

Supervised Visitation Standards Advisory Committee

Preliminary Report to the Florida Legislature



November, 2007

Clearinghouse on Supervised Visitation
Institute for Family Violence Studies
Florida State University

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Points of view are those of the authors and do not necessarily represent the official position
or policies of the State of Florida or the Department of Children and Families.

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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 1990s. 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), the Governor's Task Force on Domestic Violence, and the U.S. Department of Justice.

Dr. Wendy Crook was appointed Director of the Institute for Family Violence Studies in early 2006. Dr. Crook brought to the Institute 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. 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. Oehme currently serves as coordinator of the Supervised Visitation Standards Advisory Committee.

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.
- Support the development of innovative programs for reducing family violence.
- 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 and community organizations on family violence concerns

Affiliated Faculty

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

- **William B.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**, 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.
- **Nat Stern, J.D.**, John W. and Ashley E. Frost Professor, College of Law; Expertise in constitutional law issues, 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 Mental Health Center staff

Florida Domestic Violence Needs Assessments

Florida Sexual Violence Needs Assessment

Family Violence and Homelessness Projects

Bullying in Schools

Workforce Services for Targeted Groups

The Clearinghouse on Supervised Visitation

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. 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, *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.

Since 1996, The Clearinghouse has also produced two semiannual 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 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

The Clearinghouse on Supervised Visitation and Florida Supervised Visitation Standards Committee drew on the expertise, models, resources, and policies of many organizations and agencies in shaping these recommendations, 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, and the Florida Department of Children and Families.



Introduction and Background

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 noncustodial 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 residential and nonresidential parent immediately before and after unsupervised visitation);
- 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.

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 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. At the time the database was developed, 38 programs existed in the state, up from 15 programs in 1997. As of May 2007, the Florida database housed at FSU holds information on 5,776 cases, 23,105 clients, and 77,988 services representing data entered since January 2005. Included are dependency cases, domestic violence cases, and divorce/paternity cases involving custody disputes.

The following statistics present an analysis of data from 47 of the 63 programs collected from January 2005 to February 2007. Please view the entire reports at <http://familyvio.csw.fsu.edu>.

Summary of Findings from 2005-2007

About the Programs

- Two out of every three programs (67%) responded that they are part of larger non-profit programs
- Only one program (2.8%) reported that it is a faith-based agency
- The most common (47%) regional coverage by the programs and sites are urban, suburban, and rural areas together
- The majority (70%) of programs and sites cover at least two types of regions
- Over half (53%) of all programs reported that they were operational for 40 hours or more a week
- Thirty-five (66%) programs reported they were open at least five days a week
- The majority of program directors have at least a Bachelor's degrees (81%)
- Nearly half of all program directors reported graduate degrees (44%)
- 28% of directors reported they have some form of licensure or certification
- The majority (80%) of the programs that responded reported they had agreements with the court at the time they submitted data
- Most respondents (77%) said their court agreements were either not renewed at the time they submitted data, or their agreements had not been renewed since January 2005
- The majority (80%) of all programs responding reported having nine or fewer employees
- 74% of all programs that responded reported employing fewer than six full time equivalents
- 79% of all programs that responded reported use of volunteers
- 77% of all programs that responded reported use of interns
- 63% of all programs received funding from Access and Visitation (DCF), the most common source of funding
- 54% of all programs received funding from Client Fees for Service, the second most common source of funding
- 39% of all programs that responded reported an operating budget of \$50,000 or less in the last year
- More than half (57%) of all programs that responded reported budgets of \$100,000 or less
- Only 23 of the 36 programs submitted budgetary information
- The typical length of visit reported is 1.5 hours (38%)
- 98% of all programs and sites report a typical length of visit of two hours or less
- 83% of all programs and sites reported providing Supervised Visitation; the most common service provided
- 64% of all programs and sites reported providing Monitored Exchange; the second most common service provided

