



# **Child Visitation with Siblings and Parents**

## **Final Report**



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**CT Department of Children and Families (DCF)  
Office for Research and Evaluation (ORE)**

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## Child Visitation with Siblings and Parents

### Executive Summary

In October 1, 2014, Section 17a-10a of Public Act 12-67<sup>1</sup> of the Connecticut General Statutes was amended and affirms the need for child and parent visitation. The Act established a requirement that all children in the care and custody of the Commissioner of the Department of Children and Families (DCF) under an Order of Temporary Custody or Commitment, and who have been separated from their parents or siblings as a result of intervention by the Commissioner, and who are placed within fifty miles of one another in Connecticut, be afforded visitation with their siblings and parents. The law states that visitation with siblings for children placed in the care and custody of the commissioner of DCF should occur no less than once per week, unless it is not in the best interest of the child. The required standard for parental visitation is "as frequently as reasonably possible" based upon consideration of the best interests of the separated child and "shall be sufficient in number and duration to ensure continuation of the relationship," unless otherwise ordered by the court.

The statute also requires DCF to report on compliance with these requirements on an annual basis. These limitations did not allow us to develop an automated report that calculates compliance with the statute. Since case reviews are a labor intensive process, a sample had to be used rather than reviewing all applicable cases. Random samples allow for a cautious generalization from the results to the population as a whole. The final sample consisted of 154 children, which gives us a 95% confidence interval (CI) with a margin of error of 8% that our findings are accurate. This means that if the current study found a 50% compliance rate, and if the study were conducted another 100 times, the percentage of compliance would range between 42 and 58 percent almost all (95 percent) of the time.

The DCF Office for Research and Evaluation, in collaboration with Regional Quality Improvement managers and other qualified reviewers, conducted a study of 154 target children who were under the care and custody of the Commissioner of DCF at some point between October 1, 2014 and June 30, 2015. Each child's visitation with their parents, and each of their identified siblings were evaluated. Compliance with the statute was operationalized at the target child and sibling level, resulting in measurement for 278 sibling pairs and 154 children with their parents.

### Results

#### Siblings:

The study included 154 unique children, which yielded 278 sibling pairs. Of the 278 sibling pairs, the frequency of visitation met or exceeded the expectation for 115 (41.4%) of the sibling pairs. The expectation was met for 76 (49.4%) target children and at least some of their siblings. Documentation relating to the factors considered in making visitation determinations was located in the child's plan of treatment, which the Department refers to as the "Case Plan," for

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<sup>1</sup> See Appendix A for a complete copy of the statute.

159 (57.2%) pairs. For 67 (24.1%) of the pairs, the information was located within supervisory conference notes, in case narratives or were obtained directly from the assigned social worker or supervisor. For the 49 pairs in which the expected frequency determined by the department was less than weekly, there was documentation supporting the determination for 15 (30.6%) of the sibling pairs and for 14 (41.2%) of the target children.

There were a number of identified barriers to meeting the visitation expectations. The most often identified barrier for the sibling pairs for whom DCF did not meet the visitation expectation was “Parent Refusal/Unavailable” (26, 16.0%). This consisted of cases in which the parents of the siblings of the target children either refused to allow visitation or did not attend scheduled visits that included the siblings. This was followed by “Child Refusal” to visit (24, 14.7%). This included cases in which either the target child or the sibling refused to visit. For the majority of the pairs, the “Other” barrier was chosen. The majority of these responses consisted of cases in which the visitation was allowed to be scheduled and facilitated by the caretakers, which included foster parents, guardians, adoptive parents, etc. In some instances, there were references in the documentation that visits occurred, but because they are being facilitated by someone other than DCF direct service staff, there isn’t information about the dates, duration or assessments of these visits. Similar information is lacking in cases in which the target child is an adolescent and visiting with adult siblings. In the absence of any known safety concerns, such youth are often encouraged to manage scheduling their own visits in an effort to ensure a normative experience for them, but it is more difficult to obtain comprehensive and accurate reporting on results from them.

In addition to the barriers identified in the study, reviewers reported observations made during their case reviews that inform case practice, as well as limitations in the data collection. This includes the documentation regarding whether the interactions between siblings is incomplete or absent. In some instances, there is contradictory information within the case record. For example, a case plan might indicate that visitation is occurring at a given frequency, but the information in the narratives does not support that frequency. Also, caretakers, including adoptive parents or those to whom guardianship has been granted, sometimes refuse to allow the child to have contact with his/her family.

These observations are being further assessed to determine how the presented issues might be ameliorated to support increased visitation.

**Parents:**

The compliance determination for visitation with parents was based on 123 children of the 154 children who populated the sample. This yielded 213 unique child/parent pairs. Thirty-one of the children were not included in the measure because they did not have any parents for whom visitation would have been expected during the period under review. The expected frequency of visitation was met for 109 (51.2%) parent/child pairs. In cases in which there was an expected frequency determined by the department, the compliance was based on whether or not the

typical pattern of the visitation exceeded or met that expectation. For cases in which an expectation had not been determined and/or documented, the compliance was based on the reviewer's determination concerning whether or not the typical pattern and quality of visitation were sufficient to ensure the continuation of the relationship.

Reviewers attempted to identify barriers to meeting visitation for the 104 (48.8%) parent/child pairs for which the measure was not met. The most often identified barrier was "Parent Refusal/Unavailable", which was identified for 53 (51.0%) of the pairs. This was followed by "Other" for 17 (16.3%) of the pairs. The "Other" category included parent incarceration, parent illness, or parent's transiency. For 14 (13.5%) of the pairs there wasn't documentation regarding a barrier to visitation.

There was a clear visitation expectation identified for 170 child/parent pairs. There was documentation found in the Case Plan regarding the frequency for 139 (81.8%) of these pairs. For the remaining cases, visitation documentation was located in the running narratives.

### **Recommendations**

Additional training and guidance regarding documentation would assist in presenting an accurate representation of the work that is being done to promote, support and facilitate ongoing relationships between children in care and their families. Visitation contacts is one of the areas the Department will be enhancing in the new child welfare case management and reporting system (SACWIS/CCWIS). It is expected that this will better enable the Department to track and quantify visitation.

Some specific recommendations are:

1. Ensure that staff are aware of the visitation expectations and have an understanding of the importance of visitation for children in care with their families by having managers and supervisors cover this area during supervision;
2. Provide additional guidance for staff on documenting the visitation plan, factors used in determining visitation frequency, and barriers to visitation;
3. Establish a standard protocol for obtaining and documenting information from visitation programs;
4. Establish a standard protocol for obtaining information from relatives and foster parents who are facilitating visits;
5. Establish a standard protocol for obtaining information from youth when they facilitate their own visits or have unsupervised visitation especially with adult siblings;
6. Establish guidelines for consulting with DCF Area Resource Group and other clinicians when children are refusing to visit with family members to help explore and address the barriers;
7. Develop strategies to assist with sibling contact once a child is adopted or guardianship is transferred; and
8. Develop a practice guide and update current policy concerning child visitation with parents and siblings.

## Child Visitation with Siblings and Parents 10/1/2014 – 6/30/2015

### Introduction

Each year, thousands of children are placed under the care and custody of the state child welfare systems for a variety of reasons, including but not limited to abuse and neglect by caretakers. In these instances, children are not only separated from their parents but often from their siblings as well. It is critical for children to maintain relationships with their families because this is imperative to a child's development, overall well-being and yields more positive results for children who enter the child welfare system. According to the Children's Bureau of the U.S. Department of Health and Human Services, the sibling bond is critically important over the course of a lifetime and is often the longest lasting relationship most people have, longer than the parent/child or spousal relationship. Over the last two decades, research has continued to demonstrate the vital nature of sibling bonds and their importance for children's development and emotional well-being. Therefore, it is the duty of the child welfare agency to ensure regular contact between children in out of home placements and their families.

There has been a recognition of the importance of children in care maintaining contact with their parents and siblings. This is evidenced by the passing of laws and legislation to ensure that these relationships are maintained. Amendments to the Social Security Act in 1994 led to the implementation of a federal evaluation of state child welfare agencies that began in 2001 called the Child and Family Services Review process. This evaluation includes an outcome measure to ensure that "the continuity of family relationships and connections is preserved", and specifically measures whether the state child welfare agency has made "concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members."

Results of the first two rounds of reviews (2002 and 2008) showed that CT DCF had not achieved sufficient levels of compliance with these requirements to be found in substantial conformity, and Program Improvement Plans (PIP) were enacted following each review. CT DCF, however, met the federally identified target goals for children maintaining connections for both PIPs during each implementation period. The Fostering Connections Act of 2008 further required state agencies to notify all adult relatives of children placed in state care of their options to become a placement resource for the child, and for such agencies to make reasonable efforts to place siblings removed from their homes in the same foster, adoptive or guardianship placement.

Finally, in June 2012 the Connecticut General Assembly passed legislation to ensure that children in care have regular visitation with their parents and siblings. Effective October 1, 2014, Section 17a-10a<sup>2</sup> of the CT General Statutes requires that DCF "shall include in each child's plan of treatment information relating to the factors considered in making visitation determinations pursuant to this section." The visitation requirement applies specifically to any sibling with whom

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<sup>2</sup> See Appendix A for a complete copy of the statute.

the separated child "has an existing relationship" and requires that visits are to occur "on average, not less than one visit per week" if the sibling resides within CT and within 50 miles of the separated child; and if DCF has not documented in the child's Plan of Treatment a reduced frequency with a rationale for the reduction that is based upon the best interests of the child.

### **Purpose**

This report will be submitted to the Committee on Children of the General Assembly to demonstrate compliance with subsections (a), (c) and (d) of Section 17a-10a.

