Recommendations of the Supervised Visitation Standards Committee

December 2008

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THE INSTITUTE FOR FAMILY VIOLENCE STUDIES

The Institute was established within the Florida State University College of Social Work with a gift from Howell Ferguson in the mid 1990’s. Until her retirement in early 2006, Dr. Sharon Maxwell directed the Institute, most notably developing lasting partnerships with key state, federal, and private entities. These include the Florida Coalition Against Domestic Violence (FCADV), the Florida Council Against Sexual Violence (FCASV), the Leon County Sheriff’s Office, the City of Tallahassee, the Florida Department of Health (DOH), the Florida Department of Children and Families (DCF), and the U.S. Department of Justice.

Dr. Wendy Crook became the Director of the Institute in 2006. She brought a history of professional work in domestic violence, a scholarly focus on issues of gender, inequality, and discrimination, and experience as an administrator in both professional and academic settings to the Institute. Upon Dr. Crook’s retirement in 2007, Karen Oehme, who had served as Clearinghouse director for nearly a decade, was appointed Director of the Institute, and expanded it to include a Law Enforcement Families Partnership, with the collaboration of the Florida Department of Law Enforcement and the Florida Police Chiefs Association. Oehme currently serves as coordinator of the legislatively-mandated Supervised Visitation Standards Advisory Committee, which produced this report.

THE MISSION OF THE INSTITUTE

The endowed Institute for Family Violence Studies has been established within the College of Social Work to:

• Research family violence as it occurs in all age groups, including children, adults, and the elderly.
• Identify and explore related research domains, including Supervised Visitation, homelessness, and women’s issues.
• Disseminate the findings of this research at the local, state, national, and international levels.
• Evaluate the effectiveness of family violence interventions.
• Develop innovative resources for reducing family violence in law enforcement families.
• Analyze legislation addressing family violence issues.
• Develop curricula that strengthen social work studies on family violence.
• Provide continuing education and training opportunities to those working in agencies which provide interventions to those experiencing family violence.
• Serve as a regional Clearinghouse on resources related to family violence.
• Collaborate with the courts, law enforcement, and community organizations on family violence concerns.

AFFILIATED FACULTY

Florida State University faculty who are associated with the Institute include the following:

• **William Bales, Ph.D.,** Associate Professor, College of Criminology and Criminal Justice
  Expertise in correctional practices and programs.
• **Patricia Y. Martin, Ph.D.,** Daisy Park Flory Professor of Sociology
Expertise in women and organizations as well as gender issues.

- **M. Sharon Maxwell, Ph.D., Professor Emerita**
  Expertise in domestic violence, sexual assault, and public policy.

- **Nicholas F. Mazza, Ph.D., LCSW, Dean of the College, and Patricia V. Vance Professor of Social Work**
  Expertise in crisis intervention and the arts in community/clinical practice.

- **Dan Mears, Ph.D., Associate Professor, College of Criminology and Criminal Justice**
  Expertise in domestic violence.

- **Melissa Radey, Ph.D., Assistant Professor**
  Expertise in race/ethnicity, single mothers, social support, and self-sufficiency.

- **Karen Randolph, Ph.D., Associate Professor**
  Expertise in substance use prevention for at-risk youth.

- **Darcy Siebert, Ph.D., Associate Professor**
  Expertise in first responder issues, family violence, and substance abuse.

- **Nat Stern, J.D., John W. and Ashley E. Frost Professor, College of Law**
  Expertise in constitutional law issues, the court system, and policy environment.

- **Martell Teasley, Ph.D., Assistant Professor**
  Expertise in violence in the schools.

- **Linda Vinton, Ph.D., Professor**
  Expertise in elder abuse and domestic violence.

- **Dina Wilke, Ph.D., Associate Professor**
  Expertise in family violence and substance abuse, including substance-abusing mothers in the welfare system.

**INSTITUTE PROJECTS**

**Clearinghouse on Supervised Visitation**

- Technical assistance and training to Supervised Visitation (SV) Programs
- The SV Database
- Liaison to the judiciary, DCF, and the legislature regarding Supervised Visitation

**Domestic Violence Online Tutorials**

- The Intersection of domestic violence and child maltreatment
- Competency-Based Training Manuals for the following: Meals on Wheels Volunteers and other elder services staff; WIC and other nutrition staff; animal abuse investigators; and community central health center staff

**Law Enforcement Families Partnership**

- Training curriculum designed to reduce and prevent officer-related domestic violence
- Resources for law enforcement administrators
- Data and research on disciplinary proceedings against law enforcement personnel

**Florida Domestic Violence Needs Assessments**

**Florida Sexual Violence Needs Assessment**
The Clearinghouse on Supervised Visitation was created in 1996 through an appropriation from the Office of the State Courts Administrator to provide statewide technical assistance on issues related to the delivery of Supervised Visitation services to providers, the judiciary, and Florida’s Department of Children and Families (DCF). Since 1996 the Clearinghouse has received contracts on an annual basis from the Department of Children and Families to continue this important work. In 1998 the Clearinghouse published the first training manual on Supervised Visitation, *A Competency-Based Training Manual for Florida’s Supervised Visitation Providers*, covering the recommended training content for providers developed by the Florida Supreme Court.  The new manual, *A Training Manual for Florida’s Supervised Visitation Programs*, published in 2006, is a completely revised and updated curriculum, available free online.

Since 1996 the Clearinghouse has also produced two newsletters: The Bar & Bench Visitation Report and The Family Visitation Times. The Clearinghouse has produced technical assistance tools, including the 2003 manual *Child Sexual Abuse Referrals: A Curriculum for Supervised Visitation Providers* and the 2004 *Referrals to Supervised Visitation Programs: A Manual for Florida’s Judges*, a curriculum for which judges receive continuing judicial education credit. Two comprehensive administrative guides have been produced and disseminated: *A Toolkit on Monitored Exchange* and *A Toolkit for Collaboration Between Florida’s Colleges and Universities and Supervised Visitation Programs*. In addition, the Clearinghouse has provided on-site training throughout the United States and Canada, conducted telephonic and web-based training for providers, and responded to telephone requests for assistance from providers and the courts across the country. In 2005 the Clearinghouse received funding to create an online database to collect Supervised Visitation data. In January 2007 the first data report, *Florida’s Supervised Visitation Programs: A Report from the Clearinghouse*, was published. That report revealed programmatic and administrative details from Florida’s Supervised Visitation Programs.

In 2007, the Florida Legislature amended Chapter 753.03 Florida Statutes to authorize the Clearinghouse to develop new standards for Florida Supervised Visitation Programs to ensure the safety and quality of each Program.

The U.S. Department of Justice’s Office on Violence against Women has also funded the Clearinghouse in the past to provide technical assistance and training to federal Safe Havens Supervised Visitation grantees.

**THE GOALS OF THE CLEARINGHOUSE**

- To contribute to the knowledge base on Supervised Visitation
- To conduct research regarding Supervised Visitation practices
- To provide technical assistance and training to Supervised Visitation providers
- To provide coordination among the court system, social services agencies, and the legislature regarding Supervised Visitation practices and policies
- To monitor and advocate for policies that are supportive of the goals of Supervised Visitation
- To promote Supervised Visitation Program effectiveness
- To raise public awareness regarding Supervised Visitation
ACKNOWLEDGEMENTS

In shaping these recommendations, the Clearinghouse on Supervised Visitation and Florida’s Supervised Visitation Standards Committee drew on the expertise, models, resources, publications, and policies of many organizations and agencies, including the following: the Supervised Visitation Network, the California Administrative Offices of the Courts, the Kansas Attorney General’s Office, the Office on Violence against Women, Praxis International, Safe Haven/Supervised Visitation grantees of the Department of Justice, the National Council of Juvenile and Family Court Judges, the Florida Chapter of the Supervised Visitation Network, the Florida Office of the State Courts Administrator, the Florida Department of Children and Families, the Florida Coalition against Domestic Violence, the Florida Guardian ad Litem Program, and the Florida Council Against Sexual Violence. We are indebted to these groups for the work they have done to protect vulnerable families. We are indebted to these groups, as well as to the many Florida supervised visitation programs who participated in this process, for the work they have done to protect vulnerable families.
Supervised Visitation Programs allow parents who may be a risk to their children or to another parent to experience parent-child contact while in the presence of an appropriate third party. Use of a caseworker, relative, or other third party to oversee such contact has long been recognized as essential in child maltreatment cases in which the child has been removed from the home.

Beginning in the late 1980’s, Supervised Visitation Programs emerged in some states as a service necessary for families experiencing separation and divorce, when conflict between the parents necessitates an “outside resource” to allow the child contact with a parent. Thus, Programs were developed for cases in which a parent is accused of substance abuse, mental health issues, poor parenting, risk of parental abduction, or lack of a relationship with the child. In addition, the epidemic of domestic violence and concern for the safety of the victim and children at visitation has resulted in the creation of Supervised Visitation Programs for family violence cases.

Supervised Visitation Programs may offer a variety of services to enable this contact to occur:

- One-to-one supervision (one supervisor assigned to a single family);
- Monitored exchanges (supervision of a child’s movement between the parents immediately before and after unsupervised parenting time);
- Group supervision (supervision of several families at a time);
- Telephone monitoring (monitoring phone calls from the nonresidential parent to the child);
- Ancillary services, such as parenting education; and
- Therapeutic supervision (mental health professionals providing therapy/counseling to the family during the visit).

Today Florida is at the forefront of the development of Supervised Visitation Programs nationally. The first Supervised Visitation Program in the state, the Family Nurturing Center of Jacksonville, opened in 1993. By 1996, there were 15 Programs in the state. By 2004, over 60 Programs had opened. Currently, every judicial circuit in the state is home to at least one Supervised Visitation Program. No stand-alone Monitored Exchange Programs (which operate without offering supervised visits) exist yet in Florida, though the Committee anticipates the development of these Programs in the near future, as other states have seen a rapid rise in their development.

In January 2005 the Clearinghouse on Supervised Visitation within the Institute for Family Violence Studies funded by the Department of Children and Families, started collecting Supervised Visitation and Monitored Exchange Program and service data in a web-based database. Program-level data include information about the Programs themselves such as location, funding sources, number of employees and volunteers, etc. Service-level data consist of information on clients and the services they receive. As of October 2008, the Florida database housed at FSU holds information on 9,255 cases, 37,119 clients, and 128,803 services representing data entered since January 2005. Included are dependency cases, domestic violence cases, and divorce/paternity cases involving custody disputes.
THE FLORIDA POLICY CONTEXT

Florida’s Model Family Court specifically includes “the utilization of qualified Programs for Supervised Visitation and/or Monitored Exchange” as an essential component of such courts. The Florida Supreme Court’s Family Court Steering Committee developed a skeletal set of standards for Supervised Visitation and Exchange Programs in 1998 to create uniformity in such areas as staff training, terminology, and basic practice norms. Chief Justice Major Harding endorsed the Florida Supreme Court’s Minimum Standards for Supervised Visitation Program Agreements and crafted an administrative order in 1999 mandating that chief judges of each circuit enter into agreements with local Programs that agree to comply with the Standards. The purposes of providing Supervised Visitation expressed by the Standards are, “(1) To ensure the safety and welfare of the child, adults, and Program staff during supervised contact; (2) To enable an ongoing relationship between parent and child by impartially observing their contact in a safe and structured environment and to facilitate appropriate child/parent interaction during supervised contact” (Florida Supreme Court, 1999, p. 3). However, Justice Harding recognized the limited ability of the court system to create and enforce standards for Programs. He wrote to the Speaker of the Florida House of Representatives and to the President of the Senate, saying, in part:

The lack of guidelines or standards for these Programs and lack of oversight of these [Supervised Visitation] Programs, particularly as to staff and visitor safety and staff training, is of great concern … I urge the legislature to consider establishing a certification process, and designate an entity outside of the judicial branch to be responsible for oversight of Supervised Visitation Programs (Chief Justice Harding, November 17, 1999).

LEGALISTIC MANDATE

Chapter 753 of the Florida Statutes was amended during the 2007 Legislative Session to provide for the development of new Standards for Florida’s Supervised Visitation Programs, as well as procedures for certification and monitoring. §753.03 went into effect on July 1, 2007, requiring the Clearinghouse on Supervised Visitation to create an advisory board to assist with the creation of those standards and procedures. The Preliminary Report was submitted in December 2007, and this Final Report is submitted for 2008.

§ 753.03. Standards for Supervised Visitation and Supervised Exchange Programs

(1) Within existing funds from the department, the Clearinghouse shall develop standards for Supervised Visitation Programs in order to ensure the safety and quality of each Program. Standards must be uniform for all the Programs and must address the purposes, policies, standards of practice, program content, security measures, qualifications of providers, training standards, credentials and background screening requirements of staff, information to be provided to the court, and data collection for Supervised Visitation Programs.

(2) The Clearinghouse shall use an advisory board to assist in developing the standards. The advisory board must include:

(a) Two members of the executive board of the state chapter of the Supervised Visitation Network, appointed by the president of the state chapter of the Supervised Visitation Network.

(b) A representative of the Office of the State Courts Administrator, appointed by the State Courts Administrator.
(c) A representative of the department, appointed by the secretary of the department.

(d) A representative of the Florida Coalition against Domestic Violence, appointed by the executive director of the Florida Coalition against Domestic Violence.

(e) A representative of a local law enforcement agency, appointed by the executive director of the Florida Sheriffs Association.

(f) A circuit court judge who presides over domestic violence proceedings, appointed by the Chief Justice of the Supreme Court.

(g) A circuit court judge who presides over dependency proceedings, appointed by the Chief Justice of the Supreme Court.

(h) Two representatives of a Supervised Visitation Program, appointed by the director of the Clearinghouse.

(i) A representative of the Commission on Marriage and Family Support Initiatives.

(j) A representative of the Statewide Guardian Ad Litem Office, appointed by the executive director of the office.

(3) The Clearinghouse, in consultation with the advisory board, shall develop criteria and procedures for approving and rejecting certification applications for and monitoring compliance with the certification of a Supervised Visitation Program. The Clearinghouse shall recommend the process for phasing in the implementation of the standards and certification procedures and the criteria for distributing funds to eligible Programs and designating the state entity that should certify and monitor the Supervised Visitation Programs.

(4) The Clearinghouse shall submit a preliminary report containing its recommendations for the uniform standards by December 31, 2007, and a final report of all recommendations, including those related to the certification and monitoring developed to date, by December 31, 2008, to the President of the Senate, the Speaker of the House of Representatives, and the Chief Justice of the Supreme Court.

COMMITTEE MEMBERS

Pursuant to 753.03, the following Committee members were appointed by their respective agencies:

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INTENT

Beginning in September 2007, the Advisory Committee met approximately four times a month to discuss and draft new Standards. Members of the Committee discovered early on in the process that the Standards would have far-reaching applicability and could ultimately save lives. Thus, the work was undertaken with a sense of urgency and seriousness.

Ultimately the Committee decided on several basic premises that echo throughout the Standards and related Compliance Measures:

1. State government has a basic, but not exclusive, responsibility to ensure the maintenance of an adequate level of service and must address the fact that only a small amount of state monies are currently allocated for Supervised Visitation and Monitored Exchange services.

2. High-quality Supervised Visitation services, with providers who are certified that they adhere to basic standards of practice, must exist across the state.

3. Safety, training, dignity and diversity, and community coordination are the cornerstones of quality Supervised Visitation and Monitored Exchange services.

4. Standards must be attainable for both rural and urban Programs.

5. Because service delivery methods are different from community to community, the Standards must be flexible enough to be applicable to a wide range of Programs.

The Standards are intended to be minimum standards that provide for flexibility and creativity in implementation while maintaining the integrity and potency of a best-practices model, as determined by the Supervised Visitation Standards Committee. Minimum Standards are meant to provide a vision for developing programs and to stimulate the improvement of existing services. In addition, these Standards can help explain and justify expenditures and budget requests to fundraising agencies and funding bodies.

TRANSPARENCY AND DILIGENCE

All of the work of the Committee is outlined by written agendas and memorialized in written minutes which have been posted on the public website for the Clearinghouse ([http://familyvio.csw.fsu.edu/phpBB3/viewforum.php?f=15](http://familyvio.csw.fsu.edu/phpBB3/viewforum.php?f=15)). Meetings and phone numbers were also announced on the website. The work of the committee was frequently and prominently announced in E-Presses circulated by the Clearinghouse each month and in memoranda to directors of Florida’s existing Supervised Visitation Programs. Those stakeholders who would be considered to have the most interest in the process had a monthly opportunity to discuss the Standards in conference calls by the Clearinghouse with Florida directors. In May 2008 the director of the Clearinghouse traveled to the Florida Chapter Meeting of the Supervised Visitation Network to obtain feedback on the developing Standards. In June 2008, the Clearinghouse’s [Bar & Bench Visitation Report](http://familyvio.csw.fsu.edu/phpBB3/viewforum.php?f=15), mailed to judges and stakeholders throughout the state, prominently featured summaries and excerpts of the Standards along with judicial commentary.
The Committee's recommended definition and mission statement for Florida's Supervised Visitation Programs formed the foundation for the entire process. Four guiding principles to help Programs accomplish the mission followed. From these principles flow the Standards of Practice – those tasks that individual Programs must undertake. Compliance measures were then created to ensure that Programs which are eventually “certified” know precisely how to implement the Standards. The work product of the Committee is diagrammed below:
NEW DEFINITIONS

A Supervised Visitation and Monitored Exchange Program is an entity that has as its core function the provision of supervised visitation and/or monitored exchange services, and which has entered into an agreement with the Chief Judge of the circuit in which the Program is located to provide services pursuant to the program agreement and court order. A Program may operate under the auspices of the court, or be a not-for-profit corporation or association, or be a component of a larger not-for-profit corporation or association.

At some point there may be stand-alone monitored exchange programs which do not offer supervised visitation. These Programs may also become certified under the Standards if they have as their core function the provision of monitored exchange services and have entered into an agreement with the Chief Judge in the circuit where the program is located to provide services pursuant to the Program agreement and court order. A stand-alone Monitored Exchange program may operate under the auspices of the court, or be a not-for-profit corporation, or be a component of a larger not-for-profit corporation or association.

Supervised visitation is contact between a parent and a child overseen by a trained third party in a controlled environment which enhances the safety of all vulnerable parties. The contact between the parent and the child is structured so that program personnel may actively encourage the parent-child relationship by providing age-appropriate activities, helping parents develop or enhance parenting skills when necessary, modeling appropriate interactions with the child and discouraging inappropriate parental conduct. Although Supervised Visitation program staff facilitate and support the parent and the child relationship, facilitation and support should not be construed to mean therapeutic intervention rising to the level of a therapist-client relationship.

MISSION STATEMENT

The mission of Florida's Supervised Visitation and Monitored Exchange Programs is to use well-trained staff to provide safe and respectful Supervised Visitation and Monitored Exchange services and to coordinate these services within each community. Programs accomplish this mission by adhering to the following four principles involving safety, training, dignity and diversity, and community.
OVERVIEW OF THE PRINCIPLES

PRINCIPLE ONE: SAFETY

The unique safety needs of individuals are of paramount importance in Supervised Visitation and Monitored Exchange Programs.

Florida’s Supervised Visitation and Monitored Exchange Programs acknowledge that each individual family member in each case may face distinct risks and have unique needs with regard to safety. Programs must be structured and administered in such a way as to identify and meet those needs. In addition, cases may present unique risks to Program staff and volunteers.

PRINCIPLE TWO: TRAINING

All Supervised Visitation and Monitored Exchange personnel must have specific qualifications and skills as well as thorough training on the complex and often overlapping issues that bring families to their Programs.

The families referred to Supervised Visitation and Monitored Exchange Programs may have any number of problems, including, but not limited to, substance abuse, domestic violence, mental illness, child abuse/neglect, and long-term parental absence. In order to provide safe and informed services to these families, Program staff and volunteers must have initial and ongoing training in a wide variety of topics. These Standards are intended to raise the level of professionalism of Programs so that services are provided to vulnerable families by highly trained and knowledgeable staff and volunteers.

PRINCIPLE THREE: DIGNITY AND DIVERSITY

All clients who use Supervised Visitation and Monitored Exchange Programs are entitled to be treated in a fair and respectful manner that acknowledges their dignity and diversity.

Florida's Supervised Visitation and Monitored Exchange Programs must treat individuals fairly and respectfully in ways that acknowledge their life circumstances and cultural backgrounds without ignoring the safety concerns that resulted in the referral to the Program.

PRINCIPLE FOUR: COMMUNITY

Supervised Visitation and Monitored Exchange Programs must operate within a coordinated community network of groups and agencies that seek to address common family problems.

Supervised Visitation and Monitored Exchange Programs do not exist in a vacuum. The families using the Programs often have a constellation of problems with which they need assistance. Supervised Visitation and Monitored Exchange Program staff and volunteers may become aware of family problems that have not been previously identified or addressed by any agencies and, in nonactive dependency cases, they can make referrals and/or provide relevant information whenever possible and appropriate. Programs must also offer and seek cross-training from certain community groups and show some level of participation in agency
networking groups. This coordination will strengthen the entire network of community services and enhance the knowledge of lead Program staff about substantive issues and community agency protocols. The more knowledgeable staff is, the safer families will be.

VISITATION TRAGEDIES SENSITIZE COMMITTEE

While the Committee was working on the Standards for Supervised Visitation and Monitored Exchange Programs, there were at least three tragedies – two in Florida – which sensitized the Committee to the dangerous territory that judges enter whenever they decide issues of visitation in complex cases.

On July 27, 2008, a man using the alias Clark Rockefeller kidnapped his seven-year-old daughter, Reigh Mills Boss, from a Boston Back Bay street during an off-site supervised visitation. The visit supervisor was walking down the street accompanying the father-daughter pair, when a black SUV pulled up, and Mr. Rockefeller jumped in the car with his daughter. The visit supervisor tried to stop the abduction, and was dragged a short way. The driver of the car, Daryl Hopkins, says that he had been hired by Rockefeller before, and this time he was to pick up the father and daughter and take them to Newport, R.I. for an “important meeting.” The national news reported the kidnapping. After his arrest on August 2 (when the child was found unharmed), the FBI and Boston police department confirmed the true identity of the man: Christian Karl Gerhartsreiter, an immigrant from West Germany. Gerhartsreiter is ‘person of interest’ in a double murder and is in police custody. This case raised serious issues regarding “off-site visitation,” which the new Standards address in Principle One: Safety.

The second case occurred in Largo, Florida. According to newspaper reports, 16 year-old Bradley Driscoll was stabbed by his mother in the abdomen and neck during a supervised visit with her in the office of a mental health professional. The monitor was a nurse, who watched in horror as Celeste Minardi allegedly took a decorative dagger and a drywall knife out of her purse and stabbed her son repeatedly. The third case occurred in Cape Coral, when Harold Dunn allegedly shot and killed his estranged wife Christine at a daycare center where their child was enrolled. She had filed for divorce, and the newspaper accounts reflect the fact that he had supervised visitation with their two-year-old daughter, Allyson, in a relative’s home. Although neither of these tragedies occurred at a Supervised Visitation Program, the chilling facts troubled the Committee, which decided to send a strong cautionary message to judges regarding any type of supervision of visitation, not only those cases sent to Supervised Visitation Programs. The committee felt that a two-tiered system that makes Programs adhere to Standards but leaves all other court-ordered visits held elsewhere unprotected by security measures poses grave but often unacknowledged hazards to families and children.

The Committee’s recommendation for Standards regarding the inspection of purses and parcels (under Principle One: Safety) demonstrate the problem quite effectively. The Committee decided that the common practice of prohibiting parents from bringing duffle bags, purses, backpacks, and other similar items into the Supervised Visitation Program should be formalized in the Standards. Thus, the new recommended standard reads:

[All Programs must have] Policies and procedures addressing either the mandatory prohibition or mandatory inspection of all bags, packages, purses, duffels, briefcases, backpacks, and/or any other type of container in which items may be concealed. These policies must reflect staff awareness of the dangers associated with weapons, substances, or other dangerous, illegal, or inappropriate items which may be knowingly or unknowingly brought into Supervised Visitation Programs by participants.
CONCERN ABOUT NON-PROGRAM SUPERVISED VISITATION PROVIDERS

Such a Standard, however, would not have prevented the Largo tragedy from occurring, because the court-ordered visitation took place at a private practitioner's office. The Committee believes that judges can do more to enhance safety and that the Standards and training should be widely regarded as Best Practice whenever Supervised Visitation by a professional is ordered by the court.

Thus, although private counselors and other professionals cannot be certified under these Standards, it is incumbent upon judges to consider the nuanced safety concerns highlighted by these Standards whenever ordering visitation to be supervised. The Committee understands that there are limited resources available in communities and that Programs do not exist in every county; still, judges must be mindful of the complex safety issues involved in ordering supervision of contact between parents and children in domestic violence cases, in mental health cases, and when multiple issues co-occur.

TRAINING ALREADY AVAILABLE BUT UNDER-UTILIZED

Even though Certification under the Standards is not applicable to non-Program providers of supervised visitation (as defined in the Standards), judges should be aware that there are free, easily available resources that can enhance safety through training for everyone who supervises visits, and that the Committee is recommending that these free tools be widely used by all providers of supervised visitation and monitored exchange.

The Clearinghouse on Supervised Visitation already has high-quality material on its website for Programs; this material is referenced in the Standards under Principle Two, Training. It makes perfect sense to the Committee that this same material should be required reading for anyone to whom the court refers a family for supervision. There is a certificate of completion at the end of each manual. Though this is an honor-system curriculum and there is no current funding to regulate compliance, judges can and should require non-Program professionals to read the curriculum before monitoring the first visit. A copy of the Certificate of Completion should be kept in the court file (along with a signed statement by the professional that he/she completed it). Such training will help ensure that non-Program professionals understand the wide range of issues and problems that exist in many families under supervision. Free training, available 24/7 on the internet, is available at http://familyvio.csw.fsu.edu/SV/visitmonitor/index.htm.