- Approximately one out of every four supervised visitation program offers some kind of parent education service
- One on one Dependency cases are the most common primary service provided (89.4%)
- One on one DV Injunction cases are the second most common primary service provided (78.7%)
- Supervised visitation programs are four to six times more likely to offer one on one visitation than group visitation
- Of those programs and sites that responded, 43% have Law Enforcement as a means of security
- All but two of the responding programs and sites reported they have some form of security equipment (96%)
- 40% of all programs and sites had to either delay or deny services in the last 12 months due to limited/full capacity
- 43% of all programs and sites put clients on a waiting list due to limited/full capacity
- 11% of all programs and sites had to deny or delay services due to a language barrier or lack of an interpreter
- 13% of all programs and sites reported providing offsite visitation services

About the Clients

1. Case Characteristics:
 - a. The majority of case referrals reported were in Dependency cases (57%). Injunctions for Protection against Domestic Violence accounted for 26% of referrals, followed by Dissolution of Marriage (12 %).
 - b. The most frequently-reported reason for referrals was Domestic Violence (53%) followed by Child Abuse/Neglect (20%) and Parental Substance Abuse (17%).
 - c. The most frequently reported type of service requested in referrals was Supervised Visitation (93%). Concurrently, the most frequently reported type of service provided was Supervised Visitation (93%). Monitored Exchange was requested 7% of the time and provided for seven percent of the time.
 - d. A paid staff provided the vast majority of services (91%), with unpaid staff providing services in nine percent of the cases.
2. Child Characteristics:
 - a. The largest single age group is 4-6 years of age (27%), followed by 7-9 years of age (22%).
 - b. The vast majority of children were aged nine years old or younger (65%).
 - c. The majority of children were White (63%), followed by Black/African American (21%) and Hispanic (13%). Most of the Black/African American children were in dependency cases.

d. The gender distribution for children served was approximately equal with males representing 51% and females representing 49%.

3. Visitor Characteristics:

a. The proportion of males to females was almost equal, with males representing 50% of visitors and females representing 49% of the visitors. In Dependency cases, 57% of the visitors were females; in domestic violence cases, 63% of the visitors were males.

b. The majority of visitors were White (67%) followed by Black/African American (19%) and Hispanic (14%).

c. The majority of visitors were parents (98%). Of the parents, mothers represented 51% and fathers represented 48%.

d. The most commonly reported judicial circuit from which visitors came were the Fourth and Fifth Judicial Circuits, and representing 15% of the cases. This was followed by the Ninth Circuit (12%).

4. Custodian Characteristics:

a. The vast majority of custodians were female (76%).

b. The majority of custodians were White (70%), followed by Hispanics (17%) and Black/African American (11%).

c. The vast majority of custodians were parents of the child (82%). Grandparents made up seven of custodians. For parents, the majority were mothers (73%); fathers comprised 27% of parents.

d. The most commonly reported judicial circuit from which custodians came from was the Fifth Judicial Circuit, representing 18% of the cases. This was followed by the Twelfth Circuit (12%) and the Ninth Circuit (11%).

Although only 25% of cases originate as part of an Injunction for Protection Against Domestic Violence, about half of all cases referred to supervised visitation programs in Florida involve domestic violence.

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 agreed to comply with the standards. The purposes of providing supervised visitation expressed by the standards are "(1) To assure the safety and welfare of the child, adults, and program staff during supervised contact; (2) To enable an ongoing relationship between the noncustodial parent and child by impartially observing their contact in a safe and structured environment and to facilitate appropriate child/parent interaction during supervised contact". 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.

The Legislative 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 them. §753.03 went into effect on July 1, 2007, requiring the Clearinghouse on Supervised Visitation, within the Florida State University Institute for Family Violence Studies, to create an advisory board to assist with the creation of those standards and procedures. This Preliminary Report is due December 31, 2007, and a Final Report is due December 31, 2008.