### **Background**

Amendments to the Social Security Act in 1994 led to the implementation of a federal evaluation of state child welfare agencies that began in 2001 called the Child and Family Services Review process. This evaluation includes an outcome measure to ensure that "the continuity of family relationships and connections is preserved", and specifically measures whether the state child welfare agency has made "concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members." Additional federal legislation recognized the importance of the connections between children in foster care and their families with the 2008 Fostering Connections to Success and Increasing Adoptions Act (P.L. 110-351). The Act includes provision section 206: Sibling Placement which

*Requires each state to make reasonable efforts to place siblings removed from their home in the same foster care, kinship guardian, or adoptive placement, unless the state can document that joint placement is contrary to the safety or well-being of any of the siblings; and in the case of siblings who are not jointly placed, require states to provide for "frequent visitation or other ongoing interaction between the siblings" unless the state documents that this would be contrary to the safety or well-being of any of the siblings.<sup>3</sup>*

Several authors have also written about their experiences of being separated from their siblings. Dr. Waln Brown quotes Dr. Debraha Watson in [Growing Up in the Care of Strangers](#), "Keeping siblings together must be a priority. It is paramount that foster children retain some sense of familial identity. It is difficult enough for us to deal with removal from our parents or other adult family members, but by also separating us from our brothers and sisters, we now are stripped of all sense of family – cut adrift, alone and unconnected to anything or anyone."

Connecticut is also embracing the importance of sibling connections and moving forward to improve practice to maintain healthy sibling relationships. Public Act (PA) 12-71, An Act Concerning Sibling Visitation for Children in the Care and Custody of the Commissioner of Children and Families, passed in the Connecticut General Assembly with strong bipartisan

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<sup>3</sup> Stoltzfus, Emilie, congressional Research Service Report for Congress, *Child Welfare: The Fostering Connections to Success and Increasing Adoptions Act of 2008*, October 9, 2008, (p.24)

support. The bill was supported by youth, youth advocates and the Department of Children and Families. Testimony in support of Connecticut’s bill included testimony from Ivory, a 17-year old from Stratford. She testified, “The more time you spend with your family, the closer your relationships are and the more likely you are to stay connected.” Another youth, Liza, an adolescent client of DCF, testified, “There is no therapy that can substitute for family contact.”<sup>4</sup>

Throughout the years, the Department has made progress with regards to ensuring that children maintain their connections with their families. Results of the first two rounds of the CFSR (2002 and 2008) showed that CT DCF had not achieved sufficient levels of compliance with these requirements to be found in substantial conformity, and Program Improvement Plans (PIP) were enacted following each review. CT DCF, however, met the federally identified target goals for children maintaining connections for both PIPs during each implementation period.

Currently there is DCF Policy that speaks to the implementation of visitation plans for siblings. That policy is as follows:

**36-55-7 (last modified 9/7/07)**  
**Visitation Arrangements for Separated Siblings**

Policy	Written visitation plans shall be developed and immediately implemented for all siblings not placed in the same foster care setting unless a written and signed statement from a professional (e.g., psychologist, psychiatrist) states that visiting is not in the best interests of the sibling needing special care.
Deferral of Sibling Visits	Sibling visits that are deferred for more than sixty (60) days must be re-certified in writing by the mental health professional.  Thereafter, sibling visits shall be reviewed and the deferring of visits re-certified by the professional every ninety (90) days.
Documentation of Deferral of Sibling Visits	Certification and any re-certification by the mental health professional documenting the deferral of sibling visits shall be filed in the child’s Uniform Case Record.

The Exit Plan Outcome Measure (OM) 10 for the *Juan F.* Consent Decree is Sibling Placement. OM 10 assesses the percentage of children who meet the measure, including those who are placed together with all of their siblings, as well as those placed separately due to clinical reasons. The standard for the outcome is 95%. The statewide percentages, based upon independent reviews conducted by the Office for Research and Evaluation and submitted to the Court

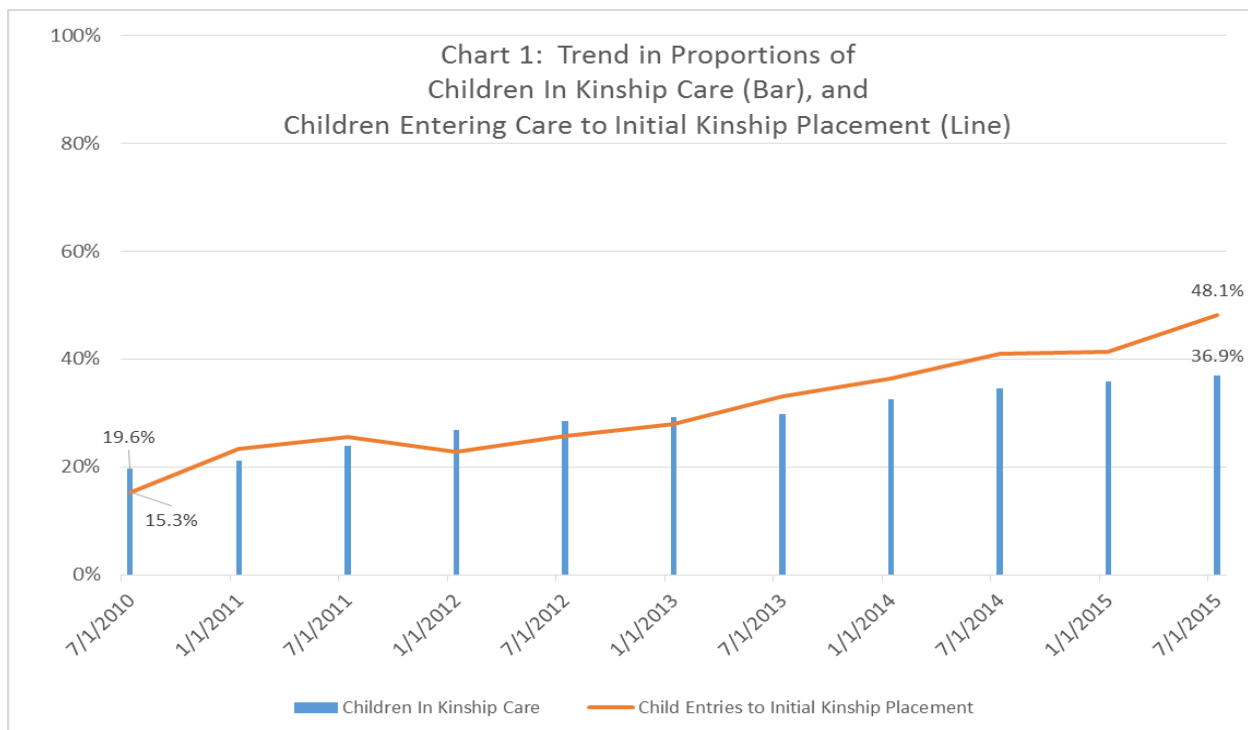
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<sup>4</sup> Select Committee on Children Joint Favorable Report, Bill SB-156, Public Hearing Date: 2/28/2012.  
<https://www.cga.ct.gov/2012/JFR/S/2012SB-00213-R00GAE-JFR.htm>



Monitor’s Office, reveal that this measure has been steadily increasing since the 3<sup>rd</sup> Quarter of 2014 at 88.7% to 91.4% during the 2<sup>nd</sup> Quarter of 2015.

Chart 1 below illustrates the percentage of children in care who are placed with relatives on a specific date and the percentage of children who entered care during a specific month/year who were placed with relatives. Due to specific management attention to this issue since January 2011, both of these trends have been steadily increasing. Since more children have been placed together with relatives (or in other placements), there are fewer sibling pairs for whom visitation must be provided. While relatives often facilitate visits for the children in their care, the documentation of specific dates, times and content of those visits, however, are often not sufficiently comprehensive within DCF records.



Next, there are a number of factors that can influence the relationship between children in care and their parents and siblings. These range from the willingness of family members to visit with one another, to the effective facilitation of such visits by the child welfare agency. There is also a question of how to pursue a child’s permanency by ensuring that he/she maintains crucial relationships with their families, especially when the child’s permanency plan is adoption or transfer of guardianship. PA 12-71 did not specifically address these situations.

For example, Connecticut is one of the 28 states that permits enforceable post-adoption contracts. A written contractual agreement between the parties to an adoption can clarify the type and frequency of the contact or communication and can provide a mechanism for enforcement of the agreement. The written agreements specify the type and frequency of

contact and are signed by the parties to an adoption prior to finalization. CT does not, however, require sibling contact post adoption<sup>5</sup>.

Randi Mandelbaum raises several questions in, *“Delicate Balances: Assessing the Needs and Rights of Siblings in Foster Care to Maintain Relationships Post-Adoption”* that are faced by child welfare agencies when finding permanency for a child. She writes,

*Should a state favor “permanency” through adoption for children in foster care over the maintenance of biological family ties? Should such a choice even have to be made? Is a court even permitted to provide as much protection to the biological sibling relationship as it does to the newly created parent-child relationship? Is there something unique about the sibling bond between foster children that justifies prioritizing these relationships? How would such a prioritization be implemented? And finally, if we do not favor the rights of adoptive parents will we in the end create a situation where some adoptive families no longer want to adopt foster children? (Mandelbaum, Randi, 2011)*

There have been examples in which the courts have ordered post-adoption visitation between siblings. Randi Mandelbaum writes about the case *re Adoption of Anthony*, that although the adoptive family signed a letter regarding sibling visitation “...the court was not willing to rest on the promises of Anthony’s adoptive parents.” It was decided that:

*While the adoptive parents may presently feel that Anthony’s contact with his birth siblings is essential, Anthony’s interests would not be protected should his adoptive parents change their minds in the future. Therefore, this Court determined that the only way to ensure Anthony’s interests after his adoption was to include a direction in the Order of Adoption that Anthony have continued contact including visitation with his birth siblings. (Mandelbaum, Randi, 2011, p. 21)*

### **DCF Child Visitation Practice**

The DCF Strengthening Families Practice Guide contains a segment entitled *“Parenting Time: Facilitating Visitation between Parents and Children.”* It states that there is to be a collaboration “...with both birth parents and substitute caregivers to define how the parent-child connection will be supported.” The segment “...provides guidance on how to best arrange visits in a way that promotes and maintains healthy child-parent connections. Planning for these visits should be reflected in the case plan so that expectations for all parties are clearly defined.”