A NOTE REGARDING LEGISLATIVELY CHANGED TERMINOLOGY

The Committee is aware of the changes made to Chapter 61 Florida Statutes in 2008 which removes the terms “non-custodial” and “custodial parent,” and adopts the term “parenting time” while eliminating the concept of “visitation.” Due to the unique nature of the supervised visitation process, however, and considering the fact that the term “visitation” was not entirely removed from Chapter 753 Florida Statutes, the Committee decided to omit the term “custodial parent” wherever possible, and define the parties who participate in the visitation process as the “custodian” and the “visitor.” These terms are only applicable in cases of supervised visitation, and are in no way meant to trivialize a parent’s attachment to his or her child. The terms are also narrowly defined in the Definition Section of these Standards.
FORMAL RECOMMENDATIONS
OF THE SUPERVISED VISITATION STANDARDS COMMITTEE

The Committee recommends the following:

I. That the Florida Legislature adopt the Standards and Certification process for Supervised Visitation and Monitored Exchange Programs.

II. That the Florida Supreme Court enter an Administrative Order that adopts the Standards and directs circuit courts that refer cases to Supervised Visitation Programs to enter into written agreements with Programs. The agreements must require visitation programs to abide by the Standards.

III. That the Department of Children and Families continue to fund the technical assistance to all supervised visitation programs in Florida through the Clearinghouse on Supervised Visitation.

IV. That the Legislature keep the Supervised Visitation Standards Committee intact for an additional 12 months to continue work for the next year on refining and implementing the certification process.

V. That the Legislature direct the Department of Children and Families to fund Florida State University’s Clearinghouse on Supervised Visitation in the amount of approximately $65,000 a year for three years to certify programs under these Standards. This amount is separate from the technical assistance provided to all programs across the state. (See Certification Process.)

VI. That the Florida Legislature amend Chapter 753 Florida Statutes to Allow Program Communication with the Court.

Amendments to Florida Statutes Chapter 753 are recommended to allow Programs to alert the Court in writing when there are problems with case referrals and to allow the Court to set a hearing to address these problems.

The Standards encourages Florida’s Supervised Visitation Programs to work in partnership with the court system to protect vulnerable families. Thus, Programs must have access to the Courts. Yet Programs routinely report that they have difficulty accessing the court to report problems related to the Supervised Visitation process, including:

• Parental noncompliance with Program rules, including no-shows and cancellations without cause;

• Children’s unwillingness to participate in visits;

• Parental substance abuse;

• Parental mental illness issues interfering with visits;

• Parental misconduct on-site; and

• Parental misconduct off-site reported to Visitation staff, including but not limited to parental arrests, additional litigation in family/dependency/criminal court, and violations of probation, stalking, and threats.

The difficulty that Programs experience results in congested waiting lists and reduction of services to other families. The Committee seeks to enhance safety, reduce the waste of Program resources, reduce drain on taxpayer dollars, and protect the best interest of children.

However, until Chapter 753 is amended, judges should allow local Programs to alert the court in writing when there are problems with case referrals in cases governed by Chapters 61 and 741. Then Courts should then hold...
hearings, if necessary, to address these problems promptly.

VII. That the Legislature create statutory immunity for Certified Program Staff/Volunteers.

The Committee recommends that Chapter 753, Florida Statutes, be amended to provide a presumption of good faith and immunity from liability for those providing services at Certified Visitation and Exchange Programs. This would be similar to the immunity provisions that currently protect Guardians ad Litem:

“All persons responsible for providing services at a Certified Supervised Visitation or Monitored Exchange Program pursuant to a court order shall be presumed prima facie to be acting in good faith and in so doing shall be immune from any liability, civil or criminal, that otherwise might be incurred or imposed.”

VIII. That Courts and Agencies abide by the following visitation decision hierarchy when referring cases to supervised visitation:

A. In Non-Dependency Cases where the Courts are the primary source of referrals, the Courts are encouraged to adhere to the following recommended hierarchy beginning in October 2009:

1. Courts should prioritize referrals: Whenever a court orders supervised visitation or monitored exchange, the order should refer the parties to a local Certified Supervised Visitation/Monitored Exchange Program if one exists in the community.

2. If no Certified Program exists, or if the existing Certified Program is not able to accept the referral, then the court must indicate this in writing, and then may refer the case to a local mental health professional who has completed the online training and reviewed the Standards. Any professional receiving such a referral should submit a Certificate of Completion for the free online Training Manual for Florida’s Supervised Visitation Programs to the referring judge before the professional can monitor any visits. The training manual is available online for free on the Supervised Visitation Clearinghouse website.

A copy of the Certificate of Completion should be kept in the court file, along with a signed and dated letter from the professional attesting to his or her thorough review of both the online manual (including having completed chapter tests) and the new Standards for Certification.

Submission of a Certificate of Completion by a mental health professional to a judge does not constitute Certification under these Standards. However, completion of the online training curriculum and review of the new Standards does provide professionals with a minimum understanding of the complex dynamics and critical issues regarding supervised visitation and may somewhat better prepare professionals for assuming the responsibility of supervising visits.

If there is no Certified Visitation/Exchange Program, and no available mental health professional to supervise the visit/exchange, the court must indicate those facts in writing before choosing any other form of supervision. The Committee strongly discourages judges from allowing family members or friends to supervise visits. Many cases involve issues of substance abuse, mental illness, threats of parental kidnapping, and/or domestic violence. As the American Bar Association states:

“Orders allowing a family member to supervise visitation or visitation exchanges do not adequately address safety and place the family member at risk of violence or manipulation…. Family members are also more likely to tolerate inappropriate behavior or violations of the visitation order.” American Bar Association Commission on Domestic Violence (POLICY OOA109A) Approved by the American Bar Association House of Delegates at the Annual Meeting in July 2000.
B. In Dependency Cases, referring agencies are encouraged to adhere to the following recommended hierarchy beginning in October, 2009:

Due to the complex dynamics and critical issues involved in visitation, coupled with the often volatile nature of family interactions in dependency cases, the Department of Children and Families, local Sheriff’s Office, Community-Based Care lead agency and/or the Case Management Organization with primary responsibility for the dependency case should adhere to the following hierarchy for supervised visitation between the child(ren) and the parent(s):

1. Whenever a court orders supervised visitation in dependency cases, that court, or the agency with primary responsibility for the case, should refer the parties to a local Certified Supervised Visitation Program if one exists in the community.

2. If no Certified Program exists, or if the existing Certified Program is unable to accept the referral, then the Child Protective Investigator or Case Manager with primary responsibility for the case may supervise the parent-child contact.

   However, prior to being able to supervise any visits after October 1, 2009, all Child Protective Investigators and/or Case Managers who supervise visits must complete a review of the online Training Manual for Florida’s Supervised Visitation Programs and certify to their own agencies that they have read and understand these Standards/Principles. This timeframe gives the Department and Community-Based Care agencies sufficient time to comply with these requirements.

3. If no Certified program exists, or if the existing Certified Program is unable to accept the referral, and the Child Protective Investigator or Case Manager is unable to supervise the parent-child contact, the designated individual with primary responsibility for the case may refer the case to others within that agency to supervise the contact (e.g., interns, other agency staff, transporters, etc.).

   However, prior to being able to supervise any visits after October 1, 2009, all agency staff who supervise visits must complete a review of the online Training Manual for Florida’s Supervised Visitation Programs and certify to their own agencies that they have read and are familiar with these Principles. This timeframe gives the Department and Community-Based Care agencies sufficient time to comply with these requirements.

4. Under no circumstances can the agency that has primary responsibility for the case refer the case to a subcontracting or other agency to perform the supervised visitation service (either on or off-site) unless that subcontracting agency is Certified under these standards. In this circumstance, subcontracting agency staff’s completion of the training manual alone will not be sufficient to supervise visits.

   At some point in the future, the Legislature may require individual mental health professionals who provide supervised visitation and/or monitored exchange services to become Certified under these or similar Standards. However, after considerable discussion, the Committee concluded that such a task was beyond the scope of its current charge.

5. Nothing in this Report prohibits judges from allowing relatives or friends to supervise visits. However, courts should be aware of the potential dangers and safety issues that exist when untrained individuals monitor sensitive cases and volatile families.

IX. That the Florida Legislature enhance security and increase funding for Programs.

   It should be the goal of the State of Florida to fully fund security onsite at Supervised Visitation Programs.
We realize that the state is currently experiencing a severe budget crisis. Still, the call for funding should be made and repeated to emphasize the great need, and to lay the groundwork for future economic assistance to Programs.

These Programs serve a crucial need in the State of Florida, yet cases referred to them present a variety of risks onsite, including:

- The risk of continued domestic violence;
- The risk of parental abuse of substance;
- The risk of one parent stalking another parent;
- The risk of child abuse;
- The risk of parental kidnapping;
- The risk of critical incidents relating to Program rule violations; and
- The risk of re-victimization for parent or child.

Although communities across the state have recognized the need for Supervised Visitation Programs, a stable source of funding for them has never existed in Florida. Federal Access and Visitation funds channeled through the Department of Children and Families has provided $600,000 to approximately 20 Programs annually, but the grant amount of $38,000 cannot fully support any one Program. Still, all 67 counties have sought to develop at least one Program, and currently 63 Programs exist, most facing constant threats to their survival due to lack of adequate funding.

The Committee concluded that in order for at-risk children to have a safe, monitored place to visit with their parents, all Supervised Visitation Programs should have trained staff and on-site security personnel during hours of operation. However, Programs are chronically under-funded and often do not have the budgets to provide such security coverage.

X. That the Legislature statutorily restrict funding so that only Programs Certified under these Standards are eligible for State funding after January 1, 2010.

IMPLEMENTATION AND NEXT STEPS

The Committee acknowledges that the next steps are in the hands of the Legislature, Courts, and the Department of Children and Families in implementing the recommended changes to Florida Statutes 753, including court access and immunity from liability, mandating the implementation of the Standards, adhering to the new Standards, and funding both technical assistance and the certification process.

CONCLUSION

The Committee believes that these recommendations will provide a necessary increase in safety for those families who use Supervised Visitation Programs. The recommendations will also move Programs closer to the ideal of best practice while strengthening their requests for increased state funding and community support.
DEFINITIONS

1. Authorized person is a person authorized by the court to be present, in addition to the visitor, during supervised contact.

2. Chief Judge means the chief judge of a judicial circuit or his or her designee.

3. Child means an unmarried person under the age of 18 who has not been emancipated by order of the court and whose contact with a visitor is supervised pursuant to a court order. Child may mean more than one child.

4. Client is a child or parent or authorized person to whom services are rendered.

5. Critical incident is an occurrence involving any circumstance that threatens the safety of any participant or staff/volunteers, or results in the injury of any participant or staff/volunteers, and/or that requires the intervention of a third party such as child protection services, fire rescue, police, etc.

6. Custodian for purposes of Supervised Visitation and Monitored Exchange only: The custodian is typically the person who brings the child(ren) to the service. This may be a biological or adoptive parent, a relative caregiver or foster parent, guardian, or state agency or its representatives that has temporary or permanent physical custody of a child. A custodian does not have to be a parent.

7. Domestic violence is any form of physical, sexual, verbal, emotional, or economic abuse inflicted on any person in a household by a family or household member.

8. Facilitation or supportive/educational visitation refers to the means by which program personnel actively encourage the parent-child relationship, and should not be construed to mean therapeutic intervention rising to the level of a therapist-client relationship.

9. Florida Clearinghouse on Supervised Visitation is the entity within the Institute for Family Violence Studies of the Florida State University School of Social Work that is the statewide resource on supervised visitation/monitored exchange issues by providing technical assistance, training, research, and certification monitoring.

10. Governing authority is a board or other body of individuals responsible for the development and operation of an independent program or the chief judge, in the case of a program operating under the auspices of the court.

11. Group supervision is supervision of parent/child contact in which more than one family is supervised by one or more visit supervisors simultaneously. Group supervision may also be referred to as “multiple-family” supervision.

12. Individual or “one to one” supervised visitation means one visitation monitor/observer for one family.

13. Monitored Exchange Program provides trained staff and volunteers to supervise a child’s movement from one parent to the other parent at the start of first parent’s parenting time and from the first parent back to the other parent at the end of parenting time. Currently all monitored exchange services are offered under the auspices of supervised visitation programs. However, there may at some point be stand-alone monitored exchange programs which do not offer supervised visitation.
14. Off-site supervision is supervision of contact between the visitor and child that occurs away from a site under the control of the program and visit supervisor.

15. Phone monitoring is when the program monitors a phone call between the parent and child.

16. Program Agreement is a written understanding between the court and an independent provider of supervised contact services including, but not limited to, the scope and limitations of the provider’s services, the procedures for court referrals to the provider, and the manner and procedures for communicating with the court. The Program Agreement incorporates the program’s written operational policies and procedures.

17. Security refers to measures put in place to effect safety.

18. Supervised visitation is contact between a parent and a child overseen by a trained third party in a controlled environment which enhances the safety of all vulnerable parties. The contact between the parent and the child is structured so that program personnel may actively encourage the parent-child relationship by providing age-appropriate activities, helping parents develop or enhance parenting skills when necessary, modeling appropriate interactions with the child and discouraging inappropriate parental conduct. Although Supervised Visitation program staff facilitate and support the parent and the child relationship, facilitation and support should not be construed to mean therapeutic intervention rising to the level of a therapist-client relationship.

19. Supervised Visitation and Monitored Exchange Program is an entity that has as its core function the provision of supervised visitation and/or monitored exchange services, and which has entered into an agreement with the Chief Judge of the circuit in which the Program is located to provide services pursuant to the program agreement and court order. A Program may operate under the auspices of the court, or be a not-for-profit corporation or association, or be a component of a larger not-for-profit corporation or association.

At some point there may be stand-alone monitored exchange programs which do not offer supervised visitation. These Programs may also become certified under the Standards if they have as their core function the provision of monitored exchange services and have entered into an agreement with the Chief Judge in the circuit where the program is located to provide services pursuant to the Program agreement and court order. A stand-alone Monitored Exchange program may operate under the auspices of the court, or be a not for profit corporation, or be a component of a larger not-for-profit corporation or association.

20. Therapeutic Supervision is the provision of therapeutic evaluation or therapeutic intervention to help improve the parent-child interactions. Therapeutic supervision may only be provided by order of the court and only by licensed mental health professionals who are also specifically trained to provide supervised visitation.

21. Visitation Agreement is a written agreement between the program and each custodian and visitor including, but not limited to, specific rules, responsibilities, and requirements of the program and the consequences of failing to abide by the same. The visitation agreement shall also advise the clients that no confidential privilege exists as the program’s records, except as provided by law or order of the court.

22. Visitation Monitor/Observer is the individual trained and authorized by a program to observe the contact between the visitor and the child, to facilitate, intervene and terminate any contact, and to document such observations, as provided by the program agreement and the Standards. A visit monitor/observer may also be called a “visitation specialist” or some other term defined by the Program’s Policies and Procedures.

23. Visitor may refer to a biological or adoptive parent or other adult authorized by a court order to have supervised contact with the child.
PRINCIPLE ONE: SAFETY

The unique safety needs of individuals are of paramount importance in Supervised Visitation and Monitored Exchange Programs.

Introduction: Florida's Supervised Visitation Programs acknowledge that each individual family member in each case may face distinct risks and have unique needs with regard to safety. In addition, cases may present unique risks to Program staff and volunteers. Below is a brief description of how three different types of referrals may require different safety considerations at Supervised Visitation Programs. Programs must be structured and administered to meet these and other unique safety needs.

Domestic Violence: In domestic violence cases, the safety needs of the victim parent and child are paramount, and must be met before all other considerations. In addition, each victim and child may have interconnected and/or distinct needs. For example, the victim parent needs to be separated from the battering parent; the child may affirmatively seek contact with the battering parent, and may only want the abuse (not the parent-child relationship) to end. Both the victim parent and child (depending on the age of the child) may need a safety plan and a plan for addressing the needs of the family. Staff must be thoroughly trained in the complex dynamics of domestic violence, including stalking behavior, power and control issues, and batterer manipulation of staff.

Disability: In a case of child disability, the parent may need a great deal of staff support to facilitate the visit, and the child’s safety needs may limit the activities available in the visit. There may be no family violence, but instead issues of parental stress, neglect, or other dynamics that staff must address. Safety in these cases may specifically refer to accommodating the child’s physical abilities, limitations, and health considerations, and supporting the visit to enhance parenting skills, if appropriate.

Mental Illness: In cases of parental mental illness, the parent’s behavior may be erratic or unpredictable, especially when prescribed medications are not taken as directed. Enhancing safety will entail staff visually assessing the parent at each visit with a basic understanding of the illness and its manifestations, inquiring as to whether the parent has taken medication as directed, and watching for specific behavior which may indicate that the child is in danger.

THE STANDARDS

Overview: Supervised Visitation Programs must be designed, developed, and administered with safety in mind; cases must be thoroughly assessed, and risks present for participants must be considered prior to the first visit. Programs must only accept cases in which they have considered and can reasonably address the safety needs of parents and children. It is important to note that a Program can enhance, but cannot guarantee, safety; adult clients remain responsible and accountable for their own actions.

Because there is a high level of family violence in supervised visitation cases, the Safety Standards will apply to all cases to protect all participants in the visitation process unless otherwise indicated, regardless of whether the case originates as an Injunction for Protection Against Domestic Violence, a Dependency Case, a Dissolution of Marriage/Modification Case, or some other type of litigation. Special and distinct protections exist for cases involving child sexual abuse.
The Standards for Principle One are organized so that Programs which offer supervised visitation (either with or without the additional service of monitored exchange) must follow all of the provisions from I – XVIII in this Principle. Any free-standing Monitored Exchange Programs which operate without a visitation component must follow all of the provisions from XIX – XXXI.

Principles Two (Training), Three (Dignity and Diversity), and Four (Community) apply equally to both Supervised Visitations and Monitored Exchange Programs, except where specifically noted.

I. All Programs must have (and must provide to participants) written policies on topics that relate directly and indirectly to safety.

A. Participants in the visitation process must be informed as to Program procedures. Participants who are knowledgeable and familiar with these procedures may be more likely to consider themselves as partners in the visitation process, making the process safer.

B. Programs must have comprehensive written operating policies and procedures available for viewing by participants, which shall include, at a minimum:

- types of services, hours of operation, fee schedule;
- case referral procedures;
- danger assessment for all referral types;
- intake, acceptance, and discharge policies;
- confidentiality policies;
- procedures for communication with the court, including how the Program and the court will avoid impermissible ex parte communication;
- policies and procedures for documenting observed behavior;
- policies and procedures regarding record retention and release of information;
- procedures for providing reports to the court;
- policies on transportation of children;
- security measures and emergency protocol and/or procedures;
- special policies for sexual abuse allegations;
- gift-giving policies;
- participant grievance procedures; and
- employment policies and policies governing the acceptance and discharge of volunteers, including: non-discrimination policies regarding the employee or volunteer's race, religion, gender, sexual orientation, national origin, age, disability, marital status; and policies that comply with the laws and regulations governing fair employment practices.
C. All Programs must provide referring sources – including the courts, Community-Based Care Organizations or other Child Protection Agencies, and any other agency from which they accept referrals – with copies of the above. Any changes made to a Program’s role, function, operational policies and procedures, and/or capacity that affect the Program’s services must be reported to courts, referring agencies, and clients immediately.

Compliance Measure:

All Programs must have these comprehensive policies. Copies or explanations of these comprehensive policies and procedures must be provided or accessible to all participants and referring sources. Each case file must reflect signatures and the date on which the participants were given or informed of the policies and procedures. If Programs change their operation, policies, procedures, or capacity, copies of written notices to the courts and referring agencies must be kept on file.

II. The physical layout of the Program premises must be designed to meet the safety and comfort needs of participants.

Programs should be able to demonstrate that they have considered safety with regard to such elements as interior and exterior lighting; access to separate entrances/exits and waiting rooms; bathroom facilities that can be monitored; visibility of parking lots; compliance with local fire and handicapped accessibility codes; physical, auditory, and visual separation of the parents on the premises; child-proofing safety measures; and flow of participant foot traffic through the Program. Programs should also be able to demonstrate that they have considered the comfort needs of participants with regards to such elements as child-sized furniture and child-friendly and culturally diverse décor, toys, and activities.

Compliance Measure:

All Programs must keep a written premises safety and comfort plan, checklist, consultation, or log describing compliance with this Section.

III. All Programs must have agreements and orders required for referrals.

A. Overview on how Visitation Programs receive cases.

Depending on individual Program policies, referrals to Supervised Visitation Programs may be made by the court, from a child protective agency that has taken custody of a child, or from some other organization which works with families. The majority of cases will result from these court orders and child protective agency referrals. A small number of cases, however, may result from self-referrals. Programs do have the discretion to accept self-referred cases under some circumstances.

1. Agreements with the Court: If a Program receives court referrals, it must have an Agreement with the Court in the circuit in which the Program is located which specifies the scope and limitations of the provider’s services, the local procedures for court referrals, and the manner and procedures for communicating with and providing reports to the court. The Agreement with the court must
confirm compliance with these Standards. Such an agreement may also be more prescriptive than these Standards, but may not be less so. Annual Affidavits of Compliance with these Standards must also be kept on file with the Circuit Court in which the Program is located.

2. **Agreements with Child Protective Agency:** If a Program receives referrals involving cases of child sexual abuse from the Department of Children and Families and/or one of its Community-Based Care provider agencies, the Program must have an Agreement with the Court and current affidavit of compliance on file with the Chief Judge of the circuit in which the Program is located, affirming that the Program has agreed to comply with these Minimum Standards. The Program must also have a written Agreement with the Court and with the department that contains policies and guidelines specifically related to child sexual abuse.

**B. New Uniform Court Orders are Required.** (Sample Court Orders and a Supervised Visitation Program Standard Dependency Referral Form are included in the Appendix.)

Programs must use a consistent Program Order: one for non-dependency cases and one for dependency cases. Programs will have the option of using the Standard Court Orders included in the Appendix, or they may use their own Orders which contain substantially similar information as the Standard Court Orders contained herein. Any time a court or Child Protective Agency (DCF/CBC) refers a case to a Visitation Program pursuant to active litigation involving the family, a Standard Court Order (or a Program order containing substantially similar information as the Standard Court Order) must be used, even if the original order is embedded in some other document or order, including but not limited to a Final Judgment of Dissolution, an Injunction for Protection Against Domestic Violence, an Adjudication of Dependency, or orders on Motions or Petitions.

The Standard Court Order for Dependency Cases (or a Program Order that contains substantially similar information) contains a provision that the DCF/CBC must complete a Supervised Visitation Program Standard Dependency Referral Form in dependency cases. The Supervised Visitation Program must not conduct the first visit in any dependency case until the Standard Referral Form (or a Program form that contains substantially similar information) is completed and received by the Program.

**C. Out-of-Circuit Referrals and Courtesy Monitoring Must Follow Policies.**

The Program shall have the sole discretion to accept or decline a case referred by any court or agency from another jurisdiction. When such cases are accepted, the Program must direct all communication to the referring court.

**D. Self-Referrals Must Follow Specific Procedures.**

Supervised Visitation Programs may, at their discretion, accept a self-referred family or a family referred by some other agency without a court order if there is no current civil litigation or criminal action involving the parents and/or their children. An agreement signed by the parents is required to accept these cases. If at any time a civil or criminal action is filed by or regarding the parties relating to the children, the Program must obtain a court order to continue visits. (This does not include orders for child support.)

In addition, if, at the time of the Program's initial intake of a self-referred case or at any other time during the course of the supervised visits in these cases, a parent or child alleges there is domestic violence in the family, or the Program otherwise learns of a history of domestic violence, then additional steps must be taken. The Program must conduct an additional safety evaluation (in addition
to the danger assessment required in every case) to ensure that the case can be accepted or continued without a court order.

This additional safety evaluation will entail the following: the Program must meet with each parent individually to assess safety considerations, power imbalance, manipulation, or other potentials for risk to the victim or the children during the visits. Without revealing party-identifying information, the Supervised Visitation Program must consult with a Certified Domestic Violence Center or a Certified Sexual Assault Program regarding the case to identify any additional safety concerns. If neither of those programs is available for consultation, then the Supervised Visitation Program may consult with a victim-witness expert in the State’s Attorney Office or the local law enforcement agency, or a local mental health professional who has expertise in domestic violence issues and dealing with victims. The goal is for Supervised Visitation Programs is to consult with a local domestic violence expert in self-referred cases to enhance safety. The Program must also inform the victim of the services of the Certified Domestic Violence Center. However, the Program may not require the victim to use the services of the Certified Domestic Violence Center.

After all of the above occur, if no civil or criminal action is filed regarding the parties and their children, and if the Supervised Visitation Program subsequently determines that the case is appropriate for the Program, then the Program may allow the parties to access or continue to access its services. The Supervised Visitation Program shall keep a record concerning the meetings with each parent and the consultation with the Certified Domestic Violence Center.

E. Participants must have an agreement with the Program. (A sample list of Minimum Elements of an Agreement with Participants is included in the Appendix.)

• In all cases, regardless of the referral source, the visiting parents – as well as the custodian in nondependency cases – must sign an Agreement containing assurances that they will comply with the requirements of the Program. This must be communicated in a sensitive, respectful manner.

• Minimum Elements of an Agreement with Participants at Florida’s Supervised Visitation Programs: A Program’s Standard Agreement must contain at least the following, but may contain additional information as well:

1. General Program usage information, such as:
   • The primary purpose of the visit center
   • Hours of operation of the Program, holidays
   • A “hold harmless” clause
   • Prohibitions on firearms and weapons of any kind
   • Building access information (arrival and departure time)
   • Names of all participants who are authorized to visit
   • Specific security protocols and conditions of the Program, including separation of the parties
   • Supervision method / level
   • Information regarding records access
   • Fee and fine information
   • Process of forms, reports, and court correspondence
• Scheduling and cancelling visits, including the Program's discretion to cancel any visit
• Medication and dietary restriction information policies for administering medication

2. Participants must have an overall understanding and agreement with Program rules: The Agreement must also include a provision that the participants have reviewed the Program's visitation rules and understand and will abide by them.