§ 753.03. Standards for supervised visitation and supervised exchanged 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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Arlene Carey, Policy Specialist / Office of Family Safety; 1317 Winewood Blvd.; Building 6, Room 136 Tallahassee, FL 32399; 850-921-1928; arlene_carey@dcf.state.fl.us

Sharon Rogers, Program Director / Judge Ben Gordon, Jr. Family Visitation Center; P.O.Box 436; Shalimar, FL 32579; 850-609-1850 Fax: 850-609-1851; Sharon@visitationctr.gccoxmail.com

Nina M. Zollo, Esquire, Senior Policy Director / Florida Coalition Against Domestic Violence; 425 Office Plaza Drive; Tallahassee, FL 32301; Main Office in TLH – 850-425-2749; zollo_nina@fcadv.org

Rich Komando, Circuit Director / Guardian Ad Litem Program; 220 East Bay Street, 6th Floor; Jacksonville, FL 32202; 904-630-1200; Richard.komando@gal.fl.gov

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Jennifer Dritt, Executive Director / Florida Council Against Sexual Violence; 1311 N. Paul Russell Rd. Suite A204; Tallahassee, FL 32301; 850-297-2000; jdritt@fcasv.org

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

Judge Jeri Cohen / Eleventh Judicial Circuit; 3300 N.W. 27th Ave., Rm. 205; Miami, FL 33142; 305-638-6879

Judge Clyde Wolfe / Seventh Judicial Circuit; 4010 Lewis Speedway; St. Augustine, FL 32084; 904-827-5647

Staff to the Advisory Committee include:

Karen Oehme, Director Institute for Family Violence Studies, Florida State University College of Social Work

DeAnn Scarborough, Coordinator of Research Programs, Florida State University College of Social Work

Kristin Sakamoto, Florida State College of Law, Legal Intern

Kathryn Gerber, Administrative Assistant

Sonia Crockett, J.D., Consultant

**Supervised Visitation Standards Advisory Committee
Initial Set of Recommendations
to the Florida Legislature
November, 2007**

The Supervised Visitation Standards Advisory Committee formally recommends that the following two issues be considered *immediately*.

1. PARTNERSHIP AND COMMUNICATION WITH THE COURT:

Florida's supervised visitation programs work in partnership with the court system to protect children while promoting their safe and healthy interaction with their parents. Supervised visitation programs must have access to the court, yet programs report that they have difficulty accessing the court to report problems related to the supervised visitation process, including:

- a. Parental noncompliance with program rules, including no-shows and cancellations without cause;
- b. Children's unwillingness to participate in visits;
- c. Parental substance abuse;
- d. Parental mental illness issues interfering with visits;
- e. Parental misconduct on-site;
- f. Parental misconduct off-site reported to visitation staff, including but not limited to parental arrests, additional litigation in family/dependency/criminal court, 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 by recommending that the legislature amend Florida Statutes 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.

Recommendation #1

The Committee urges the Florida Legislature to amend Chapter 753, Florida Statutes, to allow supervised visitation programs to alert the referring Court in writing when there are problems or compliance issues in case referrals governed by Chapters 61 and 741. The Court will have the option of setting a hearing in the matter or noting in writing that the matter was resolved without a hearing. The Committee also recommends revisions to Chapter 753 to require caseworkers in cases governed by Chapter 39, Florida Statutes, to motion the court for a hearing when alerted to problems or compliance issues with supervised visitation case referrals. The Committee sees no need to formally cross-reference and recommends that no formal cross-references be made to 741 in any bill that may result from these revisions to Chapter 753, Florida Statutes.

2. SECURITY AND FUNDING:

Supervised visitation programs serve a crucial need in the state of Florida and cases referred to supervised visitation programs present a variety of risks onsite at those programs, including

- a. The risk of continued domestic violence
- b. The risk of parental abuse of substance
- c. The risk of one parent stalking another parent
- d. The risk of child abuse
- e. The risk of parental kidnapping
- f. The risk of critical incidents relating to program rule violations
- g. The risk of revictimization for parent or child.