Area Offices have reprioritized staff assignments to support the visitation standards. For example, the Manchester Area Office created a specific e-mail mailbox for all Social Work Case Aides (SWCA) requests. There are two supervisors who provide oversight of SWCA assignments to ensure the SWCAs’ schedules are maximized and visits are prioritized.

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<sup>5</sup> A summary of Connecticut’s [law](#) is located in Appendix A.

The Bridgeport and Norwalk offices have a number of tracking mechanisms to ensure that staff are aware of visitation expectations, and that there is appropriate documentation regarding visitation in the case plans. For example, the Regional Quality Improvement manager developed examples of visitation plans and provided them to all of the supervisors along with the expectation guidelines. Also, program managers discuss with their staff any cases in which the visitation section of the administrative case review instrument is rated as an area needing improvement.

In the Torrington office, staff use supervision to ensure that sibling visits are occurring. Sibling visitation is part of the Supervision Agenda and Model. SWCAs and Foster Parents are the primary vehicles for supervised visitation.

Tracker logs are used in the Danbury office to manage the number of children who warrant sibling visitation. Foster families assist with transporting and supervising visits.

Next, Social Workers (SW) in the Waterbury office update the visitation detail in LINK for every child in placement to identify the visitation arrangements for each child. This is monitored through a visitation detail report. SW staff are including a description of the children in placement in the case plan section on sibling visits. SW are also making note of the contacts/plan in narrative during Child in Placement (CIP) visits.

There are also a number of related services for which DCF contracts, including:

**Therapeutic Foster Care:** The Scope of Service for Therapeutic Foster Care includes a section entitled “Birth Family and Significant Connections” which states, “When joint placement is not possible, the Contractor and the foster family will assist with visitations and other appropriate ongoing interactions between siblings. Similarly, as clinically appropriate and congruent with protective service stipulations, the Contractor and foster families will be expected to assist with children's visitation with their birth parents, other relatives, and friends.”

**Visitation Programs:**

There are third party visitation programs that are utilized that provide transportation, supervised visitation and parenting education such as AHAVA and All Point in Danbury. The Reunification and Therapeutic Family Time (RTFT) providers use the Visit Coaching Model, an evidence based tool (Keys to Interactive Parenting Scale) to effectively measure parent child interaction and parenting behaviors, preserves and restores parent/child attachment, facilitates permanency planning and emphasizes continuity of relationships.

**Sibling Connections Camp:** This has been the 7<sup>th</sup> year that DCF has provided the Sibling Connections Camp. It is a weeklong camp in August at the Channel 3 Kids Camp in Andover, CT. This program is funded by DCF and is free to eligible children/youth. The Channel 3 Kids camp was awarded the contract to provide a week long camp experience focused on reconnecting siblings placed in out of home care. The camp subcontracted

with Wheeler Clinic to provide therapeutic support to campers who may require intervention.

### **Documentation of Child Visitation**

The Department configured the current electronic child welfare information system (LINK) to collect visitation data in order to assist with tracking and future reporting regarding law 17a-10a. A workgroup was created, which determined the necessary additions to the current system to produce visitation results.

1. The option “half-sibling” was added to the category used to describe the relationship of a case participant.
2. The relationship of a visitor can now be chosen within the Visitation Plan which is part of the Case Plan
3. When documenting a visit, the siblings are able to be distinguished with the “person contacted” list.
4. There are now several choices under “supervised visit” in order to determine who supervised the visit for example, DCF Social Worker, Foster Parent, etc.

This update was provided to DCF staff via email on August 5, 2015 with a LINK Release<sup>6</sup> date of August 7, 2014.

DCF Area Office staff enter a note into the LINK Visiting Case Narrative for each sibling and parent visit that occurs, identifying the LINK ID for each individual involved. Each visit narrative will be entered using one of six visit types: DCF Supervised, Foster Parent Supervised, Other Agency Supervised, Congregate Care Provider Supervised, Parent Supervised or Unsupervised and will note the date, time and duration of the visit. The narrative entry will describe the visit according to a yet to be defined standardized format that will allow reasonable auditing for the quality and effectiveness of each visit.

The statute further requires that "in each child's plan of treatment" DCF must note information relating to the factors considered in setting visitation plans for parents and siblings of children in placement, and that if the weekly visitation standard is not in the best interests of the child, clearly document the reasons for that determination. The required narrative format for the Assessment portion of each Child in Placement Plan has a Visitation section is one place used for this purpose. The visiting determinations narrative in the Visitation Plan is another location in the record with relevant information. For the purposes of this study, we considered information in either of these two pieces of case work, or in the record of the Administrative Case Review of the case plan, as fulfilling the requirement of the statute.

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<sup>6</sup> The detailed Link Release is located in Appendix D.

## Review Methodology

A random sample methodology was chosen for this review because of limitations with documentation in our case management system. These limitations did not allow us to develop an automated report that calculates compliance with the statute. Since case reviews are a labor intensive process, a sample had to be used rather than reviewing all applicable cases. A random sample is a collection of individuals selected from a population in such a way that each individual in the population had an equal chance of being selected. Random sampling is important because it is the only procedure that ensures that the resulting sample will be representative of the population within specifiable limits of confidence, and it permits researchers to conduct valid tests of statistical significance.

Such representativeness allows for a cautious generalization from the results based on the random sample to the population as a whole. For example, if there are 5,000 youth in foster care in a state and you would like to know if they are satisfied with services they have received, one does not need to ask each of the 5,000 youth regarding their viewpoints because this would consume too much time and resource. A survey among a random sample of 500 or even 300 foster youth would allow for a generalizable satisfaction rate of the surveyed youth to the 5,000 total foster youth in a statistically significant manner.

The final sample for the current study consisted of 154 children, which gives us a 95% confidence interval (CI) with a margin of error of 8% that our findings are accurate. This means that if the current study found a 50% compliance rate, and if the study were conducted another 100 times, the percentage of compliance will range between 42 and 58 percent almost all (95 percent) of the time. DCF plans to allow additional time to conduct these reviews during future time periods, which will allow us to increase our sample size and therefore decrease our margin of error and lend additional weight to those results.

To gather data on the Department's compliance with the statute, the Office for Research and Evaluation led a qualitative and quantitative study of children with a legal status of Committed Abuse/Neglect/Un cared-for or an Order of Temporary Custody (OTC) for at least seven days between October 1, 2014 and June 30, 2015. The final sample consisted of one hundred and fifty-four unique children under the age of 18 with at least one sibling who resided in the state of Connecticut and within 50 miles as per the expectation set by law C.G.S. §17a-10a. As each target child may have a variable number of siblings for whom visitation was required across this time period, there were a total of 278 sibling pairs reviewed.

A case review<sup>7</sup> of the electronic LINK record was conducted, as well as obtaining supplemental information from the assigned social worker in order to determine visitation planning and activity. The results were collected via an MS Access database. Outcomes include the expected and actual frequency of visits between the children and their parents and/or siblings. The study

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<sup>7</sup> A copy of the review instrument and instructions are located in Appendix C.

provided important information of the Department’s practice regarding the facilitation of visitation of children who are in out of home care with parents and siblings.

## Review Findings

### Visitation with Siblings

Visitation among siblings, parents and children in placement is currently facilitated by multiple entities in addition to DCF. In consultation with DCF, congregate care facilities routinely arrange and often supervise visitations between their residents and family members. Additionally, DCF foster parents, therapeutic foster parents and child placing agencies have a role in facilitating visitation. Credentialed providers of visitation services also play a role in this activity. These supplement visitation facilitated directly by DCF Social Workers and Case Aides, and assuming adequate information can be obtained from such providers and entered into the DCF case management system, help to ensure compliance with the statute.

There were a total of 278 sibling pairs. The visitation expectation was either met or exceeded for 115 (41.4%) of the pairs. There were 229 pairs who had an expectation of at least weekly. For 97 pairs (42.4%) that expectation was met. Table 1 shows the results of the study by sibling pair and unique child.

Table 1: Expected Frequency	Met		Not Met		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Annually	1	0.4%		0.0%	1	0.4%
Bi-Weekly	6	2.2%	15	5.4%	21	7.6%
Monthly	7	2.5%	14	5.0%	21	7.6%
More than Weekly	32	11.5%	14	5.0%	46	16.5%
NONE	3	1.1%	0	0.0%	3	1.1%
Quarterly	1	0.4%	2	0.7%	3	1.1%
Weekly	65	23.4%	118	42.4%	183	65.8%
<b>Grand Total</b>	<b>115</b>	<b>41.4%</b>	<b>163</b>	<b>58.6%</b>	<b>278</b>	<b>100.0%</b>

Another way to report these data are at the unique child level. Almost half (76, 49.4%) of the unique children reviewed had visitation that met or exceeded the expected frequency with at least some of their siblings. Table 2 shows the results for unique children reviewed.

Table 2: Expected Visitation Met or Exceeded with All Siblings per Unique Child		
Met Visitation Expectation With All Sibling Pairs	<i>n</i>	Percentage
ALL	59	38.3%
SOME	17	11.0%
NONE	78	50.6%
<b>TOTAL</b>	<b>154</b>	<b>100%</b>

Visitation documentation was located in the child’s case plan for the majority of the sibling pairs (159, 57.2%). Such information, however, could not be found for 49 (17.6%) of the pairs. This is partly due to the fact that visitation with adult siblings are usually not facilitated by the Department, but rather scheduled by the youth, who are also not reliable or consistent reporters of that information to our workers.

Table 3: Documentation	At least weekly		Less than weekly		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Case Plan	124	44.6%	35	12.6%	159	57.2%
None Found	49	17.6%	3	1.1%	52	18.7%
Other Narrative	28	10.1%	9	3.2%	37	13.3%
Supervisory Narrative	28	10.1%	2	0.7%	30	10.8%
<b>Grand Total</b>	<b>229</b>	<b>82.4%</b>	<b>49</b>	<b>17.6%</b>	<b>278</b>	<b>100.0%</b>

Primarily, the “Other” barriers consisted of situations in which caretakers and foster parents facilitate the visits. In some of the cases, there isn’t documentation stating whether or not visits are occurring. In others, the Department is not obtaining information from those who are facilitating the visits. Also, in some cases, usually with the older youth, they are allowed to facilitate the visits themselves partly because of their schedules. In some of the cases, the siblings are adults and the visits are unsupervised. DCF needs to improve our ability to capture the information concerning when visits occur, while not sacrificing the normative experiences for children and youth in placement.