3. Specific additional rules must be included in the Agreement: The Agreement must also contain reminders of commonly relevant issues, including at least:

*For the visitor:*
- policies regarding suspicion of drug or alcohol use prior to or during visit
- policies regarding keeping the child's personal information confidential (where living, phone number, etc.)
- policies regarding sexual abuse allegation cases
- restrictions related to physical space where visit occurs
- policies regarding smoking, pets, cell phones, and cameras
- policies on gifts
- a section for special conditions

*For both the visitor and the custodian:*
- policies designed to keep visual, auditory, and physical separation of the parents
- policies regarding food
- policies regarding corporal punishment
- policies about speaking foreign languages
- policies about any topics or remarks that should not be discussed in the presence of the child
- a section for special conditions
- signature and date of visitor, custodian, and Center representative

Each Agreement must include at least the above elements but can include others at the discretion of the Program.

**Compliance Measures:**

1. All Programs must have a written policy as to the kinds of referrals it will accept.

2. In every individual case file there must be:
   a. A signed court order for supervised visitation (or an order that includes the same information in some other format) if the case is referred by the court or DCF/CBC;
b. A completed Standard Referral Form (or a form that includes the same information in some other format) if the case is referred by DCF/CBC; or
c. A referral from some other agency that assists families, or a self-referral, both with an agreement of the parties.
d. Documentation affirming that visitor and custodian were provided with copies or explanations of the Program’s comprehensive policies and procedures.
e. Signed copies of the Parent’s Agreement with the Program.

3. All Programs must have on file a copy of the current Agreement with the Court, the Agreement with DCF, and annual Affidavits of Compliance.

IV. All cases must be screened using a danger assessment.

A. The Supervised Visitation Standards Committee believes that in order to enhance safety when Programs receive cases that may present heightened risk, all Programs in Florida should be funded to the extent necessary to enable the hiring of law enforcement personnel who are trained in and sensitive to the dynamics of family violence. Unfortunately, although this is an identified need, many Programs do not currently have the resources to allow them that discretion. Thus, although advocating for increased funding to provide security personnel for all Programs and emphasizing that onsite security personnel are an aspirational best practice, the Committee also believes that there are additional steps that can be taken to help enhance security, including staff training and client assessment.

B. Program staff must conduct a comprehensive assessment of each case in order to best evaluate and plan for the unique nature, potential, and degree of risk which each case presents. In order to conduct an appropriate assessment, the Program should obtain identifying and background information relevant to the reason for the referral and any possible risks in each case. Such information must include (i) copies of any protective orders, (ii) current family or criminal court orders involving the parties, (iii) any completed referral forms relating to supervised visitation, (iv) information regarding allegations of domestic violence, physical, or sexual abuse, (v) information detailing any chronic physical or mental health issues of the parent or child in terms of how visitation might be affected, and (vi) any information relating to parental drug or alcohol use that might interfere with visitation.

C. Numerous studies on family violence, including fatality reviews conducted by states in addition to Florida, have resulted in the identification of certain indicators that signify the possibility of an increased risk to victims of domestic violence. These factors include any instances in which:

1. In the past 12 months, there has been an increase in the level of physical or other types of violence in the case.
2. The victim has been choked or the batterer has attempted to strangle her.
3. The victim has been grabbed suddenly and forcefully by the batterer.
4. The victim has been held/pinned down by the batterer.
5. The victim has been shaken or roughly handled by the batterer.
6. The victim has been bitten by the batterer.
7. The victim has been restricted from use of the telephone by the batterer.
8. The victim has been restricted from use of the car by the batterer.
9. The victim has been blamed for the batterer's problems.
10. The victim is currently in a domestic violence shelter or has made other efforts to leave the batterer.
11. The batterer drove dangerously with the victim in the car.
12. The batterer has threatened to kill himself within the past 30 days.
13. The batterer has threatened to kill the victim within the past 30 days.
14. The batterer has threatened to kill the children within the past 30 days.
15. The batterer has criminal charges pending.
16. The batterer has violated a victim's order for protection.
17. The batterer has failed to appear for final hearing or hearing on order for protection.
18. The batterer has threatened to harm or has harmed family pets.
19. The batterer has mental health conditions which may increase violence.
20. The batterer has burned the victim.
21. The batterer has recently acquired guns or knives.
22. The batterer has become more threatening with guns or knives he previously possessed.
23. The batterer has thrown something at the victim.
24. The batterer has stalked or attempted to use surveillance tactics to monitor the victim within the past 30 days.
25. The batterer has threatened to have the victim committed to a mental institution.
26. The batterer has destroyed the victim's personal property (clothing, furniture, personal belongings, or car) within the past 30 days.
27. The batterer has physically forced the victim to have sex.
28. The batterer has tried to stop the victim from seeking help from law enforcement, domestic violence shelter, Supervised Visitation Program, court, or other agencies.
29. The batterer has locked the victim in the home or otherwise imprisoned her against her will within the past 30 days.
30. The batterer has told the victim that he cannot live without her and their children.

Source: Dr. Jackie Campbell / The Danger Assessment / http://www.dangerassessment.com/WebApplication1/default.aspx
It is vital that each Program consider these elements when making a determination as to the level of security necessary in each case in order to help ensure the safety of vulnerable victims and children during supervised visits.

Compliance Measure:

Each file must include documentation that a Danger Assessment was conducted in every case. Assessments conducted by other entities are not considered substitutes for a Program’s own assessment, although a Program is encouraged to review the work of other entities in the case if it has access to such. Copies of existing safety evaluations and Certified Domestic Violence Center consultation completed in self-referred cases which indicate whether domestic violence exists in the family must also be kept on file.

V. Intake must be conducted in all cases. (Sample Intake Elements for dependency and non-dependency cases are included in the Appendix.)

A. Programs must conduct separate intake with both the visitor and the custodian of the child prior to the first visit. [If the child is in out-of-home, non-relative placement, the Program is not required to conduct an intake with the custodian, but will have received a Referral Form from the case manager.]

B. Intake serves several purposes: to collect information relating to the family, the reasons for the supervision, and the resources necessary to effect the supervision; to determine whether the Program will accept or reject the case; to acquaint those whose cases are accepted with Program mission and goals; to familiarize the parents with the services provided and invite them to be respected participants in the process; to discuss the expectations of the parents, as well as the Program’s expectations; to discuss the individual safety needs of the family as well as the cultural, racial, or ethnic considerations or special needs of the family members and discuss how the Program can assist the family; to conduct a danger assessment and enhance participant safety; and to discuss the Program policies as to confidentiality and information sharing.

Compliance Measure:

Each file must contain a copy of the Program’s intake form. To assist Programs in creating their own forms, Standard Intake Elements for Dependency and Non-Dependancy cases are contained in these Standards. The Intake forms must reflect these elements.

VI. All Programs must have case acceptance, rejection, and termination policies.

A. After intake, a Program may choose to accept a case. However, a Program shall decline to accept a case for which it cannot reasonably ensure the safety of all clients, Program staff, and volunteers, including but not limited to the following reasons:
• the nature of the case or client is too volatile;
• visitation supervisors are not adequately trained to manage issues identified in the intake;
• facilities are not adequate to provide the necessary level of security;
• the Program has insufficient resources; or
• a conflict of interest exists.

B. Terminating visits. Programs have the right, at their discretion, to end a visit if any person endangers
the physical or emotional safety of a parent, child, or staff involved in the case. If the visiting parent
engages in inappropriate behavior that may, if continued, compromise safety onsite, then prior to
terminating a visit, the Program’s staff should attempt to redirect or stop the visiting parent’s behavior if
it is safe to do so.

C. Notifying the court. If a case is rejected or services are terminated or suspended for any reason,
Programs shall provide, within three business days, a written Notice informing the court and referring
agency (if applicable) of the reasons why the case was rejected/terminated. If the parties came to the
Program through their own agreement, the Program shall provide a written Notice to them and
their attorneys.

D. Other reasons for termination. The Program has the right, at its discretion, to suspend or terminate
the visitation if the visiting party or child becomes ill; if the child cannot be comforted within the time
period the staff determines to be appropriate; or if one or both of the clients have failed to comply with
the visitation agreement, the directives of the visit supervisor, or the court’s order.

In non-dependency cases, the Program may suspend or terminate visits if any client in the case
continually refuses to pay for services as directed in the court order or referral.

The Program may terminate the visit at the expiration of the time limit set by the parties’ agreement or
by the court. Nothing in this section, however, prevents a Program from allowing parties to obtain an
extension of the court order/referral. Granting such an extension, however, is at the discretion of the
Program.

Compliance Measures:

All Programs must have:

1. Written protocol for rejecting cases; inclusion of this provision in the
Agreement with the Court, reviewed every 18 months.

2. Written criteria for the termination or suspension of visits; written
protocol for notifying the referral source of the termination or
suspension of visits. Proof of review every 18 months.

VII. The Program retains discretion to make decisions.

A Program director retains discretion for making the above determination on case rejection/acceptance/
termination. Even when a Program employs law enforcement personnel to enhance security during visits,
there may be cases which the Program director believes can not be managed safely on-site. The Program director has the discretion to terminate a visit if a parent appears to be under the influence of or impaired by illegal or legal drugs, depending on the risks associated with such drug use.

**Compliance Measure:**

*Program Discretion included in Agreement with the Court, reviewed every 18 months.*

**VIII. Child Orientation must be held in most cases.**

If the child is of sufficient age and capacity, the Program should include him or her in some structured orientation meeting. Child orientation is the process by which staff familiarize the child with the Program, Program staff, safety protocols, and facilities in an age-appropriate and child-friendly manner. The child should also be assured that the involvement of the Program is not the child’s fault. This is not an intake session; the child should not be questioned about the case during orientation.

Any orientation should be presented to the child in a manner appropriate to the child’s developmental stage. Children of a sufficient age and maturity should attend at least part of the orientation without the parent; this will help the child understand that the parent will not be present with the child during the visits.

**Compliance Measure:**

*Written child orientation protocol; copy of child orientation form in each file stating whether Orientation was held, the date on which it was held, or the reasons why it was not.*

**IX. Case Files, Visit Records, Observation Notes, and Reports to the Court must follow specific procedures.**

**A. Case Files (Dependency and Non-Dependency).** A file must be created for each family and kept according to standards of confidentiality. The case file must include at a minimum:

- The Court Order for Supervised Visitation
- Copies of relevant Court Orders, including current Orders concerning parenting, or domestic violence
- The intake forms (including documentation of receipt of Program policy and procedure information)
- DCF/CBC Referrals, if applicable
- Documentation of Program's danger assessments
- Other danger assessments done by separate entities
- Order Appointing Guardian Ad Litem
- Agreement forms signed by the parties
• Copies of all communication regarding the parties
• Records of All Visits
• Documentation of periodic case review if applicable.

B. Records of Parent/Child Visits. A provider must maintain a record of each visit. The record must be factual and must contain at a minimum, but is not limited to:

• Client identifier or case number
• Who brought the child to the parent/child contact
• Who supervised the parent/child contact
• Any additional authorized observers
• Date, time, and duration of parent/child contact
• Who participated in the parent/child contact
• An account of critical incidents, if any. These are called Critical Incident Reports. They must include a detailed description of the incident, who was involved, and what actions were take by the Program. Program staff must document critical incidents and responses to them (including mandatory abuse report) which may include rule violations or attempts to continue abuse, particularly instances in which action is taken by staff (such as terminating a visit) or an outside third party, such as law enforcement. Critical incidents may also be a series of problematic behaviors which may become the basis for a change in the level of monitoring. A simple redirection of a parent during a visit is not a critical incident. Critical Incident Reports must be copied to the Court and the parties within five business days.
• An account of ending, cancelling, or temporarily suspending of the parent/child contact, including the reasons for ending or suspending the contact
• Any failure to comply with the Program’s procedures.
• Cancellations, tardiness, or no-shows, and reasons given by the party for the tardiness, cancellation, and no-shows
• Incidents/suspicion of abuse or neglect as required by law; documentation if a call is made to 1-800-96-abuse
• Visitation Notes of the parent-child interaction, either Summary or Observation Notes as described in Section C below.
• Contact Notes, which are summary accounts of all other contacts by the program staff in person, in writing, by telephone, or electronically with any party, the children, the court, attorneys, or other paraprofessionals or professionals involved in the case. These Contact Notes must be kept in the case file. All entries should be dated and signed by the person writing the Contact Note.

C. Visitation Notes. In addition to keeping basic records of information regarding parent-child contact as described in IX. B. above, Supervised Visitation Programs should have policies and procedures
regarding any other kinds of documentation they may keep about the contact, such as Summary or detailed Observation Notes on the interaction between the parent and child.

**Summary Notes:** Summary Notes provide an overview of the interaction that took place between the parent and child during a supervised visit. The Summary Note must be factual, objective, and absent of any professional recommendations. Unlike the detailed Observation Note, the Summary Note shall not contain a comprehensive list of all behaviors observed between the parent and child. Instead, this report is meant to provide a brief synopsis of the parent-child contact.

**Observation Notes:** Detailed observations, called “Observation Notes,” offer a comprehensive account of events that took place between the visitor and child during visits, signed by the staff member/volunteer who completed the Notes. Observation Notes should include facts, observations, and direct statements, not opinions or recommendations regarding future visitation. When developing policies and procedures governing Observation Notes, Programs should take into account the potential for the Notes to be reviewed by courts, the other parent or his/her attorney, and other outside agencies. All notes should be documented in a way that is sensitive to the cultural identification of the family, the safety needs of vulnerable parents and/or the child(ren), and provisions of Florida law addressing the collection of information about the case and family.

A decision to keep Observation Notes about visits should be based on an Agreement with the Court and/or DCF/CBC as to the Program’s roles and obligations, the safety needs of the parents and children, and the compelling reason for the recording of such details. In the past, Programs have reported numerous instances in which the documentation they have kept has been used later by the parties to gain the upper hand in litigation, to harass the Program, and to harass each other. In addition, descriptions of body language, physical proximity, facial expressions, emotions, eye contact, and interactions may be culturally variable. Therefore, descriptions of such, especially when related by a monitor with a different cultural background, may be interpreted incorrectly. Such experiences have thus led to the following caveat: unless they are specifically required to keep detailed observation notes by the courts or DCF/CBC, which may have a legitimate need for such detail, Programs should consider keeping only summary notes, without lengthy details of activities. The exception to this is in the making and keeping of Critical Incident Reports, which are required to be kept under Section IX. B., above.

**D. Reports to the Court.** The frequency and contents of Reports to the Court are governed by the local Agreements with the Court and/or DCF/CBC as to the Program’s roles and obligations, the safety needs of the parents and children, and the compelling reason for the recording of such details. In the past, Programs have reported numerous instances in which the documentation they have kept has been used later by the parties to gain the upper hand in litigation, to harass the Program, and to harass each other. In addition, descriptions of body language, physical proximity, facial expressions, emotions, eye contact, and interactions may be culturally variable. Therefore, descriptions of such, especially when related by a monitor with a different cultural background, may be interpreted incorrectly. Such experiences have thus led to the following caveat: unless they are specifically required to keep detailed observation notes by the courts or DCF/CBC, which may have a legitimate need for such detail, Programs should consider keeping only summary notes, without lengthy details of activities. The exception to this is in the making and keeping of Critical Incident Reports, which are required to be kept under Section IX. B., above.

**E. Required Language for Observation Notes and Reports.** All Observation Notes or Reports to the Court should indicate that the observations have occurred in a structured and protected setting and
that care should be exercised by any reader in making predictions about how the contacts might occur in a different setting.

F. Parties Requesting Reports at Other Times. The Agreement with the Court/DCF should dictate the Program's policies about releasing information regarding visits/visit files and additional Reports that parties may request. If the Agreement is silent as to such policies, and a party requests any information regarding supervised visitation or any documentation kept in the file outside of the timeframe specified above (every six months) and/or beyond the summary described in “IX. D. Reports to the Court,” above, the party must file a Motion for such, and make a showing of good cause that can be challenged by the other party or the Program. Any resulting court order should direct the Program as to what documentation should be released.

G. Evaluative Reports. Evaluative reports, which provide an assessment that offers professional opinions and recommendations as to the observed contact between the parent and child, are not produced by Florida's Supervised Visitation Programs, except under extraordinary circumstances. Such reports may be completed only by a licensed mental health professional or otherwise qualified professional. Without prior approval from the chief judge or from the court, a Program should not offer a report that provides recommendations or expresses opinions, specifically an opinion about the appropriate future course of access between a parent and child who have been supervised by a Program. The term evaluative should not be confused with an expert evaluation of a minor child provided in accordance with rule 12.363, Florida Family Law Rules of Procedure.

H. Information-sharing policy. Programs should develop information-sharing policies that protect the safety of participants to the greatest extent possible and are consistent with state and federal laws, including mandatory child abuse-reporting laws. Program information-sharing policies shall also comply with Standard X, below.

I. Maintenance of Records. Unless otherwise specified by the court, Programs shall maintain all records for a period of five years from the last recorded activity, or until the child reaches the age of majority, whichever comes first.

J. Destruction of records. Programs should develop policies, consistent with state and federal laws, regarding the destruction of records.

Compliance Measures: All Programs must maintain the following:

1. Copy of current Agreement with the Court and DCF/CBC;
2. Confidential client case files with mandatory documents as outlined in A., B., and C;
3. Copies of redacted reports to the Court when requested for random audit; and
4. Written policies on information-sharing, record maintenance, and destruction of records.

X. All Programs shall have written confidentiality policies to protect the safety of participants.
   A. Internal Confidentiality Policies
Program staff and volunteers shall sign an acknowledgment that they will keep all participant information confidential during their employment with the Program and after they are no longer employed except in certain circumstances, as required in the Code of Conduct in Principle Two. Program employees and volunteers shall refrain from discussing any information about participants outside of the workplace or in the presence of non-Program personnel on-site.

Programs shall keep all case files in a manner to ensure that identifying information is secure and protected from public view.

Programs shall ensure that only appropriate staff members have access to participant information. Programs shall identify which staff members need full access and which staff members need only limited access to participant information to effectively perform their jobs.

Domestic violence cases: Consistent with Florida law, Programs shall keep confidential addresses, school information, and other location/contact information about victims and children in domestic violence cases.

Compliance Measures:

1. **Programs shall have written policies to maintain files in a secure location.**

2. **Programs shall have written policies to identify which staff members have full and limited access to participant information.**

3. **Programs shall have on file copies of dated and signed Code of Conduct for each employee/volunteer/intern with a confidentiality pledge.**

B. Sharing of Information Outside of the Program

Staff and volunteers of Supervised Visitation Programs shall protect the safety of all participants served by the Program by keeping all information about participants confidential, and not sharing this information with any outside person or agency without written consent of the participant, except in the following situations:

- When reporting suspected child abuse or neglect to the appropriate authority as required by law;
- When preparing a Report to the Court, as governed by applicable Program policy;
- When responding to a valid subpoena issued by the parties or the court;
- When reporting threats of harm to self or others to the appropriate authority as required by law;
- When making reports to emergency personnel in an emergency situation;
- When reporting the commission of a crime on-site at the Program;
- When required by a court order, warrant, or other applicable law.

Program staff shall, at intake, explain to participants the confidentiality policy, that it is not absolute, and
the circumstances in which a Program may have to reveal confidential information or provide Program records without consent. Programs shall offer participants a form to sign acknowledging that staff has explained to them the Program’s confidentiality policy and the circumstances in which the Program may have to release confidential information. Programs shall have written consent forms to release information that have expiration dates and designate the information that will be disclosed and the person or agency receiving the information.

Compliance Measures:

1. Written polices stating that Programs must have signed consent from participants to release information, and the circumstances in which a Program may release information without written consent.

2. Form acknowledging that staff explained to the participant the Program’s confidentiality policies and when a Program may release information without consent.

3. Standard consent form authorizing release of information by participants, if applicable.

XI. Periodic case review is essential to enhance safety.

All Programs shall periodically reassess cases and review the safety needs of adults and child(ren) to determine whether the Program is providing the necessary services and level of safety as circumstances may change. Programs are encouraged to frequently inquire as to the safety needs of the parents and child and to adjust services accordingly within available resources and the scope of these Standards.

Compliance Measures:

1. All Programs must have written policies for formal and informal reviews of cases in which visits have been accepted and in which visits are ongoing. Informal reviews may consist of staff’s verbal communication with parents inquiring as to their safety and satisfaction with the visitation process. Indications of informal review of cases must be at least briefly notated in the case file at least every 60 days (although Programs are encouraged to do so more often).

2. All Program Directors or their designees must also conduct and document a formal case review of each individual open case every six months, starting from the date of the first visit in a case until the case is closed. These formal reviews are a quality-assurance check to ensure compliance with these Standards and should include a checklist of elements tracking these Standards. Formal reviews also ensure that Programs are inquiring as to a parent’s safety and satisfaction with the visitation process and are updating address, phone, and contact information, health information, and noting any other relevant
status changes of the parties and child(ren). Formal reviews must be documented, dated, and notated as to the staff who conducted the review.

XII. All Programs must have thorough, written security policies.

A. Supervised Visitation Programs must establish a written protocol or Letter of Agreement with a local law enforcement agency that describes what emergency assistance and emergency call responses can be expected from the local law enforcement agency.

B. In addition, a Program shall have written security policies concerning the following:

• Policies and procedures to screen for risk in each case and for each client.
• Policies reflecting criteria by which services to a family will be terminated or suspended based on the safety needs and risks of the individuals.
• Policies that ensure that the Program is designed and administered in ways to reduce a batterer’s opportunity to continue abuse before, during, and immediately after visits.
• Policies and enforcement of staggered entrance and arrival times for the parents, specifically planned by the staff to meet the unique safety needs of the individuals.
• Policies allowing for a parent to remain on-site in a secure location in circumstances in which the physical needs or safety concerns of the child or parent call for such an arrangement.
• Policies designed to keep parents separated at all times during the visitation process, including intake, interviews, arrival and departure, and the visit itself. This separation must be physical, auditory, and visual.
• Policies on making case acceptance/rejection decisions (these must be communicated to clients and referring agencies).
• Evacuation procedures in case of an emergency, designed with the input of local law enforcement and in compliance with local codes.
• Agreements with local law enforcement including site safety at the Program, emergency responses to calls for help, the physical layout of the building for purposes of immediate intervention or evacuation, a safety plan for the agency and its employees, background screening of clients according to Program protocols, and a plan for the arrival and departure of clients according to their safety needs.
• Policies for responding to, recording, and reporting of critical incidents such as violent, dangerous, or inappropriate behavior of clients.
• Procedures to follow when child abuse is disclosed, known, or suspected, including but not limited to calling the Florida Abuse Hotline at 1-800-96-Abuse.
• Policies for responding to medical emergencies; client, staff, or volunteer injuries; and worker’s compensation procedures.
• Policies for Program staff to report any instance in which a parent threatens, abuses, or stalks the other parent or staff, even if such behavior occurs offsite.
• Policies for communicating with the referring source, including the court, outlining the proper ways in which the court should receive any reports.

• Policies for the safe and appropriate use of any security tools a program may choose to use onsite, such as metal detectors, camera or recording equipment, breathalyzers, or panic buttons.

• Policies for referring parents to community resources in order to help enhance their safety or well-being, including mental health professionals, batterer intervention programs, Certified Domestic Violence Centers, substance abuse treatment, housing information, health care providers, and social services agencies and organizations.

• Policies specifically designed to prevent and respond to the attempted abduction of a child from the Program.

• Policies and procedures addressing parcels/containers brought to the Program by participants. Programs may choose to create a mandatory prohibition or a mandatory inspection of all bags, packages, purses, duffels, briefcases, backpacks, and/or any other type of container in which items may be concealed. Programs should give participants a choice as to whether to leave items at home or have them subject to inspection at the Program. These policies must reflect staff awareness of the dangers associated with weapons, substances, or other dangerous, illegal, or inappropriate items which may be knowingly or unknowingly brought into visitation programs by participants.

C. Security Personnel: See Section on Screening Cases and Danger Assessments. Onsite security personnel are an aspirational best practice (to be used in conjunction with many other safety considerations), although these Standards do not mandate the presence of security.

Compliance Measures:

1. All Programs must have comprehensive policies as described in this Standard, which must be made available to or accessible by all participants (e.g. web access, hard copies, or electronic copies).

2. Each case file must reflect the date on which the participants were given copies or informed of the means to access Program policies and procedures.

3. A Letter of Agreement with local law enforcement must be updated with current signatures from lead officials or their designees at least every 18 months.

XIII. All Programs must have policies to enhance child safety.

Children must not be left unattended with a visitor (their own or any other visitor) at any time during visitation services, except pursuant to court order.

If a child refuses to visit with the visitor in such a way or for such a period of time that it raises concerns that continuation of services may be detrimental to the child's safety and emotional well-being, then a Program must suspend services pending resolution of the issue and notification of the appropriate parties or
referring agencies.

No child shall be physically forced to visit with a parent against his/her will.

No person shall spank, hit, or threaten a child at a Supervised Visitation Program.

The ratio of children to a monitor should be contingent upon:

- The degree of risk factors present in each case;
- The nature of supervision required in each case;
- The number and ages of the children to be supervised during a visit;
- The number of people visiting the child during the visit;
- The duration and location of the visit; and
- The experience of the staff member providing the supervision.

The contact between the visiting parent and the child must be supervised continually one-on-one so that all verbal communication is heard and all physical contact is observed, unless otherwise indicated in the court order.