The Supervised Visitation Standards Advisory Committee concludes 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 underfunded and often do not have the budgets to provide such security coverage. Thus, it should be the goal of the State of Florida to fully fund security onsite at supervised visitation programs.

Recommendation #2

The Committee urges the legislature to fully fund security onsite at supervised visitation programs so that vulnerable families are protected during visitation.



Committee-Approved Drafts

For the 2007 Preliminary Report, the Committee offers the following drafts of work product:

Definition of Supervised Visitation Program (Draft)

A supervised visitation program is for families in which the children have been removed from and placed outside the home as a result of abuse or neglect or other risk of harm to such children and for children whose parents are separated or divorced and the children are at risk because:

- (1) There is documented sexual, physical or emotional abuse, or neglect as determined by the court;
- (2) There is suspected or elevated risk of sexual, physical or emotional abuse, or neglect, or there have been threats of parental abduction of the child;
- (3) Due to domestic violence, there is an ongoing risk of harm to a parent or child;
- (4) A parent is impaired because of substance abuse or mental illness;
- (5) There are allegations that a child is at risk for any of the reasons stated in paragraphs (1) through (4) pending an investigation; or
- (6) Other circumstances, as determined by the court, point to the existence of such a risk.

COMMITTEE-APPROVED MISSION STATEMENT OF SUPERVISED VISITATION PROGRAMS (DRAFT)

The mission of Florida's Supervised Visitation Programs is to use well-trained staff to provide safe and respectful supervised visitation services and to coordinate these services within each community. We use four guiding principles, from which come practice standards and compliance standards.

COMMITTEE-APPROVED GUIDING PRINCIPLES FOR SUPERVISED VISITATION PROGRAMS (DRAFT)

The Committee approved of four guiding principles.

I. The unique safety needs of individuals are of paramount importance in supervised visitation programs.

Florida's supervised visitation programs acknowledge that each case and each individual family member may have distinct and unique needs with regard to safety. Programs must seek to identify and meet those needs.

II. Supervised visitation staff must have thorough training on the complex and often overlapping issues that bring families to their programs.

All supervised visitation staff must have comprehensive initial and ongoing training in the dynamics of child abuse, child sexual abuse, child neglect, domestic violence, stalking, substance abuse, mental illness,...

III. All clients who use supervised visitation programs are entitled to be treated in a fair and respectful manner that acknowledges their dignity and diversity.

Florida's supervised visitation programs must treat individuals fairly and respectfully in ways that acknowledge their life circumstances and cultural backgrounds without ignoring the parental behavior that resulted in referral to the program.

IV. Visitation programs should operate within a coordinated network of groups and agencies which seek to address each family's problems.

Supervised visitation does not exist in a vacuum. The families using the programs often have a constellation of problems with which they need assistance. Visitation programs should offer clients meaningful, culturally appropriate linkages to these organizations.

SAFETY (UNDER REVIEW)

The unique safety needs of individuals are of paramount importance in supervised visitation programs.

Florida's supervised visitation programs acknowledge that each case and each individual family member may face distinct risks and have unique needs with regard to safety. Programs must seek to identify and meet those needs.

Discussion draft:

In domestic violence cases, for example, 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.

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, substance abuse, or other dynamics that staff must address.

In cases of parental mental illness, the parent's behavior may be erratic or unpredictable, especially when prescribed medications are not taken as directed. The program may need to visually assess the parent at each visit with a basic understanding of the illness and its manifestations, inquire as to whether the parent has taken medication as directed, and watch for specific behavior which may indicate that the child may be in danger.

SAFETY: THE STANDARDS (DRAFT SEPTEMBER 1, 2007)

Supervised visitation programs must only accept cases in which they have considered and can meet the safety needs of parents and children. Because there is a high level of family violence in supervised visitation cases, these Standards will apply to all cases to protect all participants in the visitation process unless otherwise indicated, 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.