For some of the pairs in which “Parent Refusal/Unavailable” is identified as a barrier, this is a result of parents canceling visits. Many sibling visits occur during supervised visitation with parents, and if those visits are canceled, the siblings do not visit. It also includes instances in which siblings are still residing with the parents, have been adopted or whose guardianship has been transferred and the guardian does not allow the siblings to visit.

Table 4: Barriers for Not Meeting Expectation by Unique Sibling Pair		
Barrier	<i>n</i>	Percentage
Other	58	35.6%
Unknown/UTD	35	21.5%
Parent Refusal/Unavailable	26	16.0%
Child refuses to visit	24	14.7%
Child AWOL/Runaway	16	9.8%
Transportation	3	1.8%
Child Illness	1	0.6%
<b>Total</b>	<b>163</b>	<b>100.0%</b>

### Visitation with Parents

The compliance determination for visitation with parents was based on 123 children of the 154 children who populated the sample. This yielded 213 unique child/parent pairs. Thirty-one of the children were not included in the measure because they did not have any parents for whom

visitation would have been expected during the period under review. The expected frequency of visitation was met for 109 (51.2%) parent/child pairs. In cases in which there was an expected frequency determined by the department, the compliance was based on whether or not the typical pattern of the visitation exceeded or met that expectation. For cases in which an expectation had not been determined and/or documented, the compliance was based on the reviewer’s determination concerning whether or not the typical pattern and quality of visitation was sufficient to ensure the continuation of the relationship. Table 5 shows the results of the study by child/parent pair.

Table 5: Parent/Child Results	Met		Not Met		Grand Total
	n	%	n	%	
Unknown Frequency	11	5.2%	32	15.0%	43
Known Frequency	98	46.0%	72	33.8%	170
<b>Grand Total</b>	<b>109</b>	<b>51.2%</b>	<b>104</b>	<b>48.8%</b>	<b>213</b>

There were 43 child/parent pairs in which the expected frequency was “Unknown.” The documentation for the majority of these cases indicate that either the parent or child was refusing to attend visits or the parents’ were not available to develop a visitation plan. In other instances it was documented that the visitation schedule was to be determined by the parent or the child, but the substance of that determination was not documented.

Barriers to achieving visitation were identified for the 104 pairs that did not meet the measure. The most common barriers identified were “Parent Refusal/Unavailable” and “Child Refusal.” In some of these cases, parents refuse to visit or do not follow through with visitation schedules. As mentioned under Table 5, when parents and/or children are refusing to visit, it is difficult to establish or maintain a consistent visitation schedule.

Table 6: Barrier	n	%
Parent Refusal/Unavailable	53	51.0%
Child Refusal	11	10.6%
Child AWOL/Runaway	8	7.7%
Inclement Weather	1	1.0%
Other	17	16.3%
Unknown	14	13.5%
<b>Grand Total</b>	<b>104</b>	<b>100.0%</b>

The documented visitation frequency was found in the Case Plan for 139 (81.8%) of the cases. For six (3.5%) cases, the documentation was found the in Supervisory Conference Notes. Documentation for the remainder were found in other miscellaneous types of narrative entries.

**Additional Observations by Study Reviewers**

There were a number of observations made by reviewers that are valuable in informing case practice. The observations are in reference to the process of documenting visitation information, as well as case practice. The observations include:



- Some adolescents have unsupervised visitation on their own without the Department’s facilitation, so there isn’t documentation other than a reference to the fact that they have unsupervised visits.
- There is a lack of information in the record when children are visiting with adult siblings.
- If a sibling is listed as “Inactive” in the case record, but the child is visiting with that sibling, there is often missing information regarding those visits.
- There are statements in case plans under the visitation such as, “the child does not have any siblings in care.” It appears that some staff believe visitation plans are only necessary if the siblings are also in care.
- When someone other than DCF staff is facilitating and/or supervising visits, there is often a lack of documentation. There may be a reference that a visit occurred, but vital information is missing such as the date of the visit, frequency, duration and assessment of the visit. These third parties include contracted visitation programs, relatives, and foster parents. When visits are facilitated by relatives and foster parents, these occur based on their availability.
- Some information from the third party supervision programs are received via email, which are at times, are copied/scanned into the link record, but listed as provider contact or other narrative and not as a supervised visit.
- When children are in the process of having their parents’ rights terminated and when the adoption process begins, the frequency of sibling visitation appears to decrease.
- Caretakers (such as adoptive parents or those who have been granted guardianship) at times deny family members contact with the child or do not continue to facilitate visits.
- Documentation of the sibling interactions during visits is often incomplete or absent.
- Contradictory information is sometimes observed between the case plan and the narratives. For example, the case plan lists the frequency as “Weekly” and narratives state a different frequency.
- When youth in placement become older, some refuse to have visitation with their families. Their reasons, however, for that decision are often not explained in the record.

## Recommendations

Additional training and guidance regarding documentation would assist in presenting an accurate representation of the work that is being done to promote the relationships between children in care and their families. Those areas are:

1. Ensure that staff are aware of the visitation expectations and have an understanding of the importance of visitation for children in care with their families by having managers and supervisors cover this area during supervision;
2. Provide additional guidance for staff on documenting the visitation plan, factors used in determining visitation frequency, and barriers to visitation;
3. Establish a standard protocol for obtaining and documenting information from visitation programs;
4. Establish a standard protocol for obtaining information from relatives and foster parents who are facilitating visits;
5. Establish a standard protocol for obtaining information from youth when they facilitate their own visits or have unsupervised visitation especially with adult siblings;
6. Establish guidelines for consulting with DCF Area Resource Group and other clinicians when children are refusing to visit with family members to help explore and address the barriers;
7. Develop strategies to assist with sibling contact once a child is adopted or guardianship is transferred; and
8. Develop a practice guide that includes updated DCF Policy regarding child visitation with parents and siblings, and that embodies the results of the aforementioned recommendations.

## Conclusion

There is agreement that a child's bond with his/her family is imperative to development and well-being. There were a number of factors identified in the study related to practice that will require further discussion in order to develop strategies and guidance to ensure that children in care maintain their connections with family.

It is important to remember that the children we serve will one day become adults and have similar concerns regarding their siblings as parents do of their own children. The following was written anonymously<sup>8</sup> by someone separated from his siblings after entering foster care:

*In the process of writing this story, I suddenly realized that my brother and sister are now teenagers. It was the first time I'd thought of them that way; in my mind, they were still children. When I realized they were teenagers, my first thought was,*

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<sup>8</sup> Full text can be found at: <https://www.fosterclub.com/article/torn-apart-we-survived-street-lost-each-other-foster-care>

*"That's crazy." I started thinking about my sister with a boyfriend and how I would act. How would I explain to my little brother about protecting himself and practicing safe sex? How would they manage without me there as a positive authority figure? Who did they call on when they needed help? I also wonder if they think about me. I want to know if they miss me, if they feel the same way about me as I feel about them. Knowing that they're alive gives me hope, but not knowing what's going to happen to them worries me very much. If they died, I wouldn't even know. If I found out years later, me not being there would hurt me even more.*

When children enter the child welfare system, it is important to treat them and work with them not only considering their condition on that day, but all of what they have come with. As Mary E. Coogan stated in *re DC and DC Minors*, "Like all of us, the child is an agglomeration of all of the relationship and happenstances, good or bad, of his or her lifetime."

Although perhaps not deemed an emergency as a child being in danger, there is a sense of urgency that is clearly experienced by children when separated from their families. This is evident such as in the testimony given by Sixto Cancel, Connecticut foster care alumna. He testified in support of SB 156, Select Committee on Children, February 28, 2012 and shared, "There was always this unsaid sense that you can connect with your siblings when you get older but what happens when you missed the opportunity because one sibling died or like my other three brothers, incarcerated? Sometimes there is no later."

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**Appendix A: CT General Statutes Section 17a-10a<sup>9</sup>, Effective October 1, 2014**

Sec. 17a-10a. Visitation with child in care and custody of commissioner. Visitation of child with sibling. Reports. (a) The Commissioner of Children and Families shall ensure that a child placed in the care and custody of the commissioner pursuant to an order of temporary custody or an order of commitment is provided visitation with such child's parents and siblings, unless otherwise ordered by the court.

(b) The commissioner shall ensure that such child's visits with his or her parents shall occur as frequently as reasonably possible, based upon consideration of the best interests of the child, including the age and developmental level of the child, and shall be sufficient in number and duration to ensure continuation of the relationship.

(c) If such child has an existing relationship with a sibling and is separated from such sibling as a result of intervention by the commissioner including, but not limited to, placement in a foster home or in the home of a relative, the commissioner shall, based upon consideration of the best interests of the child, ensure that such child has access to and visitation rights with such sibling throughout the duration of such placement. In determining the number, frequency and duration of sibling visits, the commissioner shall consider the best interests of each sibling, given each child's age and developmental level and the continuation of the sibling relationship. If the child and his or her sibling both reside within the state and within fifty miles of each other, the commissioner shall, within available appropriations, ensure that such child's visits with his or her sibling occur, on average, not less than once per week, unless the commissioner finds that the frequency of such visitation is not in the best interests of each sibling.

(d) The commissioner shall include in each child's plan of treatment information relating to the factors considered in making visitation determinations pursuant to this section. If the commissioner determines that such visits are not in the best interests of the child, that the occurrence of, on average, not less than one visit per week with his or her sibling is not in the best interests of each sibling, or that the number, frequency or duration of the visits requested by the child's attorney or guardian ad litem is not in the best interests of the child, the commissioner shall include the reasons for such determination in the child's plan of treatment.