Programs must demonstrate that they maintain child-safe premises by taking practical precautions such as:

- Check for hazards has been done at "child's eye" level
- Secured electrical wires and outlets are covered
- Emergency phone numbers are posted
- Exits are clearly marked
- Access to premises are controlled and monitored
- Premises are free from toxic material such as lead-based paint
- Children are supervised by adults in parking areas
- Areas are kept clean and unobstructed
- Tap water is 120 degrees Fahrenheit or less
- Space heaters are not used in service areas
- Smoking is not permitted
- Staff is trained in emergency procedures
- Nontoxic art supplies are used
- No adult-size scissors or knives in services rooms
- First aid kit on premises
Programs must allow no whispering, passing notes, hand signals, or body signals. The exception to this rule is the need for use of American Sign Language and the presence of an interpreter trained to supervise visits.

Programs must inform any parent who has parental responsibility or legal custodian under Florida law if, during a visit, there has been an injury to the child, a critical incident during supervised visitation, or an incident that presents a risk to a parent, unless otherwise directed by child protective services, the court, or law enforcement during an investigation.

Compliance Measure:

All Programs must have child safety polices and site practices which reflect the considerations in this section.

XIV. All Programs must have special safety protocols for cases involving child sexual abuse.

A Program must have written policies and procedures for the supervision of cases with allegations or findings of sexual abuse that provide for the safety of all participants using the service. Any Program supervising the parent/child contact when sexual abuse has been alleged or proven must have specific training in child sexual abuse and its effect on children. This is required by Florida Statute 39.0139.

If sexual abuse has been alleged or proven, a Supervised Visitation Program shall:

• Obtain a written order from the court finding that the safety, well-being, and physical, mental, and emotional health of the child is not endangered by the ordered visitation. This court order shall also include specifications from the court of any conditions it finds necessary to protect the child.

• File with the chief judge of the circuit in which the Program is located a current affidavit of compliance and Agreement with the Court and DCF affirming that the Program has agreed to comply with these Minimum Standards.

• Ensure that Program staff who supervise visits or other contact have specific training in child sexual abuse provided through the Clearinghouse on Supervised Visitation and documented in personnel files.

• Require visitation to be supervised by a person who has previously received special training in the dynamics of child sexual abuse.

• Have protocols for obtaining background material on the family prior to the initiation of services.

• Accept only those child sexual abuse referrals for which staff have the requisite background material, training, and security in place to safely monitor contact.

• Decline referrals of child sexual abuse cases when staff lack necessary training or education, when background material has not been received, or when lack of security may allow revictimization of the child.

• Suspend visits in cases when the child appears to be traumatized by the visits or when the individual visiting or having other contact engages in inappropriate behavior or violates Program rules.

• In addition to other safety considerations mentioned in this section, in sexual abuse cases, staff shall:
– Allow no exchanges of gifts, money, or cards;
– Allow no photographing, audiotaping, or videotaping; and
– Allow no extended physical contact with the child such as lap sitting, hair combing, stroking, hand holding, prolonged hugging, wrestling, tickling, horseplaying, changing diapers, or accompanying the child to the bathroom.

Compliance Measure:

All Programs must have written policies regarding cases of sexual abuse on file which reflect the content in this section.

XV. All Programs must have written gift policies.

Each Program must have a written policy regarding gift-giving, and this policy must be shared with parents/visitors prior to the implementation of supervised visitation. Note that there are no gifts allowed in alleged or proven sexual abuse cases.

In developing Program gift-giving policies, the following should be considered:

• The potential for manipulation of the child by the parent through gift-giving;
• The potential for the gift to function as a trigger that reminds the child of prior trauma;
• The opportunity for the parent/visitor to use the gift as a means to communicate with the other parent contrary to court order;
• The socio-economic constraints of some parents, and the possible embarrassment a child may feel when seeing other children receiving gifts at visits;
• The potential for other families to feel as though they must compete with the gifts;
• The fact that, in dependency out-of-home cases, parents are often encouraged to bring toys, clothes, food, etc. to visits with their child(ren);
• The “normal” expectation of a child to receive a gift on or around his/her birthday, or certain holidays;
• The degree to which (if at all) food brought to the visit is to be considered a gift;
• The degree to which (if at all) money, gift cards, or items such as diapers and formula are to be considered gifts, when provided by the parent/visitor for the benefit, care, and/or maintenance of the child.

If Program policy permits gift-giving, the policy must include the following minimum provisions:

• That for the safety of children and other individuals present at the Supervised Visitation Program, all gifts brought for the child must be unwrapped or in a gift bag to allow for staff inspection prior to the visit;
• That any items brought to the visit but not permitted in the visitation room will be secured and returned to the parent/visitor at the conclusion of the visit; and
• That the Program director (or designated staff person) has the authority to prohibit the giving of a gift in any situation where it appears that the gift may be inappropriate, potentially harmful, or disturbing to the child.

• That Program staff will require that the parent/visitor refrain from engaging in any discussions, activities, or giving of gifts that are deemed inappropriate;

• That no electronic devices (i.e., radio, CD players, head phones, tape recorders, cell phones, cameras, MP3 players, etc.) are permitted for use in the visitation room; and

• That, in making the case-by-case determination as to whether or not gift-giving is to be permitted, appropriate weight will be given to each of the following:
  – Input from the non-offending parent;
  – Information obtained from the dependency case manager (if applicable);
  – Information obtained at the time of the initial Program intake;
  – Information gleaned from on-going assessment of the child and parent/visitor.

Compliance Measure:

All Programs must have a written gift policy and must have a consistent, verifiable process in place to ensure that parents/visitors are sensitively apprised of the policy at the time of supervised visitation initiation.

XVI. All Programs must have general and liability insurance for staff and volunteers.

Compliance Measure:

All Programs must have proof of insurance.

XVII. Supervised Visitation Program staff shall not make recommendations as to the custody or long-term placement of the child.

XVIII. Any Off-Site Visitation is subject to increased safety measures and training.

A. Off-Site Visitation: In non-dependency cases, courts sometimes ask Programs to provide supervision of parent-child contact in a setting such as a mall, restaurant, park, or any other location not on the Program's physical site. These visits are called “off-site” visits because, by definition, they are not conducted in a Program site/location. They have the disadvantage of less control, fewer safety precautions, and increased risk of intervening persons and circumstances. For these reasons, many programs do not offer “off-site” visits.

Note: Nothing in this section applies to dependency cases in non-Program referrals governed under Chapter §39 Florida Statutes.
B. General Considerations for Off-Site Decisions

The following considerations apply to off-site decisions:

1. Programs may not be compelled to conduct off-site visits by any referring source, including the courts.
2. Program directors retain the discretion to reject any off-site referral for safety reasons.
3. Cases where there is currently entered a temporary or final order of injunction for protection against domestic violence or where there has been a criminal no-contact order or criminal conviction for domestic violence are not appropriate for off-site visits.
4. Cases in which there are allegations of sexual abuse are not appropriate for off-site visits.
5. Programs must demonstrate that they have considered the risks involved before agreeing to supervise off-site visits.
6. Referring judges must issue written orders for off-site visits and must consider any potential safety risks, including allegations of domestic violence. The order must contain specific findings that off-site visitation is safe for the parties and the child and is in the child’s best interest.

C. Risks Involved

The following is a partial list of risks inherent in off-site visits. The Clearinghouse training materials address these risks more thoroughly.

- Risks of child abduction. An unsecured location with many entrances/exits, open spaces, public access, and/or crowds increases the ability of a parent or his/her cohorts to abduct the child.
- Risks of child abuse. The ability to be vigilant – hear and see everything going on in a visit - is an essential component of supervised visitation, but is severely reduced in off-site visits.
- Slow responses in emergency. Programs have on-site security plans and work closely with local law enforcement to augment safety. The ability to get help quickly off-site may be reduced by the very nature of off-site visits. Staff simply have less control over the setting, intervening factors, and surrounding circumstances.
- Multiple child complications. Having more than one child present increases the possibility that the children will not be appropriately monitored off-site; that if something such as an illness affect one child, all of the staff’s attention must go to that child; that children can distract the monitor’s attention easily, and that there is no backup to assist the monitor as there is onsite.
- Transportation risks. Visit monitors are not permitted to transfer children in their own cars unless the Program provides adequate and specific liability insurance for such transportation. This makes off-site visitation much more likely to involve the transporting parents (who are involved in the dispute) to have an opportunity to negatively interact in the presence of the children. It also increases the risks to non-offending victim parents.
- Concealed weapons risk. On-site, programs choose between prohibiting visitors from bringing packages or parcels to visits, or searching any such parcels brought onsite. This helps avoid the presence and dangers of concealed weapons. Off-site visits offer no such control, as there is no way to secure a public park, mall, or other similar location.
• Intervening emergencies and circumstances. Power outages, storms, intervening adults who show up unannounced (parent’s friends, family, etc), all decrease the monitor’s ability to control the visit.

D. Off-Site Prerequisites

For those communities and Programs that have considered the risks yet have decided to offer off-site visits, the following apply:

1. Programs that offer off-site visits must be certified under these Standards.

2. Off-site visitation can only conducted by staff who have at least three years of experience working with families at an on-site Program.

3. Each off-site referral must be pursuant to a court order which specifically states that off-site visitation is in the child’s best interest.

4. Any Program offering off-site visits must have liability insurance that specifically includes coverage of off-site visits.

5. Separate policies and procedures dealing with off-site security issues must be developed by the Program and must have been part of the certification process. In other words, if a Program becomes certified before it offers off-site services, it must submit to a new review of its off-site procedures before it can initiate off-site services.

6. The Program’s Agreement with the court must include references to all of the above prerequisites (numbers 1-5 of this section).

7. Programs may not circumvent these requirements by referring offsite cases to current volunteers or staff acting as “independent contractors.” All current volunteers and staff must agree not to take cases independently. This must be part of the Code of Conduct. (The Code of Conduct is part of Principle Two: Training.)

Compliance Measures:

All Programs that offer off-site visitation in non-dependency cases must provide the following:

1. Proof of liability insurance which includes a provision for off-site visitation;

2. Copies of court orders in all off-site visits which include a statement that off-site visitation is in the child(ren)’s best interest;

3. Copies of Program policies and procedures specifically dealing with off-site security issues, including those listed in this section and the Program’s right to decline referrals and/or decide not to offer any off-site visitation structure;

4. Copies of Certificate of Completion of Clearinghouse’s “Off-site Considerations” Training; and
5. Copies of the Agreement with the Court enumerating the prerequisite requirements above.

Sections XIX to XXXI Apply to Stand-Alone Monitored Exchange Programs ONLY

XIX. All Stand-Alone Monitored Exchange Programs (without a Supervised Visitation component) must have specific written operating policies and procedures.

Participants in Monitored Exchange Programs must be informed as to Program procedures. Participants who are knowledgeable and familiar with these procedures may be more likely to consider themselves partners in the exchange process, making the process safer.

A stand-alone Monitored Exchange Program must have comprehensive written operating policies and procedures available for viewing by participants, which shall include, at a minimum:

- types of services, hours of operation, fee schedule;
- case referral procedures;
- danger assessment for all referral types;
- intake, acceptance, and discharge policies;
- procedures for communication with the court, including how the Program and the court will avoid impermissible ex parte communication;
- policies and procedures for documenting observed behavior;
- policies and procedures regarding record retention and release of information;
- procedures for providing reports to the court;
- security measures and emergency protocol and/or procedures;
- participant grievance procedures;
- employment policies and policies governing the acceptance and discharge of volunteers, including: non-discrimination policies regarding the employee, intern, or volunteer's race, religion, gender, sexual orientation, national origin, age, disability, marital status; and policies that comply with the laws and regulations governing fair employment practices.

All Programs must provide referring sources with copies of the above. Any changes made to a Program’s role, function, operational policies and procedures, and/or capacity that affect the Program’s services must be reported to courts, referring agencies, and clients immediately.

Compliance Measure:

All Stand-Alone Monitored Exchange Programs must have these comprehensive written policies. Copies or explanations of these
comprehensive policies and procedures must be provided to all participants and referring sources. Each case file must reflect the date on which the participants were given or informed of the policies and procedures. If Programs change their operation or policies/procedures/capacity, copies of written notices to the courts and referring agencies must be kept on file.

XX. The physical layout of the premises must meet the safety needs of participants for the brief period of the exchange. Programs should be able to demonstrate that they have considered safety with regard to such elements as exterior lighting if exchanges are done at night, visibility of parking lots, and flow of other vehicle traffic, as well as pedestrian traffic, through the premises.

Compliance Measure:

All Stand-Alone Monitored Exchange Programs must have a written premises safety plan describing compliance with this Section.

XXI. All Stand-Alone Monitored Exchange Programs must have documentation for each referral.

A. Overview on how Stand-Alone Monitored Exchange Programs receive cases

Depending on individual program policies, referrals to Monitored Exchange Programs may be made by the court or from the parties themselves.

1. Agreements with the Court: If a Program receives court referrals, it must have an Agreement with the Court in which the Program is located which specifies the scope and limitations of the Program's services, the local procedures for court referrals, and the manner and procedures for communicating with and providing reports to the court. The Agreement with the Court must confirm compliance with these Standards. Such an agreement may also be more prescriptive than these Standards, but may not be less so. Annual Affidavits of Compliance with these Standards must also be kept on file with the Circuit Court in which the Program is located.

2. Self-Referrals: Stand-Alone Monitored Exchange Programs may, at their discretion, accept a self-referred family or a family referred by some other agency without a court order if there is no current civil litigation or criminal action involving the parents and/or their children. An agreement signed by the parents is required to accept these cases. If at any time a civil or criminal action is filed by or regarding the parties relating to the children, a court order must be obtained to continue exchanges. (This does not include orders for child support.)

In addition, if, at the time of the Program's initial intake of a self-referred case or at any other time during the course of the monitored exchanges in these cases, a parent or child alleges there is domestic violence in the family, or the Program otherwise learns of a history of domestic violence, then additional steps must be taken. The Program must conduct an additional safety evaluation (in addition to the danger assessment required in every case) to ensure that the case can be accepted or continued without a court order.

This additional safety evaluation will entail the following: the Program must meet with each parent individually to assess safety considerations, power imbalance, manipulation, or other potential for
risk to the victim or children during the visits. Without revealing party-identifying information, the Monitored Exchange Program must consult with a Certified Domestic Violence Center or a Certified Sexual Assault Program regarding the case to identify any additional safety concerns. If neither of those programs is available for consultation, then the Monitored Exchange Program may consult with a victim-witness expert in the State's Attorney Office or the local law enforcement agency, or a local mental health professional who has expertise in domestic violence issues and dealing with victims. The goal is for Monitored Exchange Programs is to consult with a local domestic violence expert in self-referred cases to enhance safety. The Program must also inform the victim of the services of the Certified Domestic Violence Center. However, the Program may not require the victim to use the services of the Certified Domestic Violence Center.

After all of the above occur, if no civil or criminal action is filed regarding the parties and their children, and if the Monitored Exchange Program subsequently determines that the case is appropriate for the Program, then the Program may allow the parties to access or continue to access its services. The Monitored Exchange Program shall keep a record concerning the meetings with each parent and the consultation with the Certified Domestic Violence Center.

Compliance Measures:

1. All Programs must have a written policy as to the kinds of referrals it will accept.

2. In every individual case file there must be:
   a. A signed court order for monitored exchange at the Program;
   b. A referral from some other agency that assists families, or a self referral, both with an Agreement of the Parties to use the Monitored Exchange Program;
   c. Documentation of danger assessment screening in all cases (including a record of safety evaluations and a Certified Domestic Violence Center consultation completed in self-referred cases in which domestic violence may exist in the family);
   d. Documentation affirming that participants were provided with copies or explanations of the Program's comprehensive policies and procedures; and

3. All Programs must have on file a copy of the current Agreement with the Court, the Agreement with DCF (if applicable), and Affidavits of Compliance.

3. Agreements Signed by Parties

In all cases, regardless of the referral source, the exchanging parties must sign an Agreement containing assurances that they will comply with the requirements of the Program. A Program's standard Agreement must contain at least the following, but may contain additional information as well.
B. Minimum elements of an agreement with participants at a Stand-Alone Monitored Exchange Program

Regardless of the source of referral, all participants in all types of cases must sign and date an Agreement with the Monitored Exchange Program prior to the first exchange. Each Agreement must include at least the following elements, but can include others at the discretion of the Program:

General Program usage information, including:

• The primary purpose of the Monitored Exchange Program
• Hours of operation of the Program, holidays
• A “hold harmless” clause
• Prohibitions on firearms and weapons of any kind
• Building access information – arrival and departure time
• Specific security protocols and conditions of the Program
• Information regarding records access
• Fee and fine information
• Process of forms, reports, and court correspondence
• Scheduling and canceling exchanges, including the Program’s discretion to cancel any exchange

Overall understanding and agreement with Program rules: The Agreement must also include a provision that the participants have reviewed and understand the Program’s monitored exchange rules and will abide by them.

Specific additional rules: The Agreement must also contain reminders of commonly relevant issues, including at least:

• Policies regarding suspicion of drug or alcohol use prior to or during exchange
• Policies regarding the requirement of confirming the identity of all exchange participants
• Policies regarding keeping the child’s personal information confidential (where living, phone number, etc.)
• Policies regarding corporal punishment at the exchange site
• Policies about speaking foreign languages (if applicable)
• A section for special conditions, if any
• Signature and date of both parents, and of Program representative.

XXII. Each case must be screened and assessed for potential dangers.

The Supervised Visitation Standards Committee believes that, in order to enhance safety when Programs receive cases that may present heightened risk, all Monitored Exchange Programs in Florida should be funded to the extent necessary to enable the hiring of law enforcement personnel who are trained in and sensitive to the dynamics of family violence to be present during exchanges. However, the Committee also
believes that there are additional steps that can be taken to help enhance security, including staff training and client assessment.

Program staff must conduct a comprehensive assessment of each case in order to best evaluate and plan for the unique nature and potential for and degree of risk which each case presents. In order to conduct an appropriate assessment, the Program should obtain identifying and background information relevant to the reason for the referral and any possible risks in each case. Such information must include (i) copies of any protective orders, (ii) current family or criminal court orders involving the parties, (iii) any completed referral forms relating to monitored exchange, (iv) information regarding allegations of domestic violence, physical, or sexual abuse, (v) information detailing any chronic physical or mental health issues of the parent or child in terms of how monitored exchanges might be affected, and (vi) any information relating to parental drug or alcohol use that might interfere with monitored exchanges.

Numerous studies on family violence, including fatality reviews conducted by states in addition to Florida, have resulted in the identification of certain indicators that signify the possibility of an increased risk to victims of domestic violence. These factors include any instances in which:

1. In the past 12 months, there has been an increase in the level of physical or other types of violence in the case.
2. The victim has been choked or the batterer has attempted to strangle her.
3. The victim has been grabbed suddenly and forcefully by the batterer.
4. The victim has been held/pinned down by the batterer.
5. The victim has been shaken or roughly handled by the batterer.
6. The victim has been bitten by the batterer.
7. The victim has been restricted from use of the telephone by the batterer.
8. The victim has been restricted from use of the car by the batterer.
9. The victim has been blamed for the batterer’s problems.
10. The victim is currently in a domestic violence shelter or has made other efforts to leave the batterer.
11. The batterer drove dangerously with the victim in the car.
12. The batterer has threatened to kill himself within the past 30 days.
13. The batterer has threatened to kill the victim within the past 30 days.
14. The batterer has threatened to kill the children within the past 30 days.
15. The batterer has criminal charges pending.
16. The batterer has violated a victim’s order for protection.
17. The batterer has failed to appear for final hearing or hearing on order for protection.
18. The batterer has threatened to harm or has harmed family pets.
19. The batterer has mental health conditions which may increase violence.
20. The batterer has burned the victim.
21. The batterer has recently acquired guns or knives.
22. The batterer has become more threatening with guns or knives he previously possessed.
23. The batterer has thrown something at the victim.
24. The batterer has stalked or attempted to use surveillance tactics to monitor the victim within the past 30 days.
25. The batterer has threatened to have the victim committed to a mental institution.
26. The batterer has destroyed the victim’s personal property (clothing, furniture, personal belongings, or car) within the past 30 days.
27. The batterer has physically forced the victim to have sex.
28. The batterer has tried to stop the victim from seeking help from law enforcement, domestic violence shelter, Supervised Visitation Program, court, or other agencies.
29. The batterer has locked the victim in the home or otherwise imprisoned her against her will within the past 30 days.
30. The batterer has told the victim that he cannot live without her and their children.

Source: Dr. Jackie Campbell / The Danger Assessment / http://www.dangerassessment.com/WebApplication1/default.aspx

It is vital that each Program consider these elements when making a determination as to the level of security necessary in each case in order to help ensure the safety of vulnerable victims and children during monitored exchanges.

**Compliance Measure:**

Each file must include documentation that a Danger Assessment was conducted in every case. Assessments conducted by other entities are not considered substitutes for a Program’s own assessment, although a Program is encouraged to review the work of other entities in the case if it has access to such. Programs must keep copies of existing safety evaluations and/or Certified Domestic Violence Center consultation completed in self-referred cases which indicate whether domestic violence exists in the family.

XXIII. Intake policies enhance security at monitored exchange programs.

A Program must conduct separate intake with both parents and the child prior to the first monitored exchange. [If the child is in out-of-home, non-relative placement, the Program is not required to conduct an intake with the custodian, but will have received a Referral Form from the case manager.]

Intake serves several purposes: to collect information relating to the family, the reasons for the
monitored exchange, and the resources necessary to effect the exchange; to determine whether the Program will accept or reject the case; to acquaint those whose cases are accepted with Program mission and goals; to familiarize the parents with the services provided and invite them to be respected participants in the process; to discuss the expectations of the parents as well as the Program’s expectations; to discuss the individual safety needs of the family and discuss how the Program can assist the family; to conduct a danger assessment and enhance participant safety; and to discuss the Program policies regarding confidentiality and information sharing.

Monitored Exchange Intake

The new Monitored Exchange Intake Standards require that intake be completed with parents. The following elements should be discussed to ensure the highest level of safety and parental understanding of the exchange process.

1. Address and phone numbers of parent
2. Age(s) and name(s) of child(ren)
3. Names, address, and photographs of children and all adult participants who are authorized to exchange the child
4. Income of parents (if required by Program funders)
5. Marital status of parents
6. Last date of parenting time with children
7. Any special needs of each parent (physical/mental/emotional) which Program staff would need to be aware of prior to exchanges, in order to best accommodate the parent’s needs
8. Determine if there is a history of domestic violence with the required danger assessment
9. Does the child(ren) have any special physical or mental health issues that may be of concern at exchanges?

Reminder

Prior to the first exchange, remind the parents that they are required to attend an intake session with staff prior to the exchange. A photo ID is required at this intake.

Compliance Measure:

All Programs must have a copy of intake forms in each file.

XXIV. Case acceptance, rejection, and termination policies are required at Monitored Exchange Programs.

After intake, a Program may choose to accept a case. However, a Program shall decline to accept a case for which it cannot reasonably ensure the safety of all clients, program staff, and volunteers, including but not limited to the following reasons:
• the nature of the case or client is too volatile;
• the exchange monitors are not adequately trained to manage issues identified in the intake;
• the facilities are not adequate to provide the necessary level of security;
• the Program has insufficient resources; or
• a conflict of interest exists.

**Terminating the exchange.** Programs reserve the right to terminate an exchange if any person endangers the emotional or physical safety of a parent, child, or staff member involved in the case. If any parent engages in inappropriate behavior that may, if continued, compromise safety on-site, the Program staff should attempt to redirect or stop the parent's behavior (if it is safe to do so), prior to terminating an exchange.

If a case is rejected or services are terminated or suspended for any reason, Programs shall provide, within three business days, a written Notice informing the court and/or referring agency of the reasons why the case was rejected/terminated. If the parties came to the Program through their own agreement, the Program shall provide a written Notice to them and their attorneys.

**Other reasons for termination:**

The Program shall suspend or terminate an exchange if the parent or child becomes ill during the exchange process, if the child cannot be comforted within the time period the staff determines to be appropriate, or if one or both of the clients have failed to comply with the exchange agreement, the directives of the exchange monitor, or the court’s order.

The Program may suspend or terminate exchanges if the clients continually refuse to pay for services as directed in the court order or referral.

The Program may terminate the exchanges at the expiration of the time limit set by the parties’ agreement or by the court. Nothing in this section, however, prevents a Program from allowing parties to obtain an extension of the court order/referral. Granting such an extension, however, is at the discretion of the Program.

**Compliance Measures:**

All Programs must have:

1. Written protocol for rejecting cases; inclusion of this provision in the Agreement with the Court, reviewed every 18 months, and

2. Written criteria for the termination or suspension of exchanges; written protocol for notifying the referral source of the termination or suspension of visits; proof of review every 18 months

XXV. Monitored Exchange Programs retain discretion for acceptance, rejection and termination of each case.

A Program Director retains discretion for making the above determination on case rejection/acceptance/termination. Even when a Program employs law enforcement personnel to enhance security during exchanges,
there may be cases which the Program Director believes cannot be managed safely on-site, especially after a problematic exchange has taken place. The Program Director has the discretion to terminate an exchange if a parent appears to be under the influence of or impaired by illegal or legal drugs.

Compliance Measure:

All Programs must have a provision for Program Discretion included in Agreement with the Court and reviewed every 18 months.

XXVI. A case file must be created for each family and kept according to standards of confidentiality.

A. The case file must include at a minimum:

1. Copies of the Court Order, if applicable;
2. The Intake forms (including documentation of receipt of Program policy and procedure information);
3. Documentation of danger assessments;
4. Agreement forms signed by the parties;
5. Copies of any communication regarding the parties;
6. Records of all exchanges; and
7. Documentation of periodic case review, if applicable.