Comprehensive Intake

A program must inquire prior to and during the intake process about the reasons for the referral, and must review and analyze client information and behavior to determine whether services can be provided safely and/or to deny or suspend services because of potential risks of harm to any client or staff member.

Staff must conduct a comprehensive intake and screening in each case to assess the nature and degree of risk for each case. The procedures for intake should include separate interviews with the parties before the first visit. During the interview, the program should obtain identifying and background information including (i) copies of any protective order, (ii) current court orders, (iii) any referral form relating to supervised visitation, (iv) a report of any written records of allegations of domestic violence or abuse, and

(v) in the case of a child or parent's chronic health condition, an account of his or her health needs that might effect visitation.

Compliance measure will be copy of intake forms on file, and screening tool used in each case will be in every case file.

Case Rejection and Termination

A program shall decline to accept a case for which they cannot reasonably ensure the safety of all clients, program staff, and volunteers, including but not limited to the following reasons:

- the volatile nature of the case or client;
- visitation supervisors are not adequately trained to manage issues identified in the intake;
- facilities are not adequate to provide the necessary level of security;
- insufficient resources; or
- conflict of interest.

Terminating Visits: Programs shall end a visit if any person endangers the emotional or physical 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, 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. If a case is rejected or services are terminated or suspended, programs shall inform the court or referring agency the reasons why the case was rejected/terminated.

Compliance Measure: Written protocol for rejecting cases; inclusion of this provision in the Agreement with the Court, updated every 18 months

Compliance Measure: Written criteria for the termination or suspension of visits; written protocol for informing the referral source of the termination or suspension of visits.

Program Discretion

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.

Compliance Measure: Program Discretion included in Agreement with the Court, updated every 18 months.

Child Orientation

If the child is of sufficient age and capacity, the program should include him or her in part of the orientation process. Child orientation is the process by which the child is familiarized with the program, safety protocols, orientation of the space, in an age-appropriate manner by staff.

Any discussion should be presented to the child in a manner appropriate to the child's developmental stage;

Compliance Measure: Written child orientation protocol; copy of child orientation form in each file, stating whether Orientation was held, or the reasons why it was not.

Information Collection

Because they need information to keep all participants safe, supervised visitation programs shall develop policies and procedures consistent with Florida law addressing the collection of information about the case and family and how those records are maintained and released in a manner that protects the safety of children and vulnerable parents. Such policies shall be communicated to the clients.

Compliance Measure: Written policies concerning confidentiality and the protection of staff and volunteers identification in the client file consistent with Florida law.

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.

Contact information: Consistent with Florida law, the program shall ensure that address, contact information, school information, and other location information in domestic violence cases is kept confidential.

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.

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

Program confidentiality.

Programs must keep all case files confidential, with identifying information secure and protected from public view at all times except as provided by law. Confidential information should be shared only with appropriate program staff when necessary. Program employees and volunteers should refrain from discussing any program matters outside of the workplace.

Programs must identify which staff members should have access to confidential family information and should also ascertain which staff members must have access to limited family information in order to complete their job function.

Compliance Measures: 1. Program job descriptions enumerating who is entitled to view files and a system by which the files are kept in a secure location. 2. Copy of signed Code of Conduct for each employee/volunteer/intern with a confidentiality pledge.

Periodic Reassessment

Programs shall periodically reassess 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

Compliance Measure: Written protocols for formal reviews and Informal reviews, which may include a checklist. Informal reviews may entail verbal communication with parents notated in case file at least every 60 days (although programs are encouraged to do so more often). Formal case reviews every 6 months, including updating of address, phone, all contact information, and updated health information.