(e) On or before October first of each year, the commissioner shall report, in accordance with the provisions of section 11-4a, to the select committee of the General Assembly having cognizance of matters relating to children, data sufficient to demonstrate compliance with subsections (a), (c) and (d) of this section.

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<sup>9</sup> Downloaded 9/28/15 from <http://search.cga.state.ct.us/r/statute/dtsearch.asp?cmd=getdoc&DocId=12985&Index=I%3a%5czindex%5csurs&HitCount=2&hits=1df+1e0+&hc=2&req=%28number+contains+17a%2D10a%29&Item=0>

## Appendix B: Strategies to Maintaining a Sibling Connection

### Child Welfare Information Gateway January 2013

#### Sibling Issues in Foster Care and Adoption <https://www.childwelfare.gov>

##### Strategies for Preserving Sibling Ties in Separate Placements

Some promising practices from the field suggest ways to maintain ties among separated siblings.

- **Place siblings with kinship caregivers who have an established personal relationship.** Even when siblings cannot be placed in the same home, they are more apt to keep in close contact if they are each placed with a relative.
- **Place nearby.** Placing siblings in the same neighborhood or school district ensures that they will be able to see each other regularly. Also, keeping children in their same schools contributes to better educational outcomes.
- **Arrange for regular visits.** Frequent visits help to preserve sibling bonds. The Children's Bureau Guidance on the Fostering Connections Act (<http://www.acf.hhs.gov/programs/cb/resource/pi1011>) allows agencies to set standards for the frequency of visits but designates that these should be at least monthly. Some State statutes specify contact twice a month, and at least three States (Alabama, Missouri, and Utah) require weekly visits, although many others do not specify frequency. Also, visits with birth parents can be arranged to occur at a time when all the siblings can be together.
- **Arrange other forms of contact.** If the distance between siblings is great, workers need to assist foster and adoptive families in maintaining frequent contacts through letters, email, social media, cards, and phone calls. Make sure that children have full contact information for all their siblings. For instance, providing older siblings with calling cards may facilitate sibling communication.
- **Involve families in planning.** The adults in the siblings' families should be involved with the worker in developing a plan for ongoing contact. This meeting should include working through any barriers to visits, and the plan needs to be reviewed and revised as needed, at least yearly. Sometimes, there are value differences between families or differences in rules that cause parental discomfort with visits. Such differences need to be discussed and resolved.
- **Plan joint outings or camp experiences.** Siblings may be able to spend time together in a joint activity or at summer or weekend camps, including camps specifically for siblings or through short-term outings. Such camp experiences help siblings build and maintain their relationships.
- **Arrange for joint respite care.** Families caring for siblings may be able to provide babysitting or respite care for each other, thus giving the siblings another opportunity to spend time together.
- **Help children with emotions.** Sometimes sibling visits stir up emotional issues in children, such as the intense feelings they may experience when visiting birth parents. Children need to be helped to express and work through these feelings; this does not mean visits should not occur. Visits should provide some opportunities for joint Lifebook work with siblings. If siblings are in therapy, they should be seeing the same therapist, and it may be possible to schedule appointments either jointly or back to back. Children may also need help with feelings of guilt if

they have been removed from an abusive home while other siblings were left behind or born later.

- **Encourage sustained contact.** Sustaining sibling contact often requires a unique understanding and commitment from parents. Many adoptive parents recognize the importance of their adopted children having contact with siblings living with their birth families or other adoptive families. Some families even travel across the country or to other countries to give their children the opportunity to get to know their siblings. Some States offset the costs of such visits through their adoption subsidy plans. The earlier these relationships can begin, the more children can use these opportunities to work through adoption identity issues that may arise, and the sooner they can develop truly meaningful relationships with siblings.

Many States have adoption registries that can help adult siblings separated by foster care or adoption reestablish contact later in life. The caseworker needs to make sure that all pertinent information on each sibling is entered in the registry at the time of each child's adoption.

## Appendix C: Tool Guide and Instructions

### Definitions and Instructions Guide for Child Visitation with Siblings and Parents

**Notes: If there are any practice challenges or things you want to highlight, please make note of those on a separate form and email to Janet or Sandy.**

**Safety Concerns** – Email Janet Gonzalez and Sandy Carroll

Reviews End – September 16th

#### Target Child: Inclusions and Exclusions

**Excluded:** Target child with NO siblings. If a target child is excluded, you DO NOT fill out a parent Visitation Form.

The Target Child will be any child under the age of 18 who was in placement under the order of temporary custody (OTC) or an abuse/neglect/uncared commitment during the period under review (PUR). This excludes probate, interstate compact, voluntary, and children solely committed delinquent. If child was in care for more than 7 days, they are applicable. If they are in care for less time than the expected frequency, and did not visit weekly, they are excluded. For example:

#### EXCLUDED

Expected frequency: Monthly  
In care for 14 days  
No visit occurred

#### INCLUDED

Expected frequency: Monthly  
In care for 14 days  
Visited weekly

The target child will be assigned from a randomized sample of two hundred and fifty children under the care and custody of the Department.

If you come across a Services Past Majority case (SPM) and the youth was under the age of 18 at some point during the PUR, the youth is reviewed. Do a person search for the youth and find the family case because there may be information missing in the SPM case. Make sure you review the family case as well because the visits with the parents and siblings may be in the family case and not necessarily in the target youth's case. If you find that the target child was



18 years old during the ENTIRE PUR, he/she should be excluded so let us know so that we can give you a replacement case.

**Period Under Review (PUR): Definition**

PUR: October 1, 2014-June 30, 2015, or the time period during which the target child is in the care and custody of the Department. The PUR may be shorter if the target child entered care or returned home within this time period.

If a there is a protective order put into place against a parent, and the order remains active during the rest of the PUR, the PUR will end when the protective order begins. Ex; Target child enters care on 11/1/14, which would be the beginning of the PUR for that child and a full protective order is put in place preventing any contact between the target child and father on 12/15/14, the PUR for father’s visits would be 11/1/14-12/15/14.

**Sibling: Definition**

Children who have one or more parents in common either biologically, through adoption or through marriage of their parents, and with whom the target child lived with before or had a relationship with prior to his or her placement and the sibling resides within the same state and within 50 miles of the target child.

\*If a sibling of the target child resides out of state or more than 50 miles from the target child, he/she would be excluded from the review. If this is the only sibling of the target child this case would not be reviewed and a replacement case will be needed, contact Janet or Sandy. To determine if children are placed within 50 miles, reviewers can use Mapquest or Googlemaps to enter the placement addresses and determine the distance between the placements.

When determining if there are siblings to be reviewed please make sure that you are not solely dependent upon the “Participant” list under the “Case Maintenance.” There are cases where for whatever reason participants are not listed so look at the latest case plan to ensure that there aren’t any siblings that should be visiting.

You may have cases in which all the siblings are placed together during the entire PUR. If there isn’t another sibling remaining in the home and there aren’t any other siblings with whom the target child should be visiting, the case is excluded and you DO NOT fill out a sibling or parent form.

**Visit: Definition**

When the target child interacts face to face with their sibling(s) and/or parent(s) and the time they spend together allows for a meaningful interaction and an opportunity for the target child to have an experience that promotes and supports the continuity of those relationships.

If there isn't a documented visitation expectation for the siblings, it defaults to weekly visitation.

What can be counted as a visit? Documentation of visits *after* they occurred are acceptable, visits documented prior to actually taking place or visits that *are going to* or *supposed to* occur are not.

If there is no narrative of an actual visit, but there is information found in a later narrative and the visit is discussed or documented, that visit may be counted. Ex; a mother calls the social work supervisor on Monday morning and complains that when she saw her children on Saturday's visit, they had dirty clothes on. This provides documentation that a visit took place on Saturday. Reviewers may have to look back on calendars to determine when visits took place based on the documentation if the date was not included. If a date was not specified, a date may be picked. Ex; if the mother had called about her visit last weekend, the reviewer could choose a date for that Saturday or Sunday.

Visits should not be counted if the documentation is prior to them actually taking place or if a visit is planned. If a social work supervisor documents during a supervisory conference note that mother is scheduled for a visit this Friday, this would not be counted as it's in the future and it's unknown if it will take place.

There are times when siblings are transported to medical or other appointments together. This is not automatically a sibling visit, it needs to be documented as a sibling visit or if it is clear from narratives that the siblings were taken to lunch or to a park to play for a visit before or after the appointment, if there is a question about a particular narrative, please see Janet or Sandy.

When there are supervised visit narratives and all siblings are listed as participants in that visit narrative, but not all siblings are discussed in the narrative, this documentation will count as a visit.

### **Visitation Plan: Definition**

An updated and accurate plan that is reflective of the required visitation should be documented. Documentation related to the factors considered in making visitation determinations should be present during the PUR. If sibling visits are not occurring on average at least weekly (or otherwise expected frequency), barriers or other noted factors (clinical recommendation, safety) should be present in the Link electronic record. This documentation can be located in:

- Case Plan (accessed through the "Case Planning" Link icon)
- Visitation Plan (accessed via the "Placement/Services" Link icon, under "Visitation Detail")

- Administrative Case Review Instrument (ACRI), which is accessed through any of the most recent meetings by choosing the meeting then clicking on “Options” then “ACRI”:
  - Family Case Planning Conference
  - Family Administrative Case Review
  - CIP Case Planning Conference
  - CIP Administrative Case Review
- Running Narratives
  - Pay close attention to the Supervisory Conference Notes

**Parent: Definition**

**\*Although a parent is not applicable, you still fill out a form and indicate that parent 1 and 2 are not applicable by clicking on the “Parent1NOTApplicable” box and the “Parent2NOTApplicable” box.**

Parent 1 and Parent 2 are defined as ANY of the following:

- The parent/guardian/caregiver from whom the child was removed and with whom the agency is working toward reunification;
- The parent/guardian/caregiver from whom the child was removed and although will not be reunified, it is in the child’s best interest to preserve that relationship
- If a biological parent does not fall into any of the categories above, determine whether that parent should be included based on the circumstances of the case.