B. Records of Exchanges

A provider must maintain a record of each exchange. The record must be factual and must contain at a minimum, but is not limited to:

1. Client identifier or case number
2. Which parents or authorized persons participated in the exchange
3. Who supervised the exchange
4. Dates, times of monitored exchanges
5. An account of critical incidents, if any; Program staff must document critical incidents and responses to them (including mandatory abuse reports) which may include rule violations or attempts to continue abuse, particularly instances in which action is taken by staff (such as terminating a visit) or an outside third party, such as law enforcement. Critical incidents also may be a series of problematic behaviors which may become the basis for a change in the level of monitoring.
6. An account of ending, canceling, or temporarily suspending of the exchange, including the reasons for ending or suspending the exchange
7. Any failure of the parties to comply with the Program’s procedures
8. Cancellations, tardiness, or no-shows, and reasons given by the party for the tardiness, cancellation, and/or no-shows
9. Incidents/suspicion of abuse or neglect, reported as required by law (1-800-96-Abuse)
10. All entries should be dated and signed by the person recording the entry.

C. Reports to the Court

The frequency and contents of Reports to the Court, which are summaries of the Records of Exchanges, are governed by the local Agreements with the Court and the individual Court Orders for Monitored Exchange, except that no Program will make recommendations as to custody of the children in such Reports.

If current Agreements with the Court do not address Reports to the Court, the following Standards apply:

Reports to the Court must be submitted in each case immediately upon a Critical Incident. Other Reports can be generated pursuant to Program policies, but must also be sent to all parties, their attorneys, and the attorney for the child, if applicable.

D. Information-Sharing Policy

Programs should develop information-sharing policies that protect the safety of participants to the greatest extent possible and are consistent with state and federal laws, including mandatory child abuse-reporting laws. Such information-sharing policy must comply with the confidentiality policies in Standard XXVII that follows.

E. Maintenance of Records

Unless otherwise specified by the court, Programs shall maintain all records for a period of five years from the last recorded activity, or until the child reaches the age of majority, whichever comes first.

F. Destruction of Records

Programs should develop policies, consistent with state and federal laws, regarding the destruction of records.

Compliance Measures:

1. Copy of current Agreement with the Court;
2. Confidential client case files with mandatory documents as outlined in A., B., and C.;
3. Redacted copies of any Reports to the Court for random auditing purposes; and
4. Written policies on information-sharing, record maintenance, and destruction of records.
XXVII. Monitored Exchange Programs shall have written confidentiality policies to protect the safety of participants.

A. Internal Confidentiality Policies

Program staff and volunteers shall sign an acknowledgment that they will keep all participant information confidential during their employment with the Program and after they are no longer employed except in certain circumstances, as required in the Code of Conduct in Principle Two. Program employees and volunteers shall refrain from discussing any information about participants outside of the workplace or in the presence of non-Program personnel on-site.

Programs shall keep all case files in a manner to ensure that identifying information is secure and protected from public view.

Programs shall ensure that only appropriate staff members have access to participant information. Programs shall identify which staff members need full access and which staff members need only limited access to participant information to effectively perform their jobs.

Domestic violence cases: Consistent with Florida law, Programs shall keep confidential addresses, school information, and other location/contact information about victims and children in domestic violence cases.

Compliance Measures:

1. Programs shall have written policies to maintain files in a secure location.

2. Programs shall have written policies to identify which staff members have full and limited access to participant information.

3. Programs shall have on file copies of dated and signed Code of Conduct for each employee/volunteer/intern with a confidentiality pledge.

B. Sharing of Information Outside of the Program

Staff and volunteers of Monitored Exchange Programs shall protect the safety of all participants served by the Program by keeping all information about participants confidential, and not sharing this information with any outside person or agency without written consent of the participant, except in the following situations:

• When reporting suspected child abuse or neglect to the appropriate authority as required by law;

• When preparing a Report to the Court, as governed by applicable Program policy;

• When responding to a valid subpoena issued by the parties or the court;

• When reporting threats of harm to self or others to the appropriate authority as required by law;
• When making reports to emergency personnel in an emergency situation;
• When reporting the commission of a crime on-site at the Program;
• When required by a court order, warrant, or other applicable law.

Program staff shall, at intake, explain to participants the confidentiality policy, that it is not absolute, and the circumstances in which a Program may have to reveal confidential information or provide Program records without consent. Programs shall offer participants a form to sign acknowledging that staff has explained to them the Program’s confidentiality policy and the circumstances in which the Program may have to release confidential information. Programs shall have written consent forms to release information that have expiration dates and designate the information that will be disclosed and the person or agency receiving the information.

Compliance Measures:

1. Written polices stating that Programs must have written consent from participants to release information, and the circumstances in which a Program may release information without written consent.

2. Form acknowledging that staff explained to the participant the Program’s confidentiality policies and when a Program may release information without consent.

3. Consent form authorizing release of information by participants.

XXVIII. Periodic case review is required at Monitored Exchange Programs.

All Programs shall periodically reassess and review the safety needs of adults and children to determine whether the Program is providing the necessary services and level of safety as circumstances may change. Programs are encouraged to frequently inquire as to the safety needs of the parents and child(ren) and to adjust services accordingly within available resources and the scope of these Standards.

Compliance Measures:

1. All Programs must have written policies for formal and informal reviews of accepted cases in which visits have been accepted and in which visits monitored exchanges are ongoing. Informal reviews may consist of verbal communication with parents inquiring as to their safety and satisfaction with the visitation exchange process. Indications of informal review of cases must be at least briefly notated in the case file at least every 60 days (although Programs are encouraged to do so more often).

2. All Programs must have a formal case review every 6 months, inquiring as to a parent’s safety and satisfaction with the visitation exchange process, and including updating of address, phone, all contact information, and updated health information.
XXIX. Security policies are required at Monitored Exchange Programs.

Monitored Exchange Programs must establish a written protocol or Letter of Agreement with a local law enforcement agency that describes what emergency assistance and emergency call responses can be expected from the local law enforcement agency.

A. Programs shall have written security policies concerning the following:

Policies and procedures to screen for risk in each case.

1. Policies reflecting criteria by which services to a family will be terminated or suspended based on the safety needs and risks of the individuals.

2. Policies designed to keep parents physically separated during the exchange process, including intake, interviews, and the exchange itself.

3. Policies on making case acceptance/rejection decisions (these must be communicated to clients and referring agencies).

4. Evacuation procedures in case of an emergency, designed with the input of local law enforcement and in compliance with local codes.

5. Agreements with local law enforcement including site safety at the Program, emergency responses to calls for help, the physical layout of the Program for purposes of immediate intervention or evacuation, a safety plan for the agency and its employees, background screening of clients according to Program protocols, and a plan for the arrival and departure of clients according to their safety needs.

6. Policies for responding to, recording, and reporting critical incidents such as violent, dangerous, or inappropriate behavior of clients.

7. Policies for responding to medical emergencies, client, staff, or volunteer injuries and worker’s compensation procedures.

8. Policies for Program staff to report any instance in which a parent threatens, abuses, or stalks the other parent, or staff, even if such behavior occurs off-site.

9. Policies for communicating with the referring source, including the court, outlining the proper ways in which the court should receive any reports.

10. Policies specifically designed to prevent and respond to the attempted abduction of a child from the Program.

Compliance Measure:

All Programs must have written policies reflecting the above, reviewed every 18 months. The Letter of Agreement with law enforcement should be updated with current signatures from law enforcement at least every 18 months.
B. Security Personnel at Monitored Exchange Programs: See Section on Screening Cases and Danger Assessments. Onsite security personnel are an aspirational best practice (to be used in conjunction with many other safety considerations), although these Standards do not mandate the presence of security.

C. Child Safety is Crucial at Monitored Exchange

During Monitored Exchange, if a child refuses to go willingly to a parent in such a way or for such a period of time that it raises concerns that continuation of services may be detrimental to the child’s safety or emotional well-being, then the Program must suspend services pending resolution of the issue and notification of the appropriate parties or referring agencies.

No child shall be physically forced to visit with or accompany a parent against his/her will.

No person shall spank, hit, or threaten a child during monitored exchanges.

XXX. All Monitored Exchange Programs must have general and liability insurance for staff and volunteers.

Compliance Measure:

All Programs must have proof of insurance.

XXXI. Monitored Exchange Program staff shall not make recommendations as to the custody or long-term placement of the child.
PRINCIPLE TWO: TRAINING

Supervised Visitation and Monitored Exchange Program staff and volunteers must have specific qualifications and skills as well as initial and ongoing training on the complex and often overlapping issues that bring families to their Programs.

Introduction: The families referred to Supervised Visitation and Monitored Exchange Programs may have any number of problems including, but not limited to, substance abuse, domestic violence, mental illness, child abuse/neglect, and long term parental absence. All cases may require some degree of staff support and facilitation depending on a variety of case-specific factors. Programs will provide such support and facilitation as needed. In order to provide safe and informed services to these families, Supervised Visitation and Monitored Exchange staff and volunteers, including those at freestanding Monitored Exchange Programs (which do not offer supervised visits), must have initial and ongoing training in a wide variety of topics. These Standards are intended to raise the level of professionalism of Programs so that services are provided to vulnerable families by highly trained and knowledgeable staff and volunteers.

THE STANDARDS

I. All Supervised Visitation and Monitored Exchange staff and volunteers must meet minimum qualifications.

A. All Program staff, whether paid or volunteer, who have direct contact with Program clients or children, must:

1. have attained the age of 18 years, if a college intern working at the Program under the direction of a college professor/instructor at an accredited college or university in an official practicum course and under the direct supervision of Program staff;
2. have attained the age of 21 years, (if not a college intern as described above) unless start/hire date was prior to January 1, 2008;
3. have received acceptable results of a background check in accordance with Florida Department of Law Enforcement standards for child care providers;
4. have attended a screening interview with the Program Director/Administrator or his/her designee that includes an application and references review;
5. have executed a signed statement which addresses confidentiality in a Code of Conduct;
6. have executed an Affidavit of Good Moral Character;
7. have executed an affidavit of disclosure that lists any and all active pending criminal or civil litigation;
8. have no conviction for driving under the influence (DUI) within the last 5 years;
9. have not been on probation or parole within the last 10 years;
10. have no conviction for child abuse or other crimes against a person;
11. have not been named as the defendant/respondent in a civil or criminal restraining order within the last 10 years;
12. have successfully completed additional training requirements for the position as specified in this Section.
B. Program staff/volunteers must avoid conflicts of interest.

All persons working/volunteering at a Supervised Visitation Program or a Monitored Exchange Program in any capacity which involves working directly with families must avoid personal and business relationships with family members referred to the Program (or their close relatives). This could impair professional judgment or invite exploitation. In order to avoid a conflict of interest, no employee/volunteer shall:

1. Be financially dependent on the person being served;
2. Be an employee of the person being served;
3. Have a personal or business relationship with the person being served;
4. Be an employee of or affiliated with any court in the county in which the service is ordered, unless the Program itself is court-based;
5. Be a family member or in an intimate relationship with the person being served.

In some communities, especially rural areas, the likelihood of staff and client being previously acquainted or distantly related may be greater. Questions regarding potential conflicts in extended family relationships where a client is related to a staff member should be resolved by the Program Director.

Compliance Measure:

All personnel files must reflect compliance with A. and B. above. The Conflict of Interest provision can simply be a part of the Code of Conduct in each file (See Section V of this Principle). Programs may use checklists to verify that each element of Section A above is met in personnel files.

II. Program personnel must have role-specific minimum responsibilities and qualifications.

A. Program Director

1. Responsibilities of Program Directors: The Program Director of the Supervised Visitation and/or Monitored Exchange Program is responsible for the overall quality of services, as well as for employing and supervising staff, ensuring that every staff member has adequate and appropriate training to monitor visits/exchanges, and overseeing the day-to-day administration of the Program. Directors are responsible for ensuring that Program and case data is routinely and accurately entered into the Clearinghouse Supervised Visitation Database, housed at Florida State University. Directors are also able to assume roles associated with that of staff or volunteers. Persons serving as Program Directors by a different title, but who perform the same functions and have the same responsibilities, shall meet these same qualifications. If the Program Director has hiring authority for the Program, any employee, volunteer, or intern may be dismissed for no cause at the discretion of that Program Director; all employment and volunteer applications, regardless of qualification, shall be accepted, denied, or otherwise acted
upon at the sole discretion of the Program Director/Administrator.

These Standards require Program Directors to possess diverse skills such as communicating with the court, networking with other agencies, understanding state laws and agency policies, collaborating with a wide range of individuals across the community, and understanding family dynamics. The Committee believes that requiring a four-year degree for such a position will increase the probability that a Director will have a solid foundation for such tasks.

Thus, all Program Directors hired after January 1, 2009 must have complied with the following three requirements:

1. Graduation from an accredited college or university with a Bachelor's Degree in social services or related field; and

2. Two (2) years professional, full-time experience in an agency which has as its core function the protection of children or victims of violence, or custody, substance abuse, or Visitation issues; and

3. Demonstrated proficiency in competency-based training developed by the Florida Clearinghouse on Supervised Visitation.

Although the Standards require that Program Directors hired after January 1, 2009 have bachelors degrees, if the governing board or agency makes and documents good-faith but unsuccessful efforts to hire a qualified Director with a Bachelor's Degree after January 1, 2009, then the Program Director must have at least an Associate’s Degree and (4) four years of professional, full-time experience in an agency which has as its core function the protection of children or victims of violence, or substance abuse, mental health, or closely related family issues, in addition to the demonstrated proficiency in competency-based training developed by the Florida Clearinghouse on Supervised Visitation.

The above provisions relating to educational degrees do not apply to directors hired prior to January 1, 2009.

Compliance Measures:

Beginning January 1, 2009, each Director (hired after that date) shall have proof in his/her personnel file of meeting the above requirements, including records of educational degrees and related employment.

If a Director hired after January 1, 2009 does not have a Bachelor’s Degree, then the personnel file must reflect good faith efforts to hire such a candidate, as well as proof of an Associate’s Degree and additional years of related experience.

2. Training for Program Directors: Within three months of being hired, all Program Directors must complete 16 hours of administrative training (in addition to the 24 hours of staff training listed in Section III B.) covering the following areas:
1. Conducting intake and orientation, including preparing children for them;
2. Record keeping and confidentiality;
3. Receiving referrals;
4. Establishing a visitation or exchange contract with clients;
5. Setting fees;
6. Setting conditions (rules) for receiving services;
7. Setting up the physical space or location for safe visits/exchanges;
8. Collaborating with the court, child protective agencies, and other referring sources;
9. Referring clients to other services;
10. Training and supervising staff, including volunteers and interns;
11. Reporting to the court or other referring sources;
12. Testifying in court;
13. Using the Clearinghouse Supervised Visitation Database;
14. Suspending and/or terminating services; and
15. Managing and reviewing cases.

Compliance Measures:

In order to satisfy the above requirements, the 16 hours of administrative training for Program Directors must include at least three hours of Clearinghouse phone training for Directors (offered one hour per month), and may also include the following, documented in his/her personnel file:

1. Documented hours of peer mentoring relationships and consulting with other Program Directors who have served at least three years as Directors in Florida, signed by the mentor;
2. Documented hours with Community Advisory/Governing Boards or Committees established to assist the Supervised Visitation Program, signed by Board member(s) or circuit judge;
3. Documented hours with court staff on issues related to Supervised Visitation, signed by court staff;
4. Evidence of enrollment in community college or university classes in management, family violence, or child development, or other topic related to Supervised Visitation;
5. Documented Program compliance with the Clearinghouse Database.
demonstrating that cases are entered accurately by the Director or his/her designee on at least a quarterly basis;

6. Documented conferences conducted by the Office of the State Courts Administrators, DCF, SVN, the Clearinghouse on Supervised Visitation, and/or Community-Based Care Agencies;

7. Attendance at sessions conducted in these topics at conferences by any of the following: the Florida Coalition Against Domestic Violence, the Florida Council Against Sexual Violence, the Guardian ad Litem Program, the Supervised Visitation Network, and the Child Advocacy Centers, or any local trainings sponsored by the above.

Notes: The Clearinghouse will develop forms to track compliance with training. Such forms may include checklists and copies of written materials related to Clearinghouse and other acceptable trainings. If Directors are unsure whether specific materials will meet these requirements, they must contact the Clearinghouse directly for guidance.

For all Directors hired after January 1, 2009, any Certificates of Completion of Clearinghouse web-based materials, including the Manuals for Supervised Visitation Programs and the Child Sexual Abuse Referrals Manual, must accompany copies of written answers to case scenarios, exercises, and quizzes in his/her personnel file to meet these requirements.

Competency in materials developed by the Clearinghouse will be demonstrated by evidence of satisfactory completion of written exercise and test answers to each chapter in Clearinghouse manuals as well as attendance certificates at Clearinghouse telephonic trainings.

B. Monitors/Observers

1. Responsibilities of Visitation monitors: Persons serving in this capacity, whether paid or volunteer, are responsible for not only supervising the contact between the visitor and child(ren) in accordance with the Program’s mission, but also for facilitating and supporting that contact as necessary. In all cases, whether paid or volunteer, the Visitation monitor/observer shall:

   a. ensure that contact between parties proceeds pursuant to the Visitation agreement and court order;

   b. relay relevant information relating to the child’s welfare between the custodian and visitor at the commencement and conclusion of supervised contact (e.g. special needs, medication, diet, etc.); in dependency cases, relay relevant information to the case manager;

   c. intervene, where necessary or appropriate, to ensure the welfare of the child and/or parent;

   d. facilitate, if necessary, child/parent interaction during the supervised contact;

   e. terminate the visit if the child’s safety or that of other parties’ or staff cannot be maintained;

   f. provide constructive feedback, correction, or redirection respectfully to the parent(s);


2. **Responsibilities of Monitored Exchange Observers:** Persons serving in this capacity, whether paid or volunteer, are responsible for monitoring the exchange of the child from parent to parent in accordance with the Program’s mission. In all cases, whether paid or volunteer, the Monitored Exchange staff/volunteer shall:

   a. Ensure that contact between parties proceeds pursuant to the Monitored Exchange agreement and court order;

   b. Relay relevant information relating to the child’s welfare to the parents (e.g. special needs, medication, diet, etc.);

   c. Terminate the exchange if the child’s safety or that of other parties’ or staff cannot be maintained;

   f. Document the exchanges consistent with Program policies.

3. **Qualifications for all Supervised Visitation and Monitored Exchange Staff**

   Staff and volunteers at all Supervised Visitation or Monitored Exchange Programs must have the following minimum qualifications prior to having direct contact with families or children at the Program:

   **Education:** High School Diploma or Equivalency Certificate. In addition, Supervised Visitation staff and volunteers must also have the following mentoring and training:

   **Mentoring:** Five (5) hours in a mentoring/practicum training Program with a practicing Supervised Visitation monitor at an existing Visitation Program. These five hours shall include:

   a. Direct observation of parent/child contact performed by a trained Visitation monitor (shadowing);

   b. Co-supervision of the visit by the trainee with a trained Visitation monitor; and

   c. Direct observation by a trained Visitation monitor while the trainee independently supervises the visit (reverse shadowing).

   **Training:** 24 hours of training for those working in Supervised Visitation; 16 hours of training for those working in Monitored Exchange; and for both, demonstrated proficiency in competency-based training as specified by the Florida Clearinghouse on Supervised Visitation, which shall include the topics listed in Section III.

   **Compliance Measure:**

   Each personnel file shall have proof of staff and volunteers meeting the above requirements, including records of educational degrees, mentoring, and related training. Training topics are discussed in the Standard III.
C. College Interns

1. **Qualifications of College Interns:** Persons serving in this capacity at Supervised Visitation or Monitored Exchange Programs must meet the following minimum qualifications:

   a. Enrollment in an accredited four year college or university or community college and official enrollment in a practicum/internship program under the supervision of a college instructor/administrator.

   b. Official enrollment in a college or university in an area of major studies related to families, children, domestic violence, substance abuse, mental health, or the function of the Program.

   c. Presentation of clearly defined educational goals and objectives related to Supervised Visitation or Monitored Exchange (which may include a syllabus, relevant coursework, etc.)

No intern, volunteer, or staff member shall be able to monitor a family visitation or exchange without direct and constant supervision by fully-trained staff until such time as he/she has completed the required training. (24 hours for Supervised Visitation, 16 hours for Monitored Exchange only). The 24 hours of training must be completed within three months of the date of hire/start, absent hardship or special circumstances documented in the personnel file. In such special cases, the 24 hours of training must be completed within six months of the hire/start date.

**Compliance Measure:**

Each personnel file shall have proof of staff and volunteers meeting the above requirements, including records of educational degrees, mentoring, and related training. Training topics are discussed in Section III below.

D. **Qualifications of Others:** The qualifications and training required of those staff/volunteer/interns who do not have direct contact with children, parents, or other Program participants, is left up to the discretion of the Program Director.

III. Training is required for all Program staff and volunteers.

A. **Programs must have staff/volunteers trained in many issues.**

   1. The training of Program staff/volunteers must correspond with the services offered by the Program and the needs of and the risks presented by the family.

   2. In some individual referrals, the family may not need intervention or facilitation by the staff. However, all referrals must be assessed to determine the level of Program facilitation and support necessary. No Program may adopt a program-wide “no facilitation, observation only” policy for all referred cases.

   3. Any person who has not completed the required training may provide direct service to families only under the direct and constant supervision of a person who has completed the required training.

   4. When Supervised Visitation or Monitored Exchange services are provided or operated by an
agency whose primary function is not Supervised Visitation or Monitored Exchange, the agency is responsible for ensuring that staff or persons providing Supervised Visitation or Monitored Exchange are trained and qualified according to these Standards.

5. Any person providing Therapeutic Supervised Visitation services at a Program must be a licensed mental health professional and have the same amount of training as Program Directors.

B. Training Topics for All Supervised Visitation Program Personnel

All staff/volunteers/interns who have contact with children and participants involved in the supervised visitation process must have 24 hours of training in the following topics:

1. Program policies and procedures;
2. Safety for all participants;
3. Mandatory child abuse reporting;
4. Florida Standards and Statutes, including the Keeping Children Safe Act;
5. Professional boundaries, conflict of interest, confidentiality;
6. Basic stages of child development;
7. Effects of separation and divorce on children and families;
8. Grief and loss associated with parental separation and removal from the home due to child abuse and neglect;
9. Cultural sensitivity, multiculturalism, and diversity;
10. Danger assessments;
11. Family violence, including domestic violence and the effects of domestic violence on children;
12. Child maltreatment, including child sexual abuse;
13. Substance abuse;
14. Provisions of service to parents and children with mental health and developmental issues or other physical or emotional impairment;
15. Program documentation policies and philosophies;
16. Parent introduction/re-introduction;
17. Intervention to promote change;
18. Parenting skills;
19. Assertiveness training and conflict resolution;
20. How and when to intervene during visits or exchanges to maintain the safety of all participants; and
21. Preparation of factual observation notes and reports.
Note: It is left to the discretion of Program directors to determine the length of time devoted to each topic.

C. Training for Supervised Exchange only

Notwithstanding the requirement of the above Section, any person providing only supervised exchange services, either at a Program which also offers supervised visitation, or at a freestanding Monitored Exchange Program (that does not offer supervised visits) may meet these standards by completing 16 hours of training prior to conducting any exchanges, to include the following:

1. Florida Standards and Statutes, including the Keeping Children Safe Act;
2. Provider policies and procedures;
3. Danger Assessments and safety for all participants;
4. Mandatory child abuse reporting;
5. Professional boundaries, conflict of interest, confidentiality;
6. Documentation policies and philosophies to ensure all staff has an understanding of and complies with them;
7. Effects of separation and divorce on children and families;
8. Family violence, including domestic violence and the effects of domestic violence on children;
9. Cultural sensitivity and diversity;
10. Child abuse, including child sexual abuse and neglect;
11. Substance abuse;
12. Provisions of service to parents and children with mental health and developmental issues or other physical or emotional impairment;
13. Parent introduction/re-introduction;
14. Assertiveness training and conflict resolution;
15. How and when to intervene during exchanges to protect and maintain the safety of all participants;
16. Information reporting and documentation according to Program policies;
17. Relevant laws regarding child custody and visitation and child protection;
18. Intervention to promote change;
19. Parenting skills; and
20. Behaviors that facilitate positive attachment, separation, and reconnection.

Note: It is left to the discretion of Program directors to determine the length of time devoted to each topic.
Compliance Measures:

The personnel files for all staff, volunteers, and interns must reflect that the training requirements detailed herein are met. Records of training shall include hour amount, topic, type, and date of training. For purposes of meeting the training requirements, all of the following training opportunities are acceptable:

Training sessions, conferences, curricula, or meetings on the training topics listed in this Section taught by Program directors or their designees meet this requirement. Other acceptable trainings/sessions/conferences/curricula/meetings which serve to meet these training requirements include those sponsored by the Clearinghouse on Supervised Visitation, the Florida Coalition Against Domestic Violence, the Florida Council Against Sexual Assault, the Guardian ad Litem Program, the Florida Department of Children and Families or its contracted agencies, the Supervised Visitation Network, the Office of the State Courts Administrator, the Florida Bar, or community mental health or substance abuse treatment agencies.

IV. All Program Staff must participate in continuing education.

All directors, staff, volunteers, and interns must participate in continuing education on topics related to Supervised Visitation and/or Monitored Exchange including, but not limited to, the topics listed in Standard III.B of this Principle. After the first year of their employment, all full-time personnel at Supervised Visitation Programs must have at least seven hours of continuing education per year of employment, and part-time personnel must have three hours of continuing education in each year of employment. All staff, both part and full time at Programs which only offer monitored exchanges, not visits, must have three hours of continuing education. At least one hour each year of this training must be devoted to issues of multiculturalism, recognizing and overcoming biases, and enhancing cultural competency.

Compliance Measures:

All personnel files must reflect the topics, source/media, and hours of continuing education for each person for each calendar year. All files must include at least one hour of training on multicultural issues, diversity training, or cultural competency. It is the responsibility of the Program Director to determine that the hours are met. It is left to the discretion of the Director to determine what will suffice as continuing education, as Directors may choose in-service practical role-playing, on-line training, individual reading of articles/books/journals, training at agencies or organizations as indicated in the compliance measure of Standard III, or some other form of training. Cultural competency training can include these and other activities, such as guest speakers who can assist staff in cultural capacity-building.