Security Policies

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 a custodial parents to remain on-site in a secure location at a minimum 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;
- 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 of, and reporting of critical incidents such as violent, dangerous, or inappropriate behavior of clients;
- 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 onsite, such as metal detectors, camera or recording equipment, breathalyzers, or panic buttons.
- Policies for referring any parent to community resources needed to enhance safety or well-being, including mental health professionals, batterer intervention programs, 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.

Compliance measures: Written policies reflecting the above, updated every 18 months.

Security Personnel

This section under revision.

1. The Committee is considering a Uniform Danger Assessment Policy.
2. The Committee believes that on-site security personnel is a goal for all programs.

Child Safety

If a child refuses to visit with the noncustodial party 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.

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

Children must not be left unattended with a noncustodial parent (their own or any other custodial or noncustodial parent) any time during visitation services.

No person shall spank, hit, or threaten a child at supervised visitation.

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.

Programs must inform a parent if 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 directed by child protective services, the court, or law enforcement during an investigation.

Special Safety Protocols for Cases Involving Sexual Abuse

(The Committee has not yet decided whether there will be separate sections for Cases Involving Domestic Violence, or whether all cases will contain the same restrictions.)

A provider 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.

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. In addition, staff shall

- Allow no exchanges of gifts, money, or cards;
- Allow no photographing, audiotaping, or videotaping of the child;
- Allow no 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;
- Allow no whispering, passing notes, hand signals, or body signals; and
- Allow no supervised visitation in the location where the alleged sexual abuse occurred.

The Committee is considering a Uniform Referral Form.

Insurance

All programs must have general and liability insurance for staff and volunteers.

Compliance measures: proof of insurance

Prohibitions on Making Recommendations

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

Community (not yet reviewed)

Visitation programs should operate within a coordinated community network of groups and agencies which seek to address common family problems.

Supervised visitation programs do not exist in a vacuum. The families using the programs often have a constellation of problems with which they need assistance. Visitation programs should offer clients meaningful, culturally appropriate linkages to these organizations. In addition, programs must offer and seek cross-training from certain groups.

Standards:

Referrals:

Referrals may be made by court order or may be from a child protective agency that has taken custody of

a child. If a referral to a supervised visitation program is made by any other person or agency, that referral must include a signed agreement by the parties.

Compliance Measure:

Signed court orders, referrals from child protective agencies, or signed agreements in each file.

Meaningful Collaboration:

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, common issues in supervised visitation referrals. 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.

Supervised visitation programs shall seek out, identify, and know the scope of these existing community groups and create linkages for proactive outreach and the opportunity for families to access appropriate services. Envisioned in this section is a program's ability to inform clients of specific services, how to access those services, and what specific services each agency can offer the clients.

Clear Scope

Supervised visitation programs shall clearly delineate and describe their specific services so that clients understand the scope and limitations of the visitation program.

If the supervised visitation program chooses to seek input from guardians ad litem, child advocacy center staff, or rape crisis and domestic violence advocates regarding individual cases, the program must have formal, written policies about sharing confidential or identifying information with these groups. All state laws regarding confidentiality must be followed.

Cross-training

Supervised visitation programs must offer outreach to community organizations to enhance the knowledge and skills of staff. At a minimum, cross-training should be sought from and offered to the following organizations:

1. The local certified domestic violence center.

Visitation staff must understand the services offered by the certified domestic violence center, and be able to explain to victims of domestic violence how the domestic violence center staff can assist with reduction of post-separation violence, 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 domestic violence. 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 visitation program. Supervised visitation programs shall seek feedback from domestic violence staff on program policies to enhance client safety, request on-going training in domestic violence dynamics from domestic violence center staff, and offer inter-agency meetings to increase each organization's ability to make knowledgeable and appropriate referrals.

2. The local Guardian ad Litem office.

Visitation 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 visitation program must offer the GAL program meaningful opportunities for cross-training so that the staff of each understand the others' 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 program shall continue to be responsible for monitoring the visit, and may not abdicate such responsibility to the GAL.