A parent is excluded if:

- There is documentation in the case file indicating that contact between the child and the parent is not in the child’s best interest;
- The whereabouts of the parent are unknown during the entire PUR despite documented concerted agency efforts to locate the parent;
- The parent was deceased during the entire PUR;
- The parental rights remained terminated during the entire PUR.

*\*Note: Documentation could be found in the Case Plan, Visitation Plan, Administrative Case Review Instrument, Running Narratives, etc.*

If you have a case in which no actual visits occurred because parents and siblings refused, you still fill out a form for both. If this is the case and the child was in care during the entire PUR, use the following info:

PUR Start Date: 10/1/2014 PUR End Date: 6/30/2015

Barrier: Child Refused or Parent Refused

Do not fill out the “Visit Date” or the “Visit Type” on the sibling form.

## General Instructions

**Before starting a review make sure that the sibling is applicable by ensuring that the sibling resides in the state AND within 50 miles of the target child. This is especially true if there is only one sibling because if the sibling is not applicable the case will have to be replaced.**

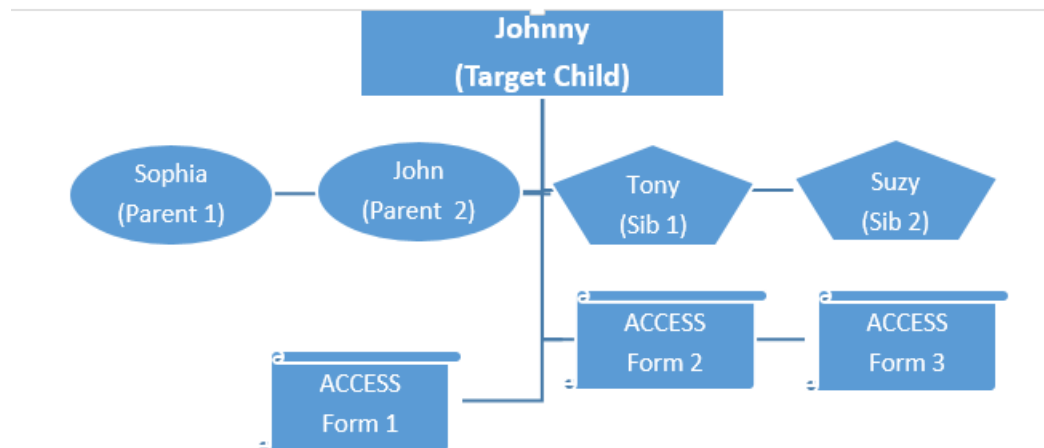
Reviewers should complete the Child-Sibling tool(s) first, then the Child-Parent tool.

### ACCESS Form:

One Access form will be completed for each sibling with whom the target child should be visiting and one form for the parent(s). Both Parent 1 and Parent 2 are on the same form.

**\*Although a parent is not applicable, you still fill out a form and indicate that parent 1 and 2 are not applicable by clicking on the “Parent1NOTApplicable” box and the “Parent2NOTApplicable” box.**

**Example: Johnny Jones;** Target Child: Johnny Jones; Parents: Sophia Jones, John Jones  
Siblings: Tony Jones, Suzy Jones



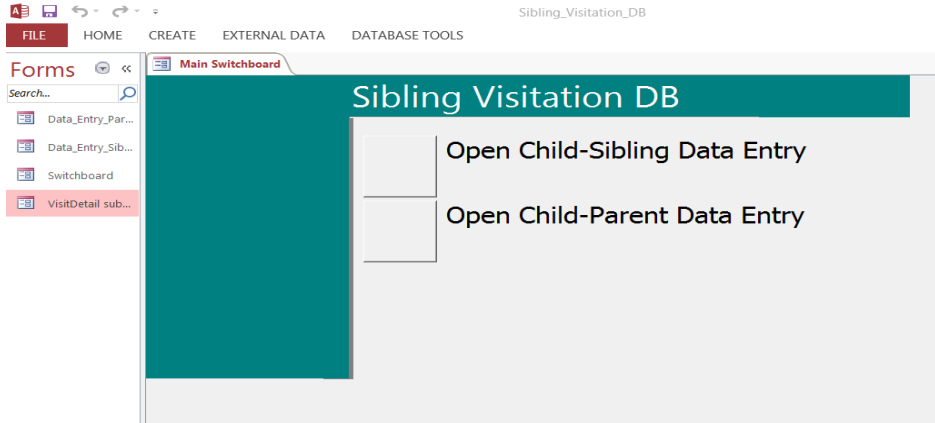
## ACCESS - Sibling Visitation Data Entry Form

Click on link below to access the forms:

Once the user clicks on the link, their computer will load Microsoft Access Runtime application which is already installed on their computer as part of their application already installed.

[\\Ctdcf-cntrl02\casedata\casedata\JGONZALEZ\Sibling\\_Visitation\Sibling\\_Visitation\\_DB.mdb](\\Ctdcf-cntrl02\casedata\casedata\JGONZALEZ\Sibling_Visitation\Sibling_Visitation_DB.mdb)

- Complete a tool for each sibling of the Target Child with whom they should be visiting.
- You will be sent a link to the form via email.
- Enter by clicking on “Open Child-Sibling Data Entry”



Main Switchboard | Data\_Entry\_Siblings

1. RecordNumber: (New) 2. TargetChildCaseID: 0

3. ReviewDate: 4. ReviewerName:

5. TargetChildPersonID: 0 6. Target Child Name (Last, First):

7. SiblingPersonID: 0 8. Sibling Name (Last, First):

9. PUR Start Date: 10. PUR End Date:

11. What was the expected frequency of visitation for this pair across the majority of the timeframe?  
 More than Weekly

12. Does typical frequency of actual visitation meet or exceed the expected frequency across this time period? (check if YES)

13. Where did you find the documentation of the expected frequency of visitation (if in the Case Plan or ACRI and other locations as well, always choose Case Plan or ACRI)?  
 Supervisory Narrative

14. If visitation frequency was anything less frequent than weekly, is there documentation of a determination that weekly visitation was NOT in the child's best interests? [Dropdown]

15. In the reviewer's opinion, if visitation frequency was less than weekly, was the frequency of actual visitation sufficient to ensure the continuation of the relationship? [Dropdown]

16. If visitation is not in compliance with expected frequency, what was primary barrier? [Dropdown]

17. If other visitation barrier, please specify. [Text Area]

1. **Record Number:** *Do Not Enter a Number in this field, Access automatically assigns each record a number when info is entered on the form.*
2. **Target Child Case ID:** *Enter the target child's family/case LINK number.*
3. **Review Date:** *Insert the day the review is being completed.*

4. **Reviewer Name:** Enter the name of the person completing the review(Last, First)
5. **Target Child Person ID:** Enter the target child's LINK Person ID number.
6. **Target Child Name:** Enter the target child's name. (Last, First)
7. **Sibling Person ID:** Enter the sibling's LINK **Person** ID number.
8. **Sibling Name:** Enter the sibling's name (Last, First)
9. **PUR Start Date:** Pick date from the calendar. The PUR begins either on 10/1/14 (no earlier), or the date which the target child entered into the Department's care and custody if after 10/1/14. If the child was in care prior to the PUR, choose 10/1/14.
10. **PUR End Date:** Pick date from the calendar. If the child is still in care at the time of the review, the end date is 6/30/15. If the child left care prior to 6/30/15, choose the date he/she left the Department's care and custody.
11. **What was the expected frequency of visitation for this pair across the majority of the timeframe?** Choose one option: More than Weekly, Weekly, Bi-Weekly, Monthly, Bi-Monthly, Quarterly, Semi-Annually, Annually, None. Once you make your choice, click back in the box and make sure that the answer has a black background. For example:

11. What was the expected frequency of visitation for this pair across the majority of the timeframe?

More than Weekly

**If it is not highlight it will NOT save your answer!**

12. **Does typical pattern of actual visitation meet or exceed the expected frequency across this time period?** Check if Yes.
13. **Where did you find the documentation of the expected frequency of visitation?** (if in the Case Plan or ACRI and other locations as well, ALWAYS choose Case Plan or ACRI. If not found in the Case Plan but it's in the ACRI AND other locations, choose ACRI.) Choose one option: Supervisory Narrative, Managerial Narrative, Teaming Narrative, Legal Narrative, Other Narrative, Case Plan, Visitation Plan, ACRI, None Found. Once you make your choice, click back in the box and make sure that the answer has a black background. For example:

13. Where did you find the documentation of the expected frequency of visitation (if in the Case Plan or ACRI and other locations as well, always choose Case Plan or ACRI)?