V. All Program personnel must abide by a Code of Conduct.

Each person who has direct contact with families and children in the Program must sign a Code of
Conduct that includes at least the provisions in the model Code included in this Section.

THE MODEL VISITATION/MONITORED EXCHANGE PROGRAM
CODE OF CONDUCT STATEMENT

All participants in the services of the program are entitled to respectful, well-trained staff and volunteers. The Supervised Visitation/Monitored Exchange Program staff/volunteer agrees to maintain high standards of conduct in carrying out his or her duties and obligations. Staff/volunteers agree also to:

1. Diligently adhere to the Program's policies and procedures in the monitoring of all families;
2. Resist influences and pressures that interfere with impartial monitoring;
3. Report honestly and impartially about what occurs during visits/exchanges;
4. Respect the privacy of the child and the family and hold confidential all information obtained in the course of service as a staff member or volunteer with the Visitation/Monitored Exchange Program, as required by law and Program standards;
5. Decline to monitor cases in which he or she may have a conflict of interest as described in the Standards;
6. Attend pre-service training and in-service trainings as required by position description and length of employment or service with the Program;
7. Not practice, condone, facilitate, or participate in any form of discrimination on the basis of race, color, sex, sexual orientation, age, religion, national origin, marital status, political belief, mental or physical handicap, or any other preference or personal characteristic, condition, or status;
8. Decline any referrals of non-Program, private-pay cases in which private parties or their attorneys have asked for supervised visitation or monitored exchange services; and
9. Keep all information regarding persons who participate in The Sunshine Visitation Program confidential as required by Program policies.

I will not disclose, or participate in the disclosure of, confidential information relating to a case, child, or family to any person who is not a party to the cause, except in Observation Reports and as provided by law or court order, both during and after my involvement with the Program. I will abide by all protections of confidentiality provided to victims of domestic violence. I understand that a violation of confidentiality may result in disciplinary action up to and including termination. I further understand that I could be subject to legal action.

Failure to comply with the Code of Conduct may result in discipline or discharge. The individual hereby acknowledges that he/she does not have a right to serve in any capacity at the Program, but that he/she serves at the Program Director's discretion.

__________________________________________________
Signature of Visitation Monitor/Date

Compliance Measure:

Each volunteer, staff member, or intern file must contain a signed and dated Code of Conduct which has been signed before the individual has contact with families.
PRINCIPLE THREE: DIGNITY AND DIVERSITY

All clients who use Supervised Visitation and Monitored Exchange Programs are entitled to be treated in a fair and respectful manner that acknowledges their dignity and diversity.

Introduction: Florida's Supervised Visitation and Monitored Exchange Programs must treat individuals fairly and respectfully in ways that acknowledge their life circumstances and cultural backgrounds without ignoring the safety concerns that resulted in the referral to the Program.

Florida is a large, diverse state. Families referred to Supervised Visitation and Monitored Exchange Programs include individuals from every socio-economic, ethnic, and racial group represented in Florida's population. Programs should strive to be responsive to the diverse cultures of the families they serve. In addition, families receiving services may experience a wide range of emotions, including frustration, sadness, anger, embarrassment, happiness, confusion, fear, relief, anxiety, and anticipation. The complexities of the court system and judicial processes coupled with the perceived intrusion of outsiders into their private lives can often exacerbate these emotions and make dealing effectively with family members difficult for even experienced staff.

As a result of these dynamics, it is essential for all Programs to offer the parents (as well as the child, depending on his or her age and maturity) an opportunity to help shape the visitation or exchange process to make it as positive and rewarding as possible for each participant. This should be done in such a way as to acknowledge the unique strengths, experiences, values, circumstances, needs, and cultural backgrounds of each person receiving Program services.

THE STANDARDS

I. All Programs must have non-discriminatory practices.

All Programs must have comprehensive policies which must be communicated to participants in a respectful, sensitive manner, emphasizing that they are not punitive in nature but instead are part of broad program purpose in keeping families safe. Supervised Visitation and Monitored Exchange Programs shall not discriminate against any client due to race, religion, gender, sexual orientation, national origin, age, disability, marital status, or economic status.

Individuals experience their cultures differently and assimilate other cultural values in different ways and to varying degrees. An individual's cultural reality comes from the unique perspective based on that person's life experiences in the context of the cultural traditions and values to which he or she subscribes. Staff and volunteers must therefore be willing to try to understand the individual experiences and perspectives of those with whom they interact.

Compliance Measures:

1. All Programs must have a non-discriminatory practices statement on file, signed by the Program director and updated annually. Program audits will review grievance files for claims of discriminatory practices, as well as compliance with cultural competency training (Principle Two: Training).

2. Families must be asked at Intake about what they may need to make the service sensitive to the unique characteristics of that family. This inquiry is incorporated into Principle One, in the list of Intake questions.
(This is currently encompassed in the Intake section of Principle One: Safety and is listed as Special Considerations, Needs, and Issues. It is at this point that staff can, within safety considerations, begin to reach out to families to sensitively acknowledge and accommodate their unique characteristics. Those characteristics may include issues of race/ethnicity, mental or physical health, developmental challenges and capabilities, and other issues.)

II. All Programs must prioritize staff diversity.

Supervised Visitation and Monitored Exchange Programs should strive to recruit and hire bilingual and culturally diverse staff/volunteers/interns from within the community whenever possible in order to best serve families who are from diverse groups, and those who speak languages other than English.

Compliance Measure:

Administrative files must contain copies of job descriptions, recruitment material, outreach letters to community organizations (referred to in Principle Four: Community), or other material which demonstrates that the Program has sought diverse staff/volunteers/interns in the last year.

III. All Programs should provide interpreters as needed within Program resources.

Optimally, all communication between Program staff and the families they serve should be conducted in the primary language of the family. This includes Intake, discussions about services, and the services themselves. Thus, Programs should seek funding and resources for interpreters, in addition to bilingual staff and volunteers, in every community they serve. However, in any given community there are potentially dozens of languages spoken by families, and it may not be possible for a Program to provide staff who speak those languages. Thus, the following standards apply:

When a family’s primary language is not English, the best approach is for the service to be provided in the family’s language. This means that the staff/volunteers should be bilingual, able to speak and understand the family’s language. Whenever possible, Programs must strive to permit families to complete orientations, receive information, ask questions, and participate in services using their native or preferred language or sign language. Program administrators should try to work with community groups to facilitate the availability of Supervised Visitation and Exchange services in the individual’s native or preferred language, whether through the use of verbal or sign language interpretation services or through bilingual staff.

If the Program does not have a bilingual staff member to assist the family, the Program should find an interpreter who is or can be trained in the Program’s policies and who can assist staff with providing services to the family. The Program must ensure that the role, policies, and safety precautions of the Program are clearly communicated to every interpreter.

The presence of an interpreter does not replace the requirement of having Program personnel fully observe the service; the interpreter merely translates what is being said and helps the monitor communicate with the family. Programs should work with community agencies and groups from which interpreters can be recruited. All interpreters must sign Program Confidentiality Agreements.
In those cases where interpreter services are not available, the Program should ask the family members if they can communicate in English. The Program should provide services in English only if the family speaks English and agrees to speak only English during the visit. However, the Program should decline the referral and notify the court or other referral source if no interpreter can be located and the family cannot or will not speak English during the provision of services.

Problems with using family members and/or friends of the family as interpreters: Family members and friends are not appropriate interpreters at Programs, as conflicts of interest, intimidation, emotional attachments, and familial alignment make the possibility of meaningful, vigilant supervision improbable. A family member or friend may truly believe that he or she can undertake the responsibility of serving as an interpreter. It is altogether likely that the majority of such family members and friends have good intentions. In addition, the referral source may be desperate to find someone to provide interpretation at the visit. Thus, the temptation to use such volunteers is great. However, third parties who have a conflict of interest in the case should not be used as interpreters.

Compliance Measures:

1. All Programs must be able to demonstrate that they have collaborated with the court, community agencies, and groups to facilitate the availability of bilingual staff/volunteers/interns within the last calendar year. Programs must also demonstrate that they have made significant efforts to find funding for interpreters if they have had to decline referrals because of lack of interpreters. A file of such efforts must be kept for audit purposes. Copies of fliers and letters, agendas from meetings, and summaries of phone conferences (with dates and attendance lists) are all acceptable proof of such efforts.

2. In each case file in which an interpreter is used, there must be a signed and dated confidentiality agreement.

IV. All Programs must be responsive to diverse views of family.

All families are different. The roles and responsibilities of child-rearing may include persons other than a parent in any particular family, and some families may emphasize the bonds between other adults (or even an older child) and a child who has been separated from a family pursuant to litigation or child maltreatment allegations. These dynamics may reflect a common cultural practice of certain ethnic or racial communities, or they may simply exist as a characteristic of an individual family. Thus, Programs should consider (within the constraints of existing court orders, input and any safety concerns from the case manager, as well as the non-offending parent) allowing other adults and children to accompany the visiting parent to the visits or exchanges.

Compliance Measure:

A copy of written Program policy demonstrating that the Program allows families under some circumstances to bring other adults or children to the visit or exchange must be kept on file.
V. Programs must undertake a periodic assessment of multiculturalism efforts.

A culturally responsive Program is one that seeks to be fair and accommodating to diverse groups. Incorporating multiculturalism and diversity into policies, procedures, and practices should be a priority for Programs. Such an approach to service provision may enhance safety and lead to better outcomes for parents and children.

Compliance Measures:

1. Directors should keep on file an annual review, documented by the Program Director, of Program forms, policies, procedures, and materials for cultural responsiveness, competence, and relevance, with the following noted in writing and kept in a file on Multi-Cultural Efforts: date of multicultural review, any changes made to documents, and any outside (community leader or group) assistance sought and/or obtained. Copies of any Memoranda of Understanding between the Program and community groups should also be kept in this file, signed and dated.

2. Training: Staff must be trained in valuing multiculturalism and recognizing the role it can play in the delivery of safe, effective services. This requires periodic training of staff and volunteers in diversity and cultural competency issues. In addition, individuals need to become aware of their own cultural identities and backgrounds and examine their own unintentional biases. Training issues on this topic are required and included in Principle Two: Training.

VI. All Programs must have a grievance procedure.

All Programs must establish a grievance resolution procedure to ensure that participant complaints are attended to and resolved. A complaint is liberally construed to include a concern for any action of the Program staff/volunteers/interns for which the Program has decision-making authority, discretion, and/or interpretive responsibility. This procedure must be in writing. All staff/volunteers/interns shall have training in the grievance resolution procedure, and all Program participants must have access to the procedure.

Compliance Measure:

A written copy of the Program’s grievance procedure must be on file. Principle One requires that all participants must be made aware of the grievance procedure.

VII. All Programs must have a confidentiality policy to protect clients.

Staff and volunteers of Supervised Visitation or Monitored Exchange Programs shall protect the dignity of all persons served by the Program by complying with the requirements to maintain confidentiality described in Principle One.
VIII. All Programs must follow specific rules when offering different levels of service. [for Supervised Visitation Programs only]

All Programs that offer different levels of monitoring services such as one on one supervision, group supervision, and monitored exchange, shall have written policies that reflect the levels of supervision and the criteria upon which the Program bases its decisions to move families from or to more restrictive settings. If a Supervised Visitation Program offers such different levels of monitoring, the following Standards apply:

A. Court-referred cases:

1. Whenever a case is moved from Supervised Visitation to Monitored Exchange, it must be the court that approves and orders such a change in level of service, after consultation with the Program.

2. Unless the individual court order grants broader discretion to the case manager in dependency cases about the level of monitoring, the court must make the determination as to any change in visitation and/or levels of service.

3. In non-dependency cases that include allegations of child sexual abuse, or where the court has entered a Final Injunction for Protection Against Domestic Violence, or there has been a criminal no contract order or criminal conviction of domestic violence, the court, in consultation with the Program, must decide whether a family can move to a less restrictive level of service. The court’s decision is subject to the resources of the Program.

4. In non-dependency cases that do not have allegations of child sexual abuse or a domestic violence final injunction, no-contact order or criminal conviction, the Program is encouraged to consult with the custodial parent about the initial level of supervision (if not designated in the court order) and any subsequent decisions to change the level of supervision. The Program should take into consideration the visiting parent’s compliance with any court orders concerning counseling, treatment or other intervention before changing the level of supervision. If the Program and the custodial parent do not agree on the change, the court will make the final decision.

Compliance Measure:

Directors must keep written polices regarding different levels of service that comply with these Standards and dictate Program policy in areas not addressed by these Standards.
PRINCIPLE FOUR: COMMUNITY

_All Supervised Visitation and Monitored Exchange Programs shall operate within a coordinated community network of groups and agencies that seek to address common family problems._

**Introduction:** Supervised Visitation and Monitored Exchange Programs do not exist in a vacuum. The families using the Programs often have a constellation of problems with which they need assistance. These clients may receive orders and referrals to some services from the courts, child protection agencies, law enforcement and additional agencies, and supervised visitation. Programs must take care not to duplicate or conflict with such referrals. Thus, when a case is an active dependency court case with an assigned case manager, it is the case manager’s responsibility to identify client needs and arrange for appropriate service interventions. However, Supervised Visitation and Monitored Exchange Programs are often in a unique position to identify unaddressed client needs. If these unmet needs are identified in active dependency cases during the visitation process, the Program must make the case manager aware of them. In any other cases, the Supervised Visitation or Monitored Exchange Program should seek to address client needs by offering clients meaningful, culturally appropriate linkages to social service organizations within communities that offer them.

The goal of this section is not to treat Supervised Visitation and/or Monitored Exchange Program staff as case managers. Rather, it is to acknowledge that these Programs may become aware of family problems that have not been previously identified or addressed by any agencies. Because Supervised Visitation Programs have longer periods of contact with families than Monitored Exchange Program staff, it is likely that Visitation Programs will have more opportunities to identify gaps in services and family needs than Monitored Exchange Programs. Still, Monitored Exchange Programs are required to meet the minimum compliance measures in this section, and, in nonactive dependency cases, to offer to make referrals and/or provide relevant information whenever possible and appropriate.

In addition and within existing resources, all Programs must offer and seek cross-training from certain community groups and must show some level of participation in agency networking groups. This coordination will strengthen the entire network of community services and enhance the knowledge of lead Supervised Visitation staff about substantive issues and community agency protocols. The more knowledgeable staff is, the safer families will be.

THE STANDARDS

I. Supervised Visitation and Monitored Exchange Program staff should be knowledgeable about other community agencies.

   A. Already existing in many communities in Florida are agencies and groups which operate to address and alleviate problems such as domestic and sexual violence, child abuse, substance abuse, and mental health issues, all of which are common issues in Supervised Visitation referrals, and may occur in Monitored Exchange cases. In addition, many communities also offer a network of social services agencies to provide for basic needs such as nutrition, housing, home furnishings, medical care, literacy education, and job training and placement. These services may not be offered uniformly throughout the state, and the quality of resources in communities differs widely.
B. Based on their existing resources, Supervised Visitation and Monitored Exchange Programs should identify and be able to describe to clients the general scope of existing community groups. This will enable Programs to create linkages for proactive outreach for clients, where appropriate. It will also help to fill service gaps and provide the opportunity for families to access appropriate services in nonactive dependency cases. Envisioned in this section is a Program's ability to address client inquiries regarding specific services and how to access those services in a culturally relevant manner. Programs must take care to avoid conflict with and duplication of services mandated by the court or other agencies.

C. When a Program becomes aware that a family has a problem that is not being addressed, and the case is an active dependency case, the Program must notify the case manager. In any other case, the Program should respectfully attempt to increase the family's awareness of the community options available. This section should not be construed as imposing new obligations on the families themselves. Families can not be compelled to accept referrals offered by Visitation Program staff unless the service is required by the court. It is not the intent of this section to penalize any parent for refusing or declining a referral.

Compliance Measures:

1. All Programs must have a current listing of community resources compiled either by some other group or the Program staff. The list must include a wide variety of services commonly accessed by families involved in the court system.

2. Program directors must demonstrate that they have contacted other agencies and organizations within the last calendar year to inform them of the Supervised Visitation Program's mission, scope, and services within the last calendar year. Programs must also keep logs or copies of written communication.

3. In order to make it clear to stakeholders what services a Program provides, each Program must have a written policy regarding the scope and nature of services offered by that program, as well as policies about case-specific information sharing and waivers/releases allowing such. All written policies must be kept on file and made available to the court and adult participants. This is also required in Principle One.

4. Transparent Collaboration in Individual Cases: Pursuant to Principle One, Standard X, Programs shall have written consent of the participant to share confidential information with other agencies such as the Guardian Ad Litem, Certified Domestic Violence Centers, sexual assault centers, and other agencies providing services to the participant, unless the release of information is ordered by the court, required by law, or falls within an exception designated in the Program's written policies.
II. Program outreach and cross-training is essential.

A. Based on their existing resources, all Supervised Visitation and Monitored Exchange Programs must offer outreach and opportunities for cross-training to community organizations. This will enhance the knowledge and skills of the staff of all participating agencies.

B. At a minimum, cross-training should be sought from and offered to at least one of the following organizations each calendar year:

1. The Local Certified Domestic Violence Center. Supervised Visitation and Monitored Exchange Program staff and volunteers must understand the services offered by the certified domestic violence center, and staff should be able to explain to victims of domestic violence how the certified domestic violence center staff can assist with reduction of post-separation violence, offer shelter, support, and advocacy, and assist with understanding judicial processes. Supervised Visitation and Monitored Exchange Programs shall not provide legal advocacy or judicial hearing accompaniment. They may, however, offer safety planning in conjunction with the domestic violence center and allow and/or assist victims to call domestic violence center staff from the Program. Supervised Visitation and Monitored Exchange Programs shall seek feedback from certified domestic violence staff on program policies to enhance client safety, request on-going training in certified domestic violence dynamics from certified domestic violence center staff, and offer inter-agency meetings to increase each organization's ability to make knowledgeable and appropriate referrals. If the case is an active dependency case, the visitation staff must avoid duplicating services by making the case manager aware of any safety planning engaged in with victims.

2. The Local Guardian ad Litem Office. All Program staff must understand the services offered by the Guardian ad Litem Program and be able to explain to parents and children how the GAL program operates. Likewise, the Programs must offer the GAL program meaningful opportunities for cross-training so that the staff of each understands the other's responsibilities and functions. The Guardian ad Litem program may request that individual guardians observe visits; however, the guardian may not participate in the visit or interview the parent or child during the visit. The referring agency or court must specify in writing that the GAL is entitled to observe visits. The Supervised Visitation Programs shall continue to be responsible for monitoring the visit and may not abdicate such responsibility to the GAL.

3. The Local Child Advocacy Center. All Program staff must understand the services offered by the Child Advocacy Centers (CAC) and be able to explain to parents and children how the CAC program operates. Likewise, the Programs must offer the CAC program meaningful opportunities for cross-training so that the staff of each understands the other's responsibilities and functions. The CAC may request that individual staff observe visits; however, the CAC staff may not participate in the visit or interview the parent or child during the visit. The referring agency or court must specify in writing that the CAC staff member is entitled to observe visits. The Supervised Visitation Programs shall continue to be responsible for monitoring the visit and may not abdicate such responsibility to the CAC.

4. The Local Certified Rape Crisis Program. All Program staff should understand the services offered by the certified rape crisis center. Visitation staff must understand the services offered by the certified rape crisis center and be able to explain to victims of sexual violence how the rape crisis center staff can assist with reduction of trauma-related symptoms, offer counseling, and assist with
understanding judicial processes. Supervised Visitation Programs shall not provide legal advocacy, judicial hearing accompaniment, or abuse counseling to victims of sexual violence or child sexual abuse. They may, however, allow and/or assist victims in calling certified rape crisis staff from the Visitation Program. Supervised Visitation Programs shall seek feedback from rape crisis program staff on Program policies to enhance client safety by preventing, recognizing, and intervening in re-victimization that may occur in Supervised Visitation Program settings, and they must also respond appropriately (by calling the child abuse hotline) to disclosures of sexual assault/abuse, request on-going training in the dynamics of child sexual abuse and the long-term consequences of same, and offer inter-agency meetings to increase each organization’s ability to make knowledgeable and appropriate referrals. If the case is an active dependency case, the Program visitation staff must avoid duplicating services by making the case manager aware of any safety planning engaged in with the victim.

5. **The Child Protection Team.** Some Child Protection Teams are a part of the local Child Advocacy center or may be part of the Certified Rape Crisis Program. In some communities the CPT stands alone. Monitored Exchange Programs should be aware of the services and responsibilities of the local CPT. Supervised Visitation staff must understand the services offered by the CPT, and understand how CPT staff can assist with reduction of trauma-related symptoms and offer referrals. Supervised Visitation Programs shall seek feedback from CPT staff on Program policies to enhance client safety by preventing, recognizing, and intervening in child re-victimization that may occur in supervised visitation settings, and Program staff must also follow protocols for the appropriate responses to the child, including calling the Florida abuse hotline, requesting on-going training in the dynamics of child abuse and its long-term consequences, and offering inter-agency meetings to increase each organization’s ability to make knowledgeable and appropriate referrals.

6. **Batterer Intervention Programs.** Many communities provide structured, certified Batterer Intervention Programs to help address domestic violence and hold abusers accountable for their actions. All Programs should be aware of the services of local BIPs, as well as how referrals are made, reporting is accomplished, and information is released. For example, if visitation or exchange is contingent on completion of a BIP, Programs should know how they will confirm attendance, compliance, and completion. BIP staff may also be able to provide information to Visitation staff on common abuser tactics such as minimization and rationalization and teach staff how to recognize power and control dynamics.

7. **Multicultural Outreach Groups.** Many communities in Florida are home to diverse populations and culturally specific organizations that provide services to them. Supervised Visitation and Monitored Exchange Programs should work with representatives of culturally specific organizations, including faith-based groups, to identify populations needing services, establish linkages for outreach and training, to enhance accessibility, and to promote culturally relevant services at the Visitation Program. If the case is an active dependency case, the Visitation staff must avoid duplicating services by notifying the case manager if there is a potential need for services.

8. **Community Substance Abuse Treatment Programs.** To provide families with general information in order to assist them in accessing addiction, treatment, and recovery resources, all Supervised Visitation Programs should be aware of non-profit and private not-for-profit clinics offering sliding fees and counseling/treatment. These programs may be a good resource for conducting training for Supervised Visitation Program staff, all of whom need to be able to recognize signs and symptoms
of substance use and abuse and the dynamics of such abuse. If the case is an active dependency case, the Visitation staff must make the case manager aware of possible unmet client needs in this area.

9. Community Mental Health Treatment Programs Resources. To provide families with general information regarding mental health evaluation and treatment services, Supervised Visitation and Monitored Exchange Programs should be aware of non-profit and private not-for-profit community mental health clinics and treatment centers offering sliding fees and counseling/treatment. These programs may be a good resource for conducting training for Supervised Visitation and Monitored Exchange staff who need to be familiar with the signs, symptoms, and dynamics of mental illness. If the case is an active dependency case, the Visitation staff must make the case manager aware of possible unmet client needs in this area.

Compliance Measure:

All Programs must keep on file administrative documentation of non-case-specific outreach to the above groups, indicating offers for training, training conducted, and meetings held and/or attended by Supervised Visitation staff. A record of at least one solicitation and offer of cross-training must be made to these groups each calendar year. (Copies of letters are sufficient.)

III. Participation in community groups is essential.

A. Each community in Florida is home to dozens of other groups which seek to coordinate their services to maximize assistance to individuals and families. Such groups in any community may include:

- Dependency Court Improvement Groups
- Community Alliance Groups
- Keeping Kids Safe (and other child abuse-prevention groups)
- Domestic Violence Task Force/ Domestic Violence Coordinating Committees
- Family Justice Center Partnership (Domestic Violence Victim Service Center)
- Sexual Assault Interagency Council/Sexual Assault Team organized by the certified rape crisis center in each community
- FLAG (Family Law Advisory Group)
- Delinquency or Dependency Improvement Groups
- Groups of the Florida Bar organized to assist pro se litigants, family lawyers
- Homeless Coalitions
- Social Service Alliance Groups
B. Based on existing resources, Supervised Visitation and Monitored Exchange staff should have membership in at least one of these or similar groups to demonstrate that the Program is working collaboratively with other agencies that serve the same or similar populations.

Compliance Measure:

A Supervised Visitation/Monitored Exchange Program director or other lead staff must in each calendar year affiliate with at least one other community group that serves families who are involved in the court system or who have a child custody dispute. The quality of the Program director’s collaboration will be taken into account when the Supervised Visitation Program is evaluated. Collaboration can be, at least in part, demonstrated by the presence of agency directors on the governing or advisory boards of Visitation and Exchange Programs. Minimum compliance with this standard requires records that confirm an awareness of the social services-related agencies and groups that exist in the community and their purpose. Minimal compliance also requires a meaningful participation in community groups.
CERTIFICATION PROCESS FOR
FLORIDA’S SUPERVISED VISITATION
AND MONITORED EXCHANGE PROGRAMS

The general framework and processes for Certification are described below. The Clearinghouse will refine and modify the process in light of experience with the assistance of a Supervised Visitation Advisory Committee. The following general parameters will be effective as soon as the Florida Legislature approves them.

1. **The Standards provide the basis for Certification.**

   The Minimum Standards for Supervised Visitation Programs create the basis for certification of a Supervised Visitation Program in Florida. The Standards provide for flexibility and creativity in implementation while maintaining the integrity and potency of the SVP model. Minimum Standards are meant to provide a vision for developing SVPs and to stimulate the improvement of services.

   Certified Supervised Visitation Programs – which follow all of the Compliance Measures in each of the four Principles (safety, training, dignity and diversity, and community) – will offer the greatest assurance of safety, trained staff, and community partnerships.