3. The local Child Advocacy Center.

Visitation program staff must understand the services offered by the Child Advocacy Centers, and be able to explain to parents and children how the CAC program operates. Likewise, the visitation program must offer the CAC program meaningful opportunities for cross-training so that the staff of each understand the others' 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 program 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.

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 to call certified rape crisis program 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 revictimization that may occur in supervised visitation settings, and responding appropriately 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.

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. The Supervised Visitation program should be aware of the services and responsibilities of the local CPT. Visitation staff must understand the services offered by the CPT, and be able to 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 revictimization that may occur in supervised visitation settings, and responding appropriately to disclosures of abuse, request on-going training in the dynamics of child abuse and its long-term consequences, and offer inter-

agency meetings to increase each organization's ability to make knowledgeable and appropriate referrals.

The visitation program should consult with all of the above groups in developing policy to ensure that staff understand client's needs, and that the safety needs of individuals at the program can be met.

Multicultural partnerships:

Supervised visitation programs should work with representatives from diverse groups in the community to ensure that the visitation program offers culturally sensitive services to its clients. Programs can achieve this goal by seeking culturally diverse trainers and consultants to the creation of policies and procedures.

Compliance Measures:

1. Annual documentation of outreach to community groups, indicating offers for training, training conducted, meetings held, and minutes of meetings.
2. Programs shall also create an annual outreach plan with goal setting for the next 12-month. The annual report must reflect the progress toward those goals.
3. Updated lists and contact information for local resources on housing, food, medical, educational, job training, or other assistance. Indications in case file of referrals made.

Dignity and Diversity (not yet reviewed)

III. All clients who use supervised visitation programs are entitled to be treated in a fair and respectful manner that acknowledges their dignity and diversity.

Florida's supervised visitation 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.

Families referred to supervised visitation programs may be experiencing a wide range of emotions, including frustration, sadness, anger, happiness, confusion, fear, relief, anxiety, and anticipation. The complexities of the court system and judicial processes can exacerbate these emotions. It is essential for program staff to offer the parents (as well as the child, depending on the age and maturity of the child) an opportunity to help shape the visitation process to make it as positive and rewarding as possible. This should be done in such a way as to acknowledge the unique experiences, values, circumstances, and cultural backgrounds of each person receiving program services.

Optimally, all communication between families and the program should be done in the primary language of the family. Thus, programs should seek bilingual staff and interpreters to the extent allowed by program resources.

Program staff should continually assess forms, policies, procedures, and materials for cultural responsiveness, competence, and relevance, seeking outside assistance as necessary.

Fairness: Procedural fairness dictates that all programs must clearly describe, in writing, the nature of the services provided and disclose to the parents and referring sources details about the program services.

A program must have comprehensive written operating policies and procedures available for viewing by parents, which shall include, at a minimum:

- types of services and manner in which they are provided;
- case acceptance and discharge policies;
- procedures for communication with the court, including how the program and the court will avoid impermissible ex parte communication;
- procedures for providing reports to the court;
- payment of fees;
- hours of operation that are accessible to use;
- restrictions for transportation of children;
- security measures and emergency protocol and/or procedures;
- grievance procedures;
- policies and procedures regarding release of information;
- 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.