Supervisory Narrative

***If it is not highlight it will NOT save your answer!***

14. **If visitation frequency was anything less than weekly, is there documentation of a determination that weekly visitation was NOT in the child’s best interests?** Choose *Yes, No, or N/A*
  
15. **In the reviewer’s opinion, if visitation frequency was less than weekly, was the frequency of actual visitation sufficient to ensure the continuation of the relationship?** Choose one: *Yes, No, N/A. Choose N/A if visits were weekly or more than weekly.*
  
16. **If visitation is not in compliance with expected frequency, what was primary barrier?** Choose the option that is most prevalent during the majority of the PUR. Choose one option: *Child AWOL/Runaway, Child Refuses to visit, Unknown/UTD, Other, N/A, Transportation, Child Illness, Inclement Weather, Parent Refuses/Unavailable*
  
17. **If “Other” barrier, please specify:** *Specify the barrier if “Other” barrier was chosen.*

**Access saves entered data automatically on the form. When complete, reviewers may exit the form by clicking on the Main Switchboard tab to enter another data entry form or click the arrow with the orange asterisk (see screen shot below) to open a new record in the current data form the reviewer is using.**

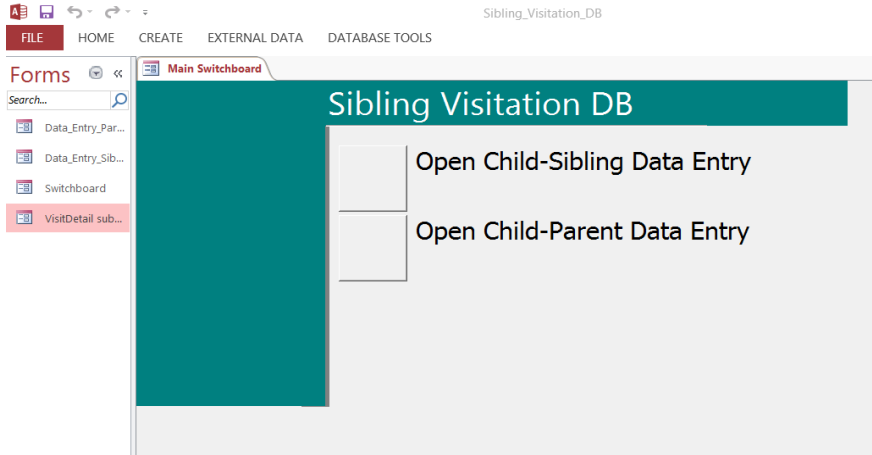


**Reviewers may also find previously entered records by typing the name of the child in the “Search” box as shown to the right of the arrow above. Records may be edited at any time. Use caution when scrolling through records, if you use the scroll roller on the mouse you could change fields on the tool that is currently open.**

## ACCESS - Parent Visitation Data Entry Form

- If you are not reviewing any siblings for the target child, YOU DO NOT FILL OUT A PARENT TOOL!
- Complete 1 form for the target child and his/her parent(s).
- Form contains Parent 1 and Parent 2 info, if more than two parents choose the Primary two parents for the review.

### Click on “Open Child-Parent Data Entry”





1. RecordNumber:  2. ReviewDate:

3. TargetChildCaseID:  4. ReviewerName:

5. TargetChildPersonID:  6. TargetChildName:

7. PrntGrdn1NOTApplicable

8. Prnt1PersonID:  9. Prnt1Name:

10. PUR Start Date:  11. PUR End Date:

12. Expected Frequency for this Child and Parent1 Across Majority of Timeframe

13. Does the typical pattern of visitation with Parent 1 that actually occurred match that which was expected during this Episode? Check if "Yes."

14. Where in LINK did you find documentation concerning the expected frequency of visitation between the child and Parent 1?

15. What was the primary barrier to meeting visitation expectations with Parent 1?

16. If "Other" barrier, please specify:

17. In the reviewer's opinion, was the frequency of the acutal visitation sufficient to ensure the continuation of the relationship?

1. **Record Number:** Do Not Enter a Number in this field, Access automatically assigns each record a number when info is entered on the form.
2. **Review Date:** Insert the day the review is being completed.
3. **Target Child Case ID:** Enter the target child's family/case LINK number.
4. **Reviewer Name:** Enter the name of the person completing the review. (Last, First)
5. **Target Child Person ID:** Enter the target child's LINK **Person** ID number.
6. **Target Child Name:** Enter the target child's name. (Last, First)
7. **Parent1NOTApplicable:** Check only if parent is NOT APPLICABLE.
8. **Parent 1 Person ID:** Enter the parent's LINK **Person** ID number.
9. **Parent Name:** Enter the parent's name. (Last, First)

10. **Parent 1 Start Date:** *Select a date from calendar. The PUR begins either on 10/1/14 (no earlier), or the date which the target child entered into the Department’s care and custody if after 10/1/14. If the child was in care prior to the PUR, choose 10/1/14.*
11. **Parent 1 End Date:** *Select a date from the calendar. If the child is still in care at the time of the review, the end date is 6/30/15. If the child left care prior to 6/30/15, choose the date he/she left the Department’s care and custody.*
12. **Expected Frequency for this Child and Parent Across Majority of Timeframe:** *Choose one option: More than Weekly, Weekly, Bi-Weekly, Monthly, Bi-Monthly, Quarterly, Semi-Annually, Annually, None.*
13. **Does the typical pattern of visitation with Parent 1 that actually occurred match that which was expected during this episode?** *Check if Yes.*
14. **Where in LINK did you find documentation concerning the expected frequency of visitation between the target child and Parent 1?** *(If found in the Case Plan AND other locations as well, always choose Case Plan. If not found in the Case Plan but it’s in the ACRI AND other locations, choose, ACRI.) Choose one option: Supervisory Narrative, Managerial Narrative, Teaming Narrative, Legal Narrative, Other Narrative, Case Plan, Visitation Plan, ACRI, None Found. Make sure that when you choose your answer, you click in the box and the answer is highlighted in black.*

14. Where in LINK did you find documentation concerning the expected frequency of visitation between the child and Parent 1?

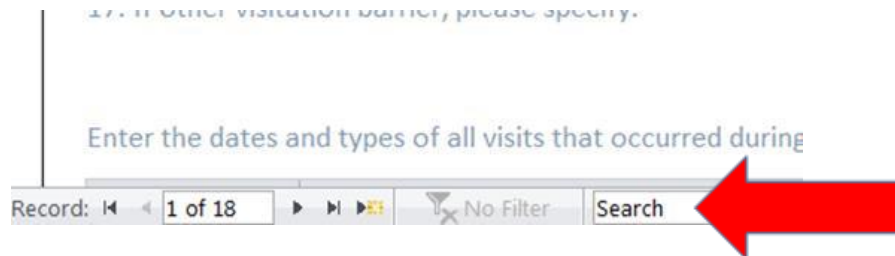
Legal Narrative

***If it is not highlight it will NOT save your answer!***

15. **What was the primary barrier to meeting visitation expectations with Parent 1?** *Choose one: Child AWOL/Runaway, Child Refuses to visit, Unknown/UTD, Other, N/A, Transportation, Child Illness, Inclement Weather, Parent Refuses/Unavailable*
16. **If “Other” barrier, please specify:** *Specify the barrier if “Other” barrier was chosen.*
17. **In the reviewer’s opinion, was the frequency of the actual visitation sufficient to ensure the continuation of the relationship?** *Choose: Yes, No, N/A*  
*Reviewers should consider all of the documentation to answer this question. Including ACRI and other family feedback documented during the PUR first for any statements that the parent(s) has made regarding visitation. If the parent has made a statement that visitation is occurring as planned but the actual visits are not documented, the reviewer may feel that the visits are sufficient based on what the parent(s) report.*

## Editing Cases

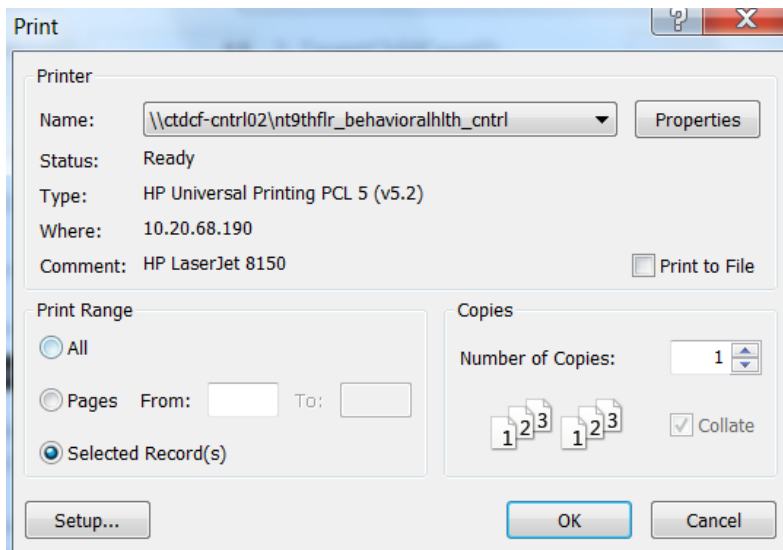
You can find your cases by typing the first or last name of the child in the “Search” box on the bottom of the page and hitting “Enter” on your keyboard.



After you’ve finished a case and exit, please re-check it to make sure it saved all of your information. Some of the reviewers are taking screen shots of their forms once they are done.

## Printing ACCESS Forms

- Go to the form you wish to print
- Click on “File” on the top of the tool bar
- Then “Print” on the Navigation bar
- Then “Print” in the middle of the page
- Then “Selected Record”



## Social Worker/Social Work Supervisor Contact: Phone/Email

In order to supplement the electronic record review the process will now include contacting the area office staff (social worker/supervisor) if the actual visitation is less than the expected

frequency. It is understood that you have already reviewed cases, we are asking that you go back to those cases and if you need to contact the social worker based on the **criteria below**, please do so. A phone call script and email template are presented at the bottom of this document to provide you with guidance.

ORE has informed the leadership from the Area Offices that reviewers will be contacting social workers/supervisors requesting information regarding child visits.

The excel worksheets you are sent with case assignments have the SW and SWS listed on the right side of the sheet.

**Contact Criteria:** If the reviewer comes across a case in which the actual visitation is less than the expected frequency, reviewers are to call the social worker for the case to inquire about the visitation. The reviewer will ask the social worker what the average frequency of visitation was during the PUR for the target child and their parent(s) and sibling(s). If the social worker isn't available an email is to be sent, CC'ing the Social Work Supervisor. Make sure you are contacting the Social Worker who had the case during the PUR. The currently assigned SW may be different from the one who had the case during the PUR.

If the reviewer had to contact a SW for a case, please highlight this case in YELLOW in the worksheet you've saved with the case assignments. We will collect this information when the review is completed.

If the social worker states that the frequency of actual visitation meets or exceeds the expected frequency, we are to "Check" the box for question #12.

12. Does typical frequency of actual visitation meet or exceed the expected frequency across this time period? (check if YES)

...and question #13 for the Parent form (make sure you obtain information **for Parent 1 AND Parent 2**, if applicable)

13. Does the typical pattern of visitation with Parent 1 that actually occurred match that which was expected during this Episode? Check if "Yes."