2. **Programs will be required to substantially meet the terms of each Compliance Measure.**

   The Clearinghouse recognizes that it is highly unlikely that any single Program will meet all of the criteria in each compliance measure in a way that is always 100% perfect. Factors such as size, community resources, access to funding, geography, and population size are obviously considerations for meeting these criteria.

   These factors need not stand in the way of certification, as long as the Program exhibits a commitment to meeting the standards, and substantially meets each compliance measure. A Program will be certified when it is determined that the Program has submitted proof that it substantially adheres to the principles and compliance measures created for Programs and has exhibited a commitment to meeting each compliance measure in the Standards. Neither Florida State University nor any of its divisions will incur any liability as a result of actions taken pursuant to the certification process.

3. **Certification emphasizes Program pre-planning to prepare evidence of compliance.**

   The certification process emphasizes a Program’s active pre-application planning and the submission of a binder to the Clearinghouse that includes evidence of compliance with such compliance measures in the Standards. Thus, although the certification process includes a site visit, Program applicants will be expected to do the majority of the certification prep work in advance of the site visit. This will keep costs associated with repeated site visits low.

   The Program can receive technical assistance from the Clearinghouse to support them with compiling the binder and ask any questions they might have about the certification process. These conferences may include the presence of stakeholders, referring agencies, or other interested individuals as determined by the Program.
The four steps to certification are as follows:

A) The Planning, Pre-Application Phase

In anticipation of an application for certification, a Program should conduct an internal review to ensure that they have complied with the Standards. The Program director must be certain that all of the staff, both paid and unpaid, are properly trained, and that the Program has proof that it has complied with both the letter and the spirit of the Standards under Principles One through Four. The Program’s information should be ready to compile in anticipation of sending it to the Clearinghouse. The Program’s Board of Directors or Community Advisory Board should be aware of the Process, and the administrative staff should feel that they will be prepared for a site check and random administrative file check and redacted case file check after submitting their binder.

B) Letter of Intent

Once the director is confident that the Program is meeting the Standards, he or she should write a letter of intent informing the Clearinghouse that the Program intends to apply for certification. The Chief Judge, Board members, and other stakeholders should be copied on the letter. The Letter of Intent triggers the following:

a. The Clearinghouse will schedule a timeframe within which the Program can receive technical assistance related specifically to the individual Program’s practices and policies, and during which the compliance binder must be submitted.

b. The Program acknowledges that it will be able to substantially complete the application binder in good faith before scheduling a site visit with the Clearinghouse.

C) Submission of the Binder

The Binder is submitted by the Program to the Clearinghouse. The submission of the binder triggers a Clearinghouse review of the application binder, a series of phone conferences to try to remedy any minor shortcomings of the binder, and an obligation on the part of the Clearinghouse to schedule a site visit within three months.

Arranging the Binder – The binder must contain:

• The name of the Program, plus its contact information: address, phone number, website, and fax line.

• The name of the person (and email and phone number) who is most responsible for the Program’s Certification process, if different from the Program Director.

• The name of the Program director, and his or her email address and phone number.

• If applicable, the names of any persons, including Board members or referring judges who are actively involved with the Certification Process for the individual Program and who might contact the Clearinghouse or be contacted for purposes of Certification issues.

• Organized written proof of meeting all of the Standards and Compliance measures under the four principles. The binder should be divided into four parts, one for each principle, and further divided into separate sections within the principles. If case information is included, all confidential
and identifying information must be redacted before submission. The sections of the binder that directly relate to Standards and compliance measures must be marked and referenced clearly.

If the Program submits a substantially incomplete binder, or if the binder is complete but poorly organized, or if the binder does not clearly reference the Standards and compliance measures, the Clearinghouse will return it to the Program, and notify the Program in writing that the application binder cannot be considered at that time. If this occurs, the Program has an additional three months to correct the problems.

The Clearinghouse will inform the Program of any missing information or minor problems of the binder and ways to meet the Standards. The site visit will not be conducted until the Clearinghouse staff believe the binder is nearly complete. However, the site visit can still result in a denial of certification, as there are Standards regarding the site that can not be verified solely through the binder submission process.

D) The Site Visit

The assessment of the Program will include on-site review of the Program, and may include interviews with the director, inspection of the site itself, examination of redacted files, and scheduled meetings with judges or community stakeholders, if necessary.

After the site visit, the Clearinghouse has 30 days to render a decision in writing to the Program based on the binder and the site visit regarding whether or not the Program will be certified. The three possible outcomes are:

a. Certification without Recommendation: no further action is required on the part of the Program, and the Program is certified for three years.

b. Certification with Recommendation: the Program is certified, but the Clearinghouse makes specific recommendations for minor improvements that can be verified without the use of an additional site visit. All improvements must be made within three months, or certification will be withdrawn. Once the recommendations have been satisfied, the Clearinghouse will certify the Program for three years.

c. Certification Withdrawn or Denied: The Program is denied certification, and the Program can elect to begin the appeals process, which triggers additional responsibilities to the Program outlined by the Clearinghouse and requires an additional site visit.

4. Certification decisions are not competitive.

Programs do not compete against each other to receive Certification. Any Program that meets the Compliance Measures can become certified.

5. An appeals process will be established by the Clearinghouse for certification denials and any withdrawals of certification.

The Clearinghouse, with the assistance of a Standards Appeal Review Team consisting of at least four representatives of stakeholder organizations, will create a process by which programs may appeal a withdrawn or denied certification. Decisions of the advisory board will be final, with a simple majority determining the outcome of the appeal.

The Standards Appeal Review Team will consist of at least two administrative staff members of currently certified Programs when such exist (either two Directors of Programs or their designee with at least two
years of administrative responsibility at the Program). The other three members can be judges, lawyers, staff at the Department of Children and Families, former members of the Supervised Visitation Standards Committee or their designees, or the designees of directors of state agencies or organizations named in the Standards themselves (for example, the Florida Council Against Sexual Violence or the Florida Coalition Against Domestic Violence). These Committee members will be chosen by the Clearinghouse on Supervised Visitation. Members of the Review Team will not be members of the community that operate in the same jurisdiction as the Program whose application has been denied.

The Clearinghouse has the option of convening the Committee telephonically or in person.

The Committee will consider the information reviewed and will decide the outcome. The Committee can decide by a majority vote to confirm or reverse the Denial of Certification. If the Denial decision is confirmed, the Program has no further recourse, except to begin the Application Process again after at least a six-month period of time. If the decision is to reverse the Denial, the Committee may either reverse the decision entirely, and direct the Clearinghouse to Certify the Program, or require that the Program take additional steps to correct problems immediately. Any additional costs incurred to verify these corrective actions must be paid by the Program to the Clearinghouse. At this point, the Program will be obligated to pay additional fees for site visits and technical assistance, depending on the recommendations of the Committee and the costs estimated by the Clearinghouse, before Certification is granted. If the Program does not make changes required by the Committee, the Program’s denial of Certification will be confirmed. The Program has no further recourse, except to begin the Application Process again after at least a six-month period of time.

If the Denial reversed, the program is Certified for a period of three years.

6. The Clearinghouse will create a process for the investigation of Third Party Claims.

From time to time, third parties such as community members, parents, and government agencies contact the Clearinghouse stating that a specific Program is not operating in a satisfactory manner. Such matters can cause concern due to the high esteem in which all Programs are held.

The Clearinghouse does not certify Programs according to case outcomes but based upon organizational and procedural methods in accordance with the Minimum Standards for Supervised Visitation Programs; therefore, no claims other than those directly related to matters involving a Program’s compliance with these Standards will be investigated by the Clearinghouse. All Programs must have their own internal grievance procedure for handling case-specific grievances.

**Investigation of claims** directly related to the Standards will be conducted pursuant to a process created by the Clearinghouse.

**Step One:** A letter outlining the exact nature of the complaint must be sent by the third party to the Director of the Clearinghouse.

**Step Two:** The Clearinghouse will determine if the complaint is directly related to compliance with the Standards for Certified members. If found to be so related, the Standards for Certification Committee will provide the named Program with a copy of the complainant’s letter and ask for a written response within a specified timeframe. As part of this response, the Clearinghouse may require specific documentation to support the Program’s position. Confidential information will only be shared within the parameters of applicable law.
Step Three: Program response will be reviewed by the Clearinghouse. A conference call involving the named parties may be deemed necessary. If the Clearinghouse finds that the Program appears to be in continued compliance with Clearinghouse standards, no further action will be taken, and the parties will be notified. If the Clearinghouse finds that the Program needs to make improvements, the Program will be notified. If changes are made in accordance with Clearinghouse recommendations, nothing more needs to be done. If the Program does not act to become compliant with the Standards and make all changes within six months, the Program's status will be re-classified as “Certification Withdrawn.” The Program can appeal this decision according to the same process as Certification Denied.

7. Resources will be available to Programs.

Numerous resources are available to both developing and established Programs, including updated training materials, sample forms to help track each compliance measure, training manuals, online family violence tutorials, E-Presses, newsletters, statewide group phone meetings, the Institute website, and many other accessible resources. Programs are strongly encouraged to access these services before embarking on the certification process, and in resolving any issues identified during the process. Of course, these resources are available at all other times as well.

The Clearinghouse wishes the certification process to be cooperative in nature. Programs working towards certification should view these services as complementing the process. Applicants are encouraged to ask questions up front while preparing for the process.

8. Applicant Programs will be guided to use local experts to help in the Certification process.

As previously mentioned, the certification process is meant to be cooperative in nature. The Clearinghouse is available to provide guidance throughout the process. Following are tips for programs embarking on the certification process.

• The process should not be undertaken solely by the Program director. Certification should be viewed as a project of the staff, referring agencies, board of directors or community advisory board, and community stakeholders. Participation will lead to buy-in and ownership and will provide an insight as to why the Program’s policies and procedures are structured as they are.

• Begin meeting the Standards well in advance of your target submission date. As a busy Program administrator, plan for unexpected interruptions, such as staffing lapses, which can lead to delays. Identify major events, such as fundraisers and conferences, which may put large demands on time blocked for working on the certification.

• Form task forces or committees that are assigned to review various portions of the application. Such groups could be facility/organizational issues, team and protocol, and programmatic task forces. These committees would review Standards generally falling within their topic area, conduct a self-assessment, and recommend any necessary adjustments or changes.

• Use case review as an opportunity to review the Minimum Standards. Each month discuss a different standard and ask team members to identify the Program’s strengths and weaknesses in that standard.

• Consult with your peers. Other Certified Program directors and team members will be more than happy to share their experiences with the certification process and can give pointers on how best to prepare.
APPENDIX MATERIALS
IN THE CIRCUIT COURT,  
____________ JUDICIAL CIRCUIT, IN AND FOR  
_______________ COUNTY, FLORIDA  

CASE NUMBER: ____________________________  
DIVISION: ____________________________  

In the Interest of ____________________________  
D.O.B. ______________________________  

**ORDER FOR SUPERVISED VISITATION IN DEPENDENCY CASES**  

PURSUANT TO FLORIDA STATUTES, the Court hereby orders as follows:  

1. There have been (circle one) findings or allegations of (check one or more of the following)  
   - ☐ child abuse  ☐ child neglect  ☐ abandonment  
   - ☐ other:________________________________________________________.  

2. Check one: ☐ The mother ______________________ and/or ☐ the father ______________________  
   and/or ☐ other is/are hereby ordered to use the Visitation Program with the following minor children:  
   a. _____________________________________ d/o/b: ____________________________  
   b. _____________________________________ d/o/b: ____________________________  
   c. _____________________________________ d/o/b: ____________________________  
   d. _____________________________________ d/o/b: ____________________________  
   e. _____________________________________ d/o/b: ____________________________  

3. Within _______ days the Child Protective Investigator or the Dependency Caseworker or case/care manager will provide to the supervised visitation program a completed Standard Program Referral Form.  

4. The frequency and length of the visits will be pursuant to Program policies or ____________________________ subject to the availability of program resources.  

5. Transportation:  
   a. ☐ DCF/Sheriff’s Department will transport, or arrange for the transport of the child.  
   b. ☐ The Community Based Care agency will transport, or arrange for the transport.  
   c. ☐ Other:________________________________________________________.  

6. The Policies and Procedures of the Visitation Program are hereby incorporated by reference into this Order and the parties are ordered to comply with all rules, regulations and policies of the program.
7. The child protective investigator, or dependency case worker/care manager shall contact the program at (phone number) _______________ within three days of the hearing at which supervised visitation is ordered to schedule an intake/orientation for the visiting parent. No visitation will occur until the visiting parent(s) have completed an intake/orientation.

8. The program may decline to accept a case, and may suspend or terminate an open case, for the following reasons:
   a. The case will place or places an undue demand on the program's resources;
   b. One or both of the parents have failed to comply with the visitation agreement, the directives of the visit supervisor, or the Court's Order;
   c. Safety issues cannot be effectively addressed by the program.

9. Written notification shall be provided to the Court and to the case worker/case manager if any case is declined, suspended, or terminated.

10. The non-custodial parent shall not remove the child(ren) from the premises of the Supervised Visitation Program without program/court authorization from the supervised visitation program. Should the non-custodial parent (or another person acting on his behalf) do so, law enforcement authorities including, but not limited to the [local police and sheriff’s office], are hereby directed and authorized to use all reasonable means necessary to return the child(ren) to the Custodian of Record.

11. Special considerations: __________________________________________________________________________
    _____________________________________________________________________________________

12. Supervised Visitation Program Reports will be provided to the Court/Case manager (circle one) every six months or as follows: ____________________________________________________________________________________.

DONE AND ORDERED at ________________________________ Florida on the day of ________________________________, 20______.

__________________________________________

CIRCUIT JUDGE

Copies to:

Program

Petitioner

Respondent

By order of this Court, pursuant to §§ 39.0132(4)(a), 39.0139(4) & (5), and 39.814(4), this order on Supervised Visitation may be provided only to the parties to the case and to the visitation center at which the court ordered visitation is to occur. Further dissemination is prohibited.
IN THE CIRCUIT COURT,
__________ JUDICIAL CIRCUIT, IN AND FOR
__________ COUNTY, FLORIDA

CASE NUMBER: ________________
DIVISION: ________________

PETITIONER NAME ___________________________________________ Petitioner,

-and-

RESPONDENT NAME ___________________________________________ Respondent.

ORDER FOR SUPERVISED VISITATION (Non-dependency cases)

PURSUANT TO FLORIDA STATUTES, the Court hereby orders as follows:

1. Both parties are ordered to comply with this Court Order.

(Check one) □ The petitioner or □ respondent or □ other is hereby ordered to use the Visitation Program to have contact with the following minor children:

a. ___________________________________________ d/o/b: ________________

b. ___________________________________________ d/o/b: ________________

c. ___________________________________________ d/o/b: ________________

d. ___________________________________________ d/o/b: ________________

2. Check One:

□ Visitation is strictly limited to the minor children and the visiting parent.

□ Visitation is between the minor children, the visiting parent, and visitors authorized by the court and/or the program, pursuant to specific program policies regarding safety and accountability.

□ Visitation is in accordance with the Limitations on Visitation set forth in the attached Final Judgment of Injunction.

3. Frequency of visits: Visits shall be held according to program policy, or described below:

__________________________________________________________________________________.

4. Every visitation program has unique policies with regard to costs. The costs of the supervised visitation program will be allocated as follows:

__________________________________________________________________________________.

5. Failure to pay may result in the Court issuing a judgment against the responsible party, suspension of visitation or such other sanctions as may be appropriate, including Contempt of Court.
6. The Policies and Procedures of the Visitation Program are hereby incorporated by reference into this Order and the parties are ordered to comply with all rules, regulations, and policies of the program.

7. The parties shall contact the program at (phone number) __________ to schedule an intake/orientation. No visitation will occur until the parties have completed an intake/orientation.

8. This order will be automatically rescinded 30 days after its issue date if it is not acted upon by the visiting party unless otherwise noted here: __________________________________________________________.

9. The program may decline to accept a case, and may suspend or terminate an open case, for the following reasons:

   a. The case will place or places an undue demand on the program’s resources;
   
   b. One or both of the clients have failed to comply with the visitation agreement, the directives of the visit supervisor, or the Court’s Order;
   
   c. Safety issues cannot be effectively addressed by the program.

10. Written notification shall be provided to the Court if any case is declined, suspended, or terminated.

11. Case Review: This case shall be reviewed in six months or upon motion of either party or program staff.

12. The visiting parent shall not remove the child(ren) from the premises of the supervised visitation program without the court/program’s authorization. Should the parent (or another person acting on his behalf) do so, law enforcement authorities including, but not limited to the [local police and sheriff’s office], are hereby directed and authorized to use all reasonable means necessary to return the child(ren) to the Custodian of Record.

13. Other active cases exist involving these parties and children, including:

   __________________________________________________________.

14. Other: (for example, level of supervision, provisions making visitation contingent on participation in treatment or counseling, conditions precedent to visitation, video-taping/recording of visits, etc)

   __________________________________________________________
   __________________________________________________________.

15. Reports to the Court: The Supervised Visitation Program shall submit Reports to the Court as follows

   a. ☐ every three months
   
   b. ☐ every six months
   
   c. ☐ as follows __________________________________________________________.
16. Reports to the Court shall contain:
   a. ☐ summary information (visit log, intervention summaries, and critical incident reports only)
   b. ☐ detailed visit information (summaries and specific descriptions of parent-child interaction)
   c. ☐ other ________________________________

DONE AND ORDERED at _____________________________ Florida on the
day of _____________________________, 200______.

__________________________________________
CIRCUIT JUDGE

Copies to:
Program
Petitioner
Respondent
Other
SUPervised Visitation Standard
Dependency Referral Form

Notes:
1. A visit cannot be held until this form is completed.
2. If the CBC agency refers the case, a Court Order for Supervised Visitation must also be provided.
3. DCF or the Programs can decide to complete this form in a variety of ways, including but not limited to during telephonic communication with the child protective investigator or the dependence care/case manager.

Date Referral Received By SV Program: ______________________________________________________

Referring Agency(s)/Department
☐ DCF/other child protection Agency involvement? (contact name and phone number)
______________________________________________________________

☐ Local CBC (contact name and phone number)
_____________________________________________________________________________________

☐ Other (list here: ________________________________) (contact name and phone number)
_____________________________________________________________________________________

Transporter: ___________________________ Phone #: ______________
Address: ___________________________________________________________

Unit Supervisor (if applicable): ___________________________ Phone #: ______________
Child Advocacy Center (if applicable): ___________________________ Phone #: ______________
GAL (if applicable): ___________________________ Phone #: ______________
Judge (if applicable): ___________________________ Phone #: ______________
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<tr>
<th>Name</th>
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<th>M/F</th>
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<th>Caregiver/phone #</th>
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Date of first visit: ___________________________  Length of visit: ___________________________

Frequency:  ☐ Weekly  ☐ Bi-Weekly  ☐ Bi-Monthly  ☐ Monthly

VISITATION IS BETWEEN

_________ Child(ren) and _________ Name of visiting party

CONTACTS/PARTIES (if applicable)

MOTHER (name): ____________________________  SS#: __________________
Address: __________________________________  Phone #: __________________
D/O/B: ____________ Other: __________________
Attorney (name): ____________________________  Phone #: __________________

FATHER (name): ____________________________  SS#: __________________
Address: __________________________________  Phone #: __________________
D/O/B: ____________ Other: __________________
Attorney (name): ____________________________  Phone #: __________________
Address: __________________________________

To be completed by DCF/CBC; can be completed in conjunction with SV program staff:

1. Who else is allowed to visit the child(ren)? Is anyone prohibited from seeing the children with or without a no-contact order?

2. Additional notes involving transportation for the child(ren) to and from the visitation?

3. How many visits do you anticipate?

4. Why were the children removed? How long have they been in their current placement?

5. Who is the alleged perpetrator of the abuse? What are the abuse allegations? Are there any sexual abuse allegations?
6. **What is the main purpose of the visitation(s)?**

7. **Are there any topics that should not be discussed?**

8. **Does either parent have any physical or mental health issues?**

9. **Does either parent have any substance abuse or violence issues that may be of concern?**

10. **Does either parent have any criminal issues that may be of concern?**
11. Does the child(ren) have any special physical or mental health issues that may be of concern?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

12. Are there any cultural, ethnic, or religious considerations that will help staff better prepare for visits?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

13. Are there any security concerns or additional comments that should be noted?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

**Reminders:**

1. Prior to the first visit, please remind the visiting party that he/she is required to attend an Intake session with staff prior to the visit. A photo ID is required at this Intake.

2. Please instruct the party transporting the child to arrive promptly at the scheduled appointment (not before or later).

3. Obtain Custody Order from DCF/CBC.

Pursuant to §§ 39.0132(4)(a), 39.0139(4) & (5), and 39.814(4), this referral for Supervised Visitation may be provided only to the parties to the case and to the visitation center at which the court ordered visitation is to occur. Further dissemination is prohibited.
Minimum Elements of an Agreement
with Participants at Florida’s Supervised Visitation Programs

Regardless of the source of referral, all participants in all types of cases must sign and date an Agreement with the Visitation Program prior to the first visit. Each Agreement must include at least the following elements, but can include others at the discretion of the Program:

I. General Program usage information, including:
   - The primary purpose of the visit center
   - Hours of operation of the program, holidays
   - A Hold harmless clause
   - Prohibitions on firearms and weapons of any kind
   - Building access information - arrival and departure time
   - Names of all participants who are authorized to visit
   - Specific security protocols and conditions of the program, including separation of the parties,
   - Supervision method / level
   - Information regarding records access
   - Fee and fine information
   - Process of forms, reports & court correspondence
   - Scheduling and cancelling visits, including the program’s discretion to cancel any visit
   - Medication and dietary restriction information (policies for administering medication)

II. Overall understanding and agreement with Program rules: The Agreement must also include a provision that the participants have reviewed and understand the program’s visitation rules and will abide by them.

III. Specific additional rules: The Agreement must also contain reminders of commonly relevant issues, including at least:

For the visitor:
   - policies regarding suspicion of drug or alcohol use prior to or during visit
   - policies regarding keeping the child’s personal information confidential (where living, phone number etc.,)
   - policies regarding sexual abuse allegation cases
   - restrictions related to physical space where visit occurs
   - policies regarding smoking, pets, cell phones, and cameras
   - policies on gifts
   - a section for special conditions

For both the visitor and the custodian:
   - policies designed to keep visual, auditory, and physical separation of the parents
   - policies regarding food
   - policies regarding corporal punishment
   - policies about speaking foreign languages
   - policies about any topics or remarks that should not be discussed in the presence of the child
   - a section for special conditions
   - signature and date of visitor, custodian, and of center representative
A. INTAKE ELEMENTS FOR DEPENDENCY CASES

Referring Department/Agency Information
• Date referral received by SV Program *
• Name, address and phone number of referring agency *
• Name and phone number(s) of referring child protective investigator and/or referring dependency case manager *

Child Information (complete for each child)
• Name *
• Social security number *
• Date of birth *
• Gender *
• Race *
• What are the abuse allegations? Are there any sexual abuse allegations? *
• Who is the alleged perpetrator of the abuse? *
• Prior removal and/or out-of-home experiences (if any)
• Current living situation or placement type (one parent, relative, non-relative, foster home), and length of time in that setting
• Current caregiver name and phone numbers (home, work, mobile)
• Does the child(ren) have any physical challenges, developmental delays, areas of concern, medications, or special needs that may affect visits? *
• Does the child(ren) have any emotional or mental health issues that may affect visits? *
• What is the grade level of the child(ren)? Are there any school problems or school-related behavioral concerns?
• Is the child(ren) currently involved with a therapist or in a therapeutic program?
• Does the child(ren) have any gang affiliation, criminal activity, and/or Juvenile Justice (DJJ) involvement?

Identification and Contact Data for Visiting Parent(s), and/or Other (Permitted) Visitors
• Name *
• Date of birth *
• Social security number *
• Relationship to child
• Address and phone numbers (home, work, mobile) of each parent *
• Address and phone numbers (home, work, mobile) of every other (allowed) visitor, if any

Visitation Information
• Date of each parent’s last visit with children
• Date of first supervised visitation
• Visitation schedule (weekly, monthly, other) and duration (e.g., 90 minutes, etc.)

Visiting Parent/Other Visitor Status
• Marital status of parents
• What is each parent’s relationship with the other?
• How does each parent describe his/her relationship with the child(ren)?
• Familial and emotional relationship between alleged abuser(s) and child(ren)
• Current status of each parent’s involvement with the alleged abuser and child(ren)
• If out-of-home care, what is each parent’s relationship with the substitute caregiver (relative, non-relative, or foster parent)?
• Is anyone else court ordered to visit the child(ren)? * If so, identify by name and relationship to child(ren)
• Is anyone prohibited from visiting with the child(ren), either with or without a no-contact order? * If so, identify by name and relationship to child(ren)
• Are there any topics that should not be discussed with the child, or in the child’s presence? If so, identify. *

Intake Questions
• Are there any criminal issues or security concerns that should be noted? *
• Is there a history of, or are there any current allegations of domestic violence? * Conduct the Danger Assessment screening for domestic violence required by these Standards (please refer to Section IV).
• Does either parent have any substance abuse issues that could affect visits? *
• Does either parent have any physical or mental health issues, or any special needs that could affect visits and that SV program staff would need to be aware of prior to visits? *
• Are there any parental employment (work hours) or other considerations needed when scheduling visits?
• Does each parent have access to or need information about available community resources? If needed, what information was provided?
• If program offers parenting modeling/education, would either parent like some help with parenting skills and/or discipline techniques?

