitation

- A. The initial visit after placement must be supervised by the assigned worker or his/her designee in order to:
 - 1. Assess the parent/child interaction;
 - 2. Assess any possible risk to the child; and
 - 3. Aid the parent(s), child and foster parent(s), (when applicable) in determining the focus of the visitation.
- B. Subsequent visits are supervised under certain circumstances:
 - 1. The physical and/or emotional safety of the child is the major factor in determining the need for ongoing supervision. The focus of supervision is to maintain an atmosphere which will assure the physical and/or emotional well-being of the child and limit negative parent/child interaction;
 - 2. Supervision is a tool used by the agency to evaluate the quality of the parent/child relationship;
 - 3. Through supervision the parent(s) and child can be aided in such areas as anger, fear, separation issues, and parent/child interaction;
 - 4. Through supervision the parent(s) can be offered role modeling;
 - 5. There is an existing Court order.
- C. Visits can be supervised by a variety of people depending upon the reason for supervision and the task(s) to be achieved:
 - 1. The primary service worker will directly supervise the following:
 - a. The initial visit after placement; and
 - b. Visits where the unique skills of the worker are needed to assess, evaluate, or assist the parent(s), child, and/or foster parent(s), (when applicable) with issues which might affect the goal or direction of the case.
 - 2. Case aides or designated Junior Resource Specialists will supervise visits where:
 - a. There is a clear understanding of the focus of the visits;
 - b. There is identified risk to the child and the parent/child interaction has to be observed or monitored but not evaluated; and
 - c. Decisions regarding the goal or direction of the case will not be required.
 - 3. In some situations auxiliary support staff, such as mental health counselors and select support personnel, may supervise visits when:
 - a. The attitude, behavior, or emotional state of the parent(s) or child requires a structured, therapeutic environment for visits;
 - b. Problems exist where a clinical evaluation of the parent/child interaction is needed; and
 - c. The auxiliary support staff has primary planning responsibility regarding the child in care.
 - 4. At no time are relatives, foster parents, or other care takers to be used for ongoing supervision of visits:

- a. Supervision is the direct responsibility of DCYF and its agents;
- b. There could be a conflict of interest between the role of visit supervisor and the ongoing relationship that person has with the parent(s) and/or child. This could negatively affect the quality of supervision given;
- c. Although role modeling can be a by-product of supervision, it is not the main intent. Supervision limits, to varying degrees, the parent/child interaction while the intent of role modeling is to enhance this interaction; and
- d. With respect to certified relative homes, relatives are required to sign a Boarding Home Agreement and are informed at the time of the certification study of the need to limit access to the child by the parents in compliance with the visitation plan.