**PHONE CALL: Below is an example of how to possibly start the conversation:**

"Hi, this is (Name) from the (ORE, CM's office, AO QI) and I conducting a case review for the legislature regarding child visitation with siblings and parents for the timeframe of October 1, 2014 – June 30, 2015. The \_\_\_\_\_ case that is assigned to you was selected for review. I've

already reviewed the electronic record for the target child \_\_\_\_\_ but was calling to confirm the following information:

I see the frequency for (child's name) visits with (Parent or sibling's name) was (weekly, monthly, etc) so can you tell me what the actual visitation frequency was and whether or not they were supervised, by whom if they were and where they occurred? I understand that some of the visits may have different scenarios but typically, how were those visits conducted?"

- Please keep in mind that we are not providing any type of case consultation or directives, we are only confirming/obtaining information to determine the visitation frequency in order to complete the tools.
- If the person is not there, leave a message stating that you will be sending an email and CCing his/her supervisor.

## EMAIL TEMPLATE

**To: Social Worker**

**CC: Social Work Supervisor**

**In Re: Case Name, LINK#, Target Child**

Good morning/afternoon,

The Office for Research and Evaluation (ORE) has been assigned to coordinate the legislatively required Child Visitation with Parents and Sibling report. ORE is in the process of conducting case reviews in partnership with the Court Monitor's Office and Area Office QI/QA Staff.

In order to ensure that we provide the legislature with an accurate representation of the work conducted by our staff, we are looking for the following information about the case referenced above.

We understand the demands that you have, but it's very important that we have the following questions answered in a timely manner (within 2 business days). Please reply with the answers to the questions below or if it's easier, please contact me at **860-###-####** with the requested information.

The period under review (PUR) for the report is October 1, 2014 – June 30, 2015.

I see the frequency for (child's name) visits with (Parent or sibling's name) was (weekly, monthly, etc) so can you tell me what the actual visitation frequency was and whether or not they were supervised, by whom if they were and where they occurred for each of the individuals listed below? I understand that some of the visits may have different scenarios but typically, how were those visits conducted?"

Sibling 1 Name

Sibling 2 Name (If applicable)

Parent 1 Name (if applicable)

Parent 2 Name (if applicable)

Thank you in advance for your cooperation.

## Appendix D: Sibling Visitation Link Release 15.5

The Sibling Visitation Initiative speaks to law that became Effective October 1, 2014, Section 17a-10a of the Connecticut General Statutes which states, the Department should provide visits once a week for separated siblings of children placed in DCF care and custody. 3 windows in LINK have been changed to satisfy this initiative.

There are exceptions as to when Sibling Visits *do not* need to be captured.

- 1) Siblings live over 50 miles apart of each other
- 2) Commissioner finds that such frequent visits are not in the siblings' best interests

*Exceptions should be documented in the Case Plan and update the Visitation Plan to show No Visitations. No changes made to Case Plan.*

The 3 windows updated are:

### Case Contacts Information Details window

**Case Contacts Information Details**

**Basic**  
Name: DOO, SCOOBY  
Address:  
Phone: ( ) -

**Contact Date**  
Date Contact Occurred: 07/27/2015

**Additional Information**  
Contact Type: Other Contact  
Relative

**Case Contact - Relative**

Relationship:  
Cousin  
Foster Sibling  
Guardian  
Half Sibling  
Maternal Aunt

Parent and Child was removed from the Position/Title dropdown

Half Sibling was added to the Relationship dropdown. There are 5 Sibling values from dropdown that were affected by this initiative: Adoptive Sibling, Birth Sibling, Half Sibling, Foster Sibling, and Step Sibling.

Visitation Plan window

The screenshot shows the 'Visitation Plan' window with the following details:

- Child:** Case Name: MORTISHA ADAMS, Child: WEDNESDAY ADAMS
- Visitor Summary Table:**

Visitor Name	Status	Type	Contact	Frequency	Date Effective
UNICORN, SPARKLE J.	A	V		Weekly	08/01/2013
FosterParent, CC-SP	A	V		BiWeekly	02/01/2015
	A				00/00/0000
- Visitor Information:** Name dropdown menu is open, showing a list of names and relationship types. A red box highlights the relationship types: Birth Parent, Reference Person, Guardian, Paternal Uncle, Birth Parent, and Half Sibling.
- Options:**
  - May Place calls to child
  - May Recieve calls from Child
  - Visits must be Supervised
  - Visitation Rights are Terminated
  - No Visitation
- Supervised by:** Dropdown menu is open, showing options: DCF, Relative, Foster Parent, Congregate Care Provider, Other Agency.

A red-bordered text box is overlaid on the form with the text: "Included Relationship for Active Case Participants and Cont'd Assessment Case".

Case Activity Note window



**Case Activity Note**

Case: MORTISHA ADAMS

**Note Information:**  
 Date Occurred: 07/27/2015

Category: Visitation Contacts

Type: Attempted Face to Face - No Contact

Worker: Child in Placement Visit

**Note(s):**  
 Face to Face Outside of Home  
 Home Visit - Announced  
 Home Visit - Unannounced  
 Other Contact Activity

**Date Occurred:**  
 07/27/

**Text:**  
 Provider Contact with Child  
 Supervised Visit -Congregate Provider  
 Supervised Visit -DCF Social Worker  
 Supervised Visit -Foster Parent  
 Supervised Visit -Other Agency  
 Supervised Visit -Other Relative  
 Supervised Visit -SWCA  
 Unsupervised Visit

Person(s) Contacted:  
 Vegas, CC-SP-Foster  
 ADAMS, HERMAN S.  
 Happy, CC-Multiple CAs  
 Lassie, SP-REL-HHSib

Worker	Date Entered	Author
	07/30/2015	Megan Bishop

w\_cm06\_db\_can 7/30/2015 09:18:34

## Appendix E: Summary of Connecticut's Post Adoption Agreement

Found in the Child Welfare Information Gateway and available online at:

[https://www.childwelfare.gov/systemwide/laws\\_policies/statutes/cooperative.cfm](https://www.childwelfare.gov/systemwide/laws_policies/statutes/cooperative.cfm)

### Connecticut

#### **What may be included in postadoption contact agreements? Gen. Stat. § 45a-715(j), (k)**

A cooperative postadoption agreement shall contain the following:

An acknowledgment by either or both birth parents that the termination of parental rights and the adoption is irrevocable, even if the adoptive parents do not abide by the cooperative postadoption agreement

An acknowledgment by the adoptive parents that the agreement grants either or both birth parents the right to seek enforcement of the cooperative postadoption agreement

The terms of a cooperative postadoption agreement may include the following:

Provision for communication between the child and either or both birth parents

Provision for future contact between either or both birth parents and the child or an adoptive parent

Maintenance of medical history of either or both birth parents who are a party to the agreement

#### **Who may be a party to a postadoption contact agreement? Gen. Stat. § 45a-715(h)**

Either or both birth parents and an intended adoptive parent may enter into a cooperative postadoption agreement regarding communication or contact between either or both birth parents and the adopted child. Such an agreement may be entered into if:

The child is in the custody of the Department of Children and Families.

An order terminating parental rights has not yet been entered.

Either or both birth parents agree to a voluntary termination of parental rights, including an agreement in a case that began as an involuntary termination of parental rights.

The postadoption agreement shall be applicable only to a birth parent who is a party to the agreement. Such agreement shall be in addition to those under common law. Counsel for the child and any guardian ad litem for the child may be heard on the proposed cooperative postadoption agreement. There shall be no presumption of communication or contact between the birth parents and an intended adoptive parent in the absence of a cooperative postadoption agreement.

#### **What is the role of the court in postadoption contact agreements? Gen. Stat. § 45a-715(i)**

If the probate court determines that the child's best interests will be served by postadoption communication or contact with either or both birth parents, the court shall so order, stating the nature and frequency of the communication or contact. A court may grant postadoption communication or contact privileges if:

Each intended adoptive parent consents to the granting of communication or contact privileges.

The intended adoptive parent and either or both birth parents execute a cooperative agreement and file the agreement with the court.

Consent to postadoption communication or contact is obtained from the child, if the child is at least 12 years old.

The cooperative postadoption agreement is approved by the court.

**Are agreements legally enforceable? Gen. Stat. § 45a-715(j), (m)**

A cooperative postadoption agreement shall contain the following:

An acknowledgment by either or both birth parents that the termination of addition to those under common law. Counsel for the child and any guardian ad litem for the child may be heard on the proposed cooperative postadoption agreement. There shall be no presumption of communication or contact between the birth parents and an intended adoptive parent in the absence of a cooperative postadoption agreement.

**What is the role of the court in postadoption contact agreements? Gen. Stat. § 45a-715(i)**

If the probate court determines that the child's best interests will be served by postadoption communication or contact with either or both birth parents, the court shall so order, stating the nature and frequency of the communication or contact. A court may grant postadoption communication or contact privileges if:

Each intended adoptive parent consents to the granting of communication or contact privileges.

The intended adoptive parent and either or both birth parents execute a cooperative agreement and file the agreement with the court.

Consent to postadoption communication or contact is obtained from the child, if the child is at least 12 years old.

The cooperative postadoption agreement is approved by the court.

**Are agreements legally enforceable? Gen. Stat. § 45a-715(j), (m)**

A cooperative postadoption agreement shall contain the following:

An acknowledgment by either or both birth parents that the termination of parental rights and the adoption is irrevocable, even if the adoptive parents do not abide by the cooperative postadoption agreement

An acknowledgment by the adoptive parents that the agreement grants either or both birth parents the right to seek enforcement of the cooperative postadoption agreement

A disagreement between the parties or litigation brought to enforce or modify the agreement shall not affect the validity of the termination of parental rights or the adoption and shall not serve as a basis for orders affecting the custody of the child.

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**How may an agreement be terminated or modified? Gen. Stat. § 45a-715(m), (n)**

The court shall not act on a petition to change or enforce the agreement unless the petitioner had participated, or attempted to participate, in good faith in mediation or other appropriate dispute resolution proceedings to resolve the dispute. An adoptive parent, guardian ad litem for the child, or the court on its own motion may, at any time, petition for review of communication or contact ordered by the court if the adoptive parent believes that the best interests of the child are being compromised. The court may order the communication or contact to be terminated, or order such