* These issues may have already been addressed on the Referral, however, additional information may be obtained by Program staff at the time of Intake.
B. INTAKE ELEMENTS FOR NON-DEPENDENCY CASES

Referring Department/Agency Information
- Date referral received by SV Program
- Guardian Ad Litem: Name and phone number
- Judge: Name, case number and division

Child Information (complete for each child)
- Name
- Social security number
- Date of birth
- Gender
- Race
- Current living situation or placement type
- Caregiver name and phone number

Identification and Contact Data for Parties: Custodian, Visitor, and/or Other
- Name
- Social security number
- Address
- Phone number
- Date of birth
- Attorney: Name, phone number and address

Visitation Information
- Date of first visit
- Visitation schedule (weekly, monthly, other)
- Date of last visit with children
- Names of children and visiting party

Intake Questions
- Who else is court ordered to visit the child(ren)?
- Additional notes involving transportation for the child(ren) to and from the visitation?
- How many visits do you anticipate?
- Is abuse alleged? Who is the alleged perpetrator of the abuse? What are the abuse allegations? Are there any sexual abuse allegations?
- Is there domestic violence alleged? Conduct the Danger Assessment screening for domestic violence required by these Standards (please refer to Section IV).
- How does each parent describe his/her relationship with the child(ren)?
- What is each parent’s relationship with the other?
- What is the main purpose of the visitation(s)?
- Are there any topics that should not be discussed with the child, or in the child’s presence? If so, identify.
- Does either parent have any physical or mental health issues, or any special needs that could affect visits and that SV program staff would need to be aware of prior to visits?
- Does either parent have any substance abuse issues that could affect visits?
- Are there any security concerns or additional comments that should be noted?
• Does the child(ren) have any emotional or mental health issues that may be of concern or that may affect visits?
• Does the child(ren) have any physical challenges, developmental delays, areas of concern, medications, or special needs that may affect visits?
• What is the grade level of the child(ren)? Are there any school problems or school related behavioral concerns?
• Is the child(ren) currently involved with a therapist or in a therapeutic program?
• Does the child(ren) have any gang affiliation, criminal activity, and/or Juvenile Justice (DJJ) involvement?
• Are there any parental employment (work hours) or other considerations needed when scheduling visits?
• Does each parent have access to or need information about available community resources?

Reminders
• Prior to the first visit, remind the visiting party that he/she is required to attend an Intake session with staff prior to the visit. A photo ID is required at this Intake.
• Instruct the party transporting the child to arrive promptly at the scheduled appointment (not earlier or later).
LIST OF
FLORIDA SUPERVISED VISITATION PROGRAMS

First Judicial Circuit

Frieda Flowers, Supervisor
   Erin Lewis
   Heather DeGraaf
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   fried.flowers@chsfl.org
   Heather.degraaf@chsfl.org

Sharon Rogers, Program Director
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   Family Visitation Center
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   850-609-1850  Fax: 850-609-1851
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Sharon Rogers, Program Director
   Judge Keith Brace Family Visitation Center
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   Defuniak Springs, FL 32433
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   sharongrogers@hotmail.com

First Judicial Circuit – Program in Progress

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Second Judicial Circuit

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Laurie White, Director
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Renee Cherowitz, Director of Services
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Tenth Judicial Circuit

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Eleventh Judicial Circuit

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155 South Miami Avenue Suite 500  
Miami, FL 33130  
305/960-5575 Fax: 305/374-6112

Twelfth Judicial Circuit

Pamela Gersbach, Coordinator  
Supervised Visitation Program  
Family Resources, Inc.  
361 Sixth Avenue West  
Bradenton, FL 34205  
941-708-5893 Fax: 941-741-3578  
pgersbach@family-resources.org
Carroll Leis, Program Director
The Children & Families Supervised Visitation Program
2210 S. Tamiami Tr., Ste. A
Venice, FL 34293
941-492-6491 Fax: 941-408-8469
CarrollL@cpcsarasota.org

**Thirteenth Judicial Circuit**

Trish Waterman, Director
Children’s Justice Center’s Supervised Visitation Program
700 East Twigs Street, Suite 102
Tampa, FL 33602
813-272-7179 Fax: 813-276-2404
watermpl@fljud13.org

Michelle Lee-Gilyard, Program Director
Hillsborough Kids, Inc.
c/o Child Abuse Council
4520 Oak Fair Blvd
Tampa, FL 33610
813-765-1595 or 471-0006
Fax:813-471-0007
Michelle.lee@hillsboroughkids.org

Farrukh Quraishi, Program Director
Kids First Visitation Services
3413 W. Fletcher Ave
Tampa, FL 33618
813/963-5437
fquraishi@kidsfirstsvsfl.com

**Fourteenth Judicial Circuit**

Cindy Lee, Community Resource Director
Tri County Community Council
Note: Four programs serving Jackson, Holmes, Washington, Calhoun counties.
P.O. Box 1210
Bonifay, FL 32425
850-547-3688 Fax: 850-547-1010
clee@tricountycommunitycouncil.com

Ginger Hutchison & Valerie Wilson, Directors
Helping Hands Visitation Program
7606 Old Bicycle Road
Panama City, FL 32404
850-871-9006 Cell: 850-866-0971
Dorian Lebeau, Program Director
Stephanie Giles, Program Supervisor
Restoration Supervised Visitation Program
310 East 11th St.
Panama City, FL 32401
850-215-5683/Fax: 850-522-0096
restorationi@knology.net
Wanda G. Ranger, M.A., L.M.H.C.
Component Director, Visitation Program
Life Management Center
525 East 15th Street
Children’s Service, Bldg. A
Panama City, FL 32405
850-522-4485 x1424
wranger@lifemanagementcenter.org

Fifteenth Judicial Circuit

Maria Giuliano, Director
Family Connection Program
205 N. Dixie Hwy. 5th Floor
West Palm Beach. FL 33401
561-355-3200 Fax: 561-355-1930
mguiliano@co.palm-beach.fl.us

Eugenia Davis, Director
American Therapeutic Corporation
717 East Palmetto Park Road
Boca Raton, FL 33432
561-361-8427 Fax: 561-447-9614
www.americantherapeuticcorp.com

Sixteenth Judicial Circuit

Wendy Silaghi, Community-Based Care Manager
Wesley House Family Services
3114 Flagler Ave.
Key West, FL 33040
305-293-0850
Wendy.silaghi@wesleyhouse.org

Diana Parson, Supervised Visitation Coordinator
Wesley House Family Services
175 Wrenn Street
Tavernier, FL 33070
305-853-3244
diana.parson@wesleyhouse.org
Narceline Clairjuste, Supervised Visitation & Transport Coordinator
Wesley House Family Services
3114 Flagler Ave.
Key West, FL 33040
305-293-0850
305.304.0047 (cell)
Narceline.clairjuste@wesleyhouse.org

Seventeenth Judicial Circuit

Miriam Filp-Jimenez
Our House
408 NE 4th Street
Ft. Lauderdale, FL 33301
954-765-4159 Fax: 954-765-4075
mfjimenez@broward.org

Angela Coley, Director
American Therapeutic Corporation
1001 West Commercial Boulevard
Ft. Lauderdale, FL 33309
954.938.0919 Fax: 954-938-6804

Kenneth Kramer, PA
200 SE 6th Street
Suite 604
Fort Lauderdale, FL 33301
kennethkramerpa@bellsouth.net

Eighteenth Judicial Circuit

Cindy Mitchell, Director
The Salvation Army N. Central
Brevard County DV Program
PO Box 940, Cocoa, FL 32923
321-631-2766 (ext.22) 321-631-7914
Cindy_mitchell@uss.salvationarmy.org

Ida Rivera, Director
Family Focus, Salvation Army
1610 West Airport Blvd.
Sanford, FL 32773
407-323-6848 (ext.225) Fax: 407-323-3691
ida_rivera@uss.salvationarmy.org
Renee Cherowitz, Director of Services
Dr. Deborah Day
Psychological Affiliates, Inc.
Partners with Families
2737 W. Fairbanks Ave.
Winter Park, FL 32789
407-740-6838
r.cherowitz@psychologicalaffiliates.com
Dday234@aol.com

Note: Serves both the 9th and 18th Circuits

Dana Giblock, Program Manager
Kidspeace Supervised Visitation Program
711 Ballard Street
Altamonte Springs, FL 32701
407.339.7451 x303
Dana.Giblock@kidspeace.org

Eighteenth Judicial Circuit - Program in Progress

Brienne Robertson (Park Avenue Baptist Church)
RobertsonB@parkavenue.org

Nineteenth Judicial Circuit

Jenene D. McFadden, Program Manager
Nicole Rentmeester, Site Supervisor
Doug Borrie, Ph.D., Assistant Executive Director
Valued Visits- Exchange Club CASTLE
800 N. Virginia Ave., Ste. 34 & 35
Ft. Pierce, FL 34982
772-461-0863 Fax: 772-468-0690
jmcfadden@exchange castle.org
nrentmeester@exchange castle.org
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Other office locations:
1275 Old Dixie Hwy
Vero Beach, FL 34960

3824 SE Dixie Hwy
Stuart, FL 34997
Nineteenth Judicial Circuit - Program in Progress

Elizabeth Maxwell
Maxwell & Maxwell, P.A.
Okeechobee Visitation Center
405 NW Third Street
Okeechobee, FL 34972
(863) 763-1119 Fax:(863) 763-1179
okeechobeelawyer@yahoo.com

Twentieth Judicial Circuit

Gail Tunnock, Program Director
Family Safety Program
Children’s Advocacy Center of Collier County
1036 6th Ave. North
Naples, FL 34102
239-263-8383, ext. 23 Fax: 239-263-7931
gtunnock@caccollier.org

Tom Desio, Director
Shellie Brady, Child Welfare Case Manager Supervisor
Lutheran Services Florida
4950 Ford Street Extension
Ft. Myers, FL 33916
239-461-7645 FAX: 239-461-7695
tdesio@childnetswfl.org
sbrady@childnetswfl.org

Daryl Garner, Director
Charlotte County Supervised Visitation Center
The Bill Reilly Center
3440 Depew Cr.
Port Charlotte, FL 33952
941-255-0677 Fax: 941-255-0797
billreillycenter@embarqmail.com

Linda Bluhm, Program Director
Children’s Home Society, Family Connection Center
1940 Maravilla Ave
Fort Myers, FL 33901
239-334-0222 Fax: 239-334-0244
Linda.bluhm@chsfl.org
Twentieth Judicial Circuit - Programs In Progress

Sandra Pavelka, Ph.D.
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Associate Professor, Division of Public Affairs
Florida Gulf Coast University
College of Professional Studies
10501 FGCU Blvd. South
Ft. Myers, FL 33965-6565
239.590.7835 voice
239.590.7842 fax
sobrien@fgcu.edu
OPTIONAL COMPLIANCE FORMS

The following are sample optional forms developed by the Clearinghouse to assist Program Directors with achieving compliance with the new Standards. The Clearinghouse has over a dozen sample forms on its website. Programs may choose to use these forms, or they may create their own to track compliance with the Standards.
Sample Law Enforcement Agreement

In order to enhance community safety, the ____________________________ Program and _____________ Police/Sheriff’s Department enter into this Agreement on this ___ day of ________, 2008.

Program agrees to the following:

1. To assist representatives of Department in understanding the mission, goals and services of Program;
2. To keep the Department apprised of hours and days of operation and names of key staff;
3. To draft protocols for periodic communication between the Department and the Program;
4. To provide copies of administrative procedures and policies to Department, and apprise Department of changes in a timely manner;
5. To work with the Department to design a method of reducing the impact that any arrests made on site will have on participants.

Police Department agrees to the following:

1. To designate a representative of Department to serve on Program’s community advisory board;
2. To conduct an evaluation of the Program’s offices in order to make recommendations on enhancing site safety;
3. To review Program’s policies and procedures and make recommendations for enhancing client safety;
4. To conduct local and state background checks on defendants referred in domestic violence cases;
5. To contact the Program whenever Agency has outstanding warrants for arrest on any person using the program;
6. To refrain whenever possible from arresting any parent in the presence of his or her child or other program participants;
7. To lessen the impact of any emergency arrests made on site by waiting until the visit is over and the parent has left the building;
8. To make any emergency arrests out of the presence of program participants whenever possible.

_________________________________________										 	 ____________________
Program Director Signature										 	 Date

__________________________________________	 	 ____________________
Chief of Police/Sheriff Signature		 	 	 	 	 	 Date

This is a sample optional form developed by the Clearinghouse to assist Program Directors with achieving compliance with the new Standards. The Clearinghouse has a complete list of sample forms on its website.
## Principle One: Safety Checklist Supervised Visitation Programs

This optional checklist tracks the requirements of Principle One: Safety for all Supervised Visitation Programs (Standards I to XVIII).

<table>
<thead>
<tr>
<th>Compliance Measure</th>
<th>Requirement Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program has written comprehensive policies and procedures. (Standard I)</td>
<td>Y N</td>
</tr>
<tr>
<td>Copies of policies and procedures have been given to all participants and referring sources. Each case file contains signatures and date on which the participants were given or informed of the policies and procedures. (Standard I)</td>
<td>Y N</td>
</tr>
<tr>
<td>Copies of written notices to the courts and referring agencies regarding any changes in Program operation, policies, procedures, or capacity. (Standard I)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written checklist regarding premises safety and comfort plan. (Standard II)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written policy as to the kinds of referrals it will accept. (Standard III)</td>
<td>Y N</td>
</tr>
<tr>
<td>In every individual case file there is at least one of the following:</td>
<td></td>
</tr>
<tr>
<td>□ A signed court order for supervised visitation (or an order with the same info in some other format) if the case is referred by the court or DCF/CBC;</td>
<td>Y N</td>
</tr>
<tr>
<td>□ A completed Standard Referral Form (or form with the same info in another format) if the case is referred by DCF/CBC; or</td>
<td></td>
</tr>
<tr>
<td>□ A referral from some other agency that assists families, or a self-referral, both with an agreement of the parties.</td>
<td></td>
</tr>
<tr>
<td>(Standard III)</td>
<td></td>
</tr>
<tr>
<td>Program has documentation affirming that participants were provided with copies or explanations of the Program’s comprehensive policies and procedures. (Standard III)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has signed copies of the Party’s Agreement with the Program (Standard III)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has a current copy on file of:</td>
<td></td>
</tr>
<tr>
<td>□ The Agreement with the Court</td>
<td>Y N</td>
</tr>
<tr>
<td>□ The Agreement with DCF</td>
<td></td>
</tr>
<tr>
<td>□ Annual Affidavits of Compliance</td>
<td></td>
</tr>
<tr>
<td>(Standard III)</td>
<td></td>
</tr>
<tr>
<td>Each case file includes documentation that a Danger Assessment was conducted.</td>
<td>Y N</td>
</tr>
<tr>
<td>(Standard IV)</td>
<td></td>
</tr>
<tr>
<td>Copies of safety evaluations done by other entities which indicate domestic violence exists in the family are also kept on file. (Standard IV)</td>
<td>Y N</td>
</tr>
<tr>
<td>Each case file contains a copy of the Program’s Intake form. (Standard V)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written protocol for rejecting cases. (Standard VI)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written criteria for the termination or suspension of visits. (Standard VI)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written protocol for notifying the referral source of the termination or suspension of visits. (Standard VI)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program Discretion is included in Agreement with the Court. (Standard VII)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written child orientation protocol. (Standard VIII)</td>
<td>Y N</td>
</tr>
<tr>
<td>Each case file includes a copy of the child orientation form. (Standard VIII)</td>
<td>Y N</td>
</tr>
<tr>
<td>Each case file includes the minimum mandatory documentation for case files. (Standard IX-A)</td>
<td>Y N</td>
</tr>
<tr>
<td>Each case file includes records of parent/child visits. (Standard IX-B)</td>
<td>Y N</td>
</tr>
<tr>
<td>Each case file includes summary and observation notes. (Standard IX-C)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has copies of any reports to the Court for random audit. (Standard IX)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written policies on information-sharing, record maintenance, and destruction of records. (Standard IX)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has job descriptions specifying who is entitled to view files and a system by which the files are kept in a secure location. (Standard X)</td>
<td>Y N</td>
</tr>
<tr>
<td>Program has written policies concerning confidentiality and how release of case information is handled. (Standard X)</td>
<td>Y N</td>
</tr>
<tr>
<td>Compliance Measure</td>
<td>Requirement Met</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Program has written policies for formal and informal reviews of cases in which visits have been accepted and in which visits are ongoing. (Standard XI)</td>
<td>Y</td>
</tr>
<tr>
<td>Informal reviews of cases are notated in the case file at least every 60 days. (Standard XI)</td>
<td>Y</td>
</tr>
<tr>
<td>Program Director or their designees must conduct and document a formal case review of each individual open case every 6 months, starting from date of first visit until case is closed. (Standard XI)</td>
<td>Y</td>
</tr>
<tr>
<td>Formal reviews are documented, dated, and notated as to the staff who conducted the review. (Standard XI)</td>
<td>Y</td>
</tr>
<tr>
<td>Program has written child safety policies and site practices on file which reflect the considerations of Standard XIII.</td>
<td>Y</td>
</tr>
<tr>
<td>Program has written policies regarding cases of sexual abuse of file which reflect the content of Section XIV.</td>
<td>Y</td>
</tr>
<tr>
<td>Program has a written gift policy and a consistent, verifiable process that ensures parents/visitors are sensitively informed of the policy at the time of visitation initiation. (Standard XV)</td>
<td>Y</td>
</tr>
<tr>
<td>Program has proof of insurance. (Standard XVI)</td>
<td>Y</td>
</tr>
<tr>
<td>If program offers off-site visitation in non-dependency cases, it must provide the following:</td>
<td>Y</td>
</tr>
<tr>
<td>□ Proof of liability insurance which includes provision for off-site visitation</td>
<td>N</td>
</tr>
<tr>
<td>□ Copies of court orders in all off-site visits which include a statement that off-site visitation is in the child’s best interest.</td>
<td>N</td>
</tr>
<tr>
<td>□ Copies of Program policies and procedures specifically dealing with off-site security issues, including the Program’s right to decline referrals and/or decide not to offer any off-site visitation structure.</td>
<td>Y</td>
</tr>
<tr>
<td>□ Copies of Certificate of Completion of Clearinghouse’s “Off-site Considerations” Training.</td>
<td>N</td>
</tr>
<tr>
<td>□ Copies of the Agreement with the Court enumerating the prerequisite requirements. (Standard XVIII)</td>
<td></td>
</tr>
</tbody>
</table>

Program Director Signature ___________________________ Date ___________________________

This is a sample optional form developed by the Clearinghouse to assist Program Directors with achieving compliance with the new Standards. The Clearinghouse has a complete list of sample forms on its website.
### Optional Supervised Visitation Staff Training Requirements (24 hrs)

Staff/Volunteer's Name: ___________________________________________  DOB: __________

This optional checklist helps track the requirements of Principle Two: Standard III for all Supervised Visitation Monitors, Directors, volunteers, or interns. All staff must have completed these hours before engaging in unsupervised contact with the families. Additional requirements may also apply to some personnel.

<table>
<thead>
<tr>
<th>Training Topic</th>
<th>Date/Hours</th>
<th>Date/Hours</th>
<th>Date/Hours</th>
<th>Total Hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Policies and Procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety for all participants</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mandatory child abuse reporting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FL Standards and Statutes (Keeping Children Safe Act)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional boundaries, conflict of interest, confidentiality</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic Stages of development</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effects of separation and divorce on children and families</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grief/loss relating to parental separation and removal from the home due to child abuse/neglect</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural sensitivity, multiculturalism, and diversity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Danger assessments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family violence (domestic violence and the effects on children)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child maltreatment, including child sexual abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service to parents/children with mental health/developmental issues, phys./emotional impairment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program documentation policies and philosophies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent introduction/re-introduction</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intervention to promote change</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parenting skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assertiveness training/conflict resolution</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How/when to intervene during visits / exchanges to maintain the safety of all participants</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preparation of factual observation notes and reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL TRAINING HOURS**

**Completed**  
Y / N

Additional Notes (if any): ________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
Optional Dignity and Diversity Checklist

This list tracks the requirements listed in Principle Three: Dignity and Diversity. These requirements are to be updated annually.

<table>
<thead>
<tr>
<th>Compliance Measure</th>
<th>Requirement Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative files contain non-discriminatory practices statement signed by the Director. (Standard I)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain evidence that each family is asked in Intake what they may need to make the service sensitive to the unique characteristics of that family. Verification through case file audit.</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain copies of job descriptions, recruitment material, outreach letters to community organizations, or other material demonstrating the Program has sought diverse staff/volunteers/interns. (Standard II)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain documentation showing efforts to collaborate w/ the court, community agencies, and groups to facilitate the availability of bilingual staff within the last calendar year. (Standard III)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain documentation showing efforts made to find funding for interpreters (if program has had to decline referrals because of lack of interpreters). Fliers, letters, meeting agendas, and summaries of phone conversations are acceptable forms of proof. (Standard III)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain copy of written policy demonstrating that Program allows families under some circumstances to bring other adults or children to the visit or exchange. (Standard IV)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain evidence of an annual review of Program forms, policies, procedures, and materials for cultural responsiveness, competence, and relevance – put in writing and placed in file, performed by the Director. (Standard V)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain documentation of Multi-Cultural Efforts: date of multicultural review, any changes made to documents, and any outside assistance sought and/or obtained. (Standard V)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain evidence of training in valuing multiculturalism (Standard V) – See “Supervised Visitation Staff Training Requirements” form (Principle Two: Standard III).</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain written copy of Program’s grievance procedure on file. (Standard VI)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain form for all staff to sign regarding confidentiality. (Standard VII)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Administrative files contain written policies regarding different levels of service compliance offered to families (e.g. individual visits, group visits) (Standard VIII)</td>
<td>Y / N</td>
</tr>
</tbody>
</table>

Program Director Signature ___________________________ Date ______________________

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# Checklist of Requirements for Principle Four: Community

Pursuant to Principle Four: Standard I, Supervised Visitation and Monitored Exchange Programs staff should be knowledgeable about other community agencies. The following is an optional form which lists compliance measures for this standard.

<table>
<thead>
<tr>
<th>Compliance Measure</th>
<th>Requirement met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program has a current listing of community resources, including a wide variety of services commonly accessed by families involved in the court system.</td>
<td>Y / N</td>
</tr>
<tr>
<td>Program directors have contacted other agencies and organizations within the last calendar year to inform them of the Supervised Visitation Program’s mission, scope, and services.</td>
<td>Y / N</td>
</tr>
<tr>
<td>Logs or copies of written communication for the above compliance measure are attached.</td>
<td>Y / N</td>
</tr>
<tr>
<td>Program has a written policy regarding scope and nature of services offered by the program, as well as policies about case-specific information sharing and waivers/releases allowing such.</td>
<td>Y / N</td>
</tr>
<tr>
<td><strong>Transparent Collaboration in Individual Cases:</strong> Program has formal, written policies on file re: sharing confidential/identifying information with other groups/agencies (e.g. GAL, child advocacy center, rape crisis or domestic violence advocates, etc.)</td>
<td>Y / N</td>
</tr>
<tr>
<td>Voluntary consent forms have been signed by the involved parties in cases where identifying information has been shared.</td>
<td>Y / N</td>
</tr>
</tbody>
</table>

Attach written policies pertaining to these compliance measures to this checklist.

________________________  ____________
Program Director Signature Date

This is a sample optional form developed by the Clearinghouse to assist Program Directors with achieving compliance with the new Standards. The Clearinghouse has a complete list of sample forms on its website.
COMMITTEE MEETING INFORMATION

All Committee Meeting information is posted on-line and may be accessed at any time via the following page links:

http://familyvio.csw.fsu.edu/
The Institute for Family Violence Studies at Florida State University
(click on Clearinghouse for Supervised Visitation)

http://familyvio.csw.fsu.edu/CHV.php
The Clearinghouse for Supervised Visitation
(under Information for Supervised Visitation Programs, click on Message Board and Archive)

Board Index
(click on 2008 New Standards for SV to access the website)

Working documents of the Supervised Visitation Standards Advisory Committee are posted here, including monthly schedules for meetings, minutes for all meetings, and working drafts for consideration/comments/recommendations from Committee members, Program Directors, and other interested parties.

Other material desired may be received in hardcopy form or electronically by contacting the Clearinghouse:

Phone 850.644.6303
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TRAINING MATERIALS
AVAILABLE ON THE CLEARINGHOUSE WEBSITE

In addition to this Report and Standards, the Clearinghouse on Supervised Visitation has developed a substantial collection of work related to Supervised Visitation and Monitored Exchange.


- The only paper newsletter for Florida’s supervised visitation providers: *The Family Visitation Times*, which contains program news, research, training materials and a statewide directory, currently published twice a year since 1997. Back issues are archived on the website.

- The only newsletter for the legal system on supervised visitation issues: *The Bar & Bench Visitation Report*, which contains news, research, and practical information for making court referrals safe and appropriate; currently published twice a year since 1999. Back issues are archived on the website.

- **Child Sexual Abuse Referrals: A Curriculum for Supervised Visitation Providers**. This manual was also created in 2003 and produced as an on-line curriculum with video and voice over in 2004.
• **A Toolkit for Collaboration between Florida’s College and Universities and Supervised Visitation Programs**, first printed in 2004, available both online and in hard copy.

• **A Toolkit for Monitored Exchange Services**, first printed in 2005, available online and in hard copy.

• The Data Base on Supervised Visitation, and training material, including a CD-Rom, exclusively for Florida’s Supervised Visitation Providers. This web-based Data Base, which began service in 2005, tracks both program and case information, and is a valuable tool for individual programs and for statewide data. The Data Base began collecting data on January 1, 2005, and to date reflects data on over 56,000 services (visits/exchanges).

• Website for the posting and archiving of SV material. This website is the site that holds all of our on-line curricula and archived newsletters.

• Supervised Visitation Program Administrative Materials, which include forms and samples of a wide variety of administrative documents.

• Monthly e presses for email communication and quarterly memoranda, archived on the website.

• Technical assistance and training to Florida programs, their advisory committees, and pro bono counsel.

• Research on supervised visitation, including articles published online and in law reviews.