Appendices

Supreme Court of Florida

MINIMUM STANDARDS FOR SUPERVISED VISITATION PROGRAM AGREEMENTS

I. PROGRAM STRUCTURE

A. Terminology

- (1) Authorized person is a person authorized by the court to be present, in addition to the noncustodial parent, during supervised contact.
- (2) Chief judge means the chief judge of a judicial circuit or his or her designee.
- (3) Child means a unmarried person under the age of 18 who has not been emancipated by order of the court and whose contact with a noncustodial parent is supervised pursuant to a court order. Child may mean more than one child.
- (4) Client means the custodial parent, noncustodial parent, or child receiving supervised contact services pursuant to a court referral to a supervised contact program.
- (5) Custodial parent means a natural or adoptive parent, guardian, or state agency and its representatives, who has temporary or permanent legal custody of a child.
- (6) Documented exchange means that the program documents the transfer of the child between the parents. This type of exchange can be used when there is a history of missed, late, or inconsistent visitation.
- (7) Exchange monitoring means the supervision of a child's movement from the custodial to noncustodial parent at the start of noncustodial parent/child visit or from the noncustodial parent back to the custodial parent at the end of visit. This type of supervised contact is for those cases in which contact causes conflict between the adults but the contact between the parent and child could be expected to proceed without incident.
- (8) Facilitate means to encourage age-appropriate activities, promote a child's safety and welfare, and discourage inappropriate conduct. A Facilitate@ should not be construed to mean therapeutic intervention.
- (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 serves as a statewide resource on supervised visitation issues by providing technical assistance, training, research, and legal assistance.
- (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 supervised visitation means one supervision monitor/observer for several families.
- (12) Individual supervised visitation means one visitation monitor/observer for one family.
- (13) Noncustodial parent may refer to a biological parent or other adult authorized by a court order to have supervised contact with the child.
- (14) Off-site supervision is supervision of contact between the noncustodial parent and child that occurs away from a site under the control of the program and visit supervisor. Off-site supervision may occur in a group setting or on an individual basis.
- (15) On-site supervision refers to the supervision of a noncustodial parent and child on a site under control of the program and visit supervisor. On-site supervision may include a range of closeness of supervision from continuous close monitoring to periods of time during which the noncustodial parent and child are intermittently monitored by video or audio. On-site supervision may occur in a group setting or on an individual basis.
- (16) Phone monitoring may be when the program contacts parties by phone to verify that visitation occurred as ordered, or when the program monitors an actual phone call between the parent and child.
- (17) Program means a person, society, association, or agency, operating independently or under the auspices of the court, that has entered into a program agreement with the chief judge of a circuit to provide supervised contact services pursuant to a program agreement and court order. Program may also include supervised visitation operating under the auspices of the court.
- (18) 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 and providing written reports to the court. The Program Agreement incorporates the program's written operational policies and procedures.
- (19) 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 trained certified or licensed mental health professionals.
- (20) Supervised Contact may include supervised visitation, monitored exchange, and third party exchange services provided by a program pursuant to a program agreement and court order.
- (21) Visitation Agreement is a written agreement between the program and each custodial and noncustodial parent 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 noncustodial parent and the child and to document such observations, as provided by the program agreement and these standards.

- (23) Visitation Supervisor means the individual authorized to facilitate, intervene, and terminate a visit, if necessary. The visitation supervisor may also be the visitation monitor/observer.

B. Purposes of Providing Supervised Visitation

- (1) To assure the safety and welfare of the child, adults, and program staff during supervised contact.
- (2) To enable an ongoing relationship between the noncustodial parent and child by impartially observing their contact in a safe and structured environment and to facilitate appropriate child/parent interaction during supervised contact.
- (3) Where appropriate, to provide written information to the court regarding the supervised contacts.

C. Scope of Services

Supervised contact programs in each judicial circuit shall determine the range of visitation services offered, dependent upon available resources. If resources permit, services shall be offered for dependency, family law, domestic violence cases or other cases as designated by the chief judge. The scope of services should be clearly defined in the program agreement.

D. Guiding Principles

- (1) For all supervised contact services provided by a program pursuant to a court order, the primary obligation shall be to the court.
- (2) Supervised contact is not a long-term solution to a family's problems. The short-term goal is to enable an ongoing relationship between the noncustodial parent and child by impartially observing their contact in a safe, healthy, and structured environment. The long-term goal is to facilitate unsupervised visitation in most cases and establish less structured supervision, where possible, in the remaining cases.
- (3) A program should be independent, accessible, safe, and designed to promote the welfare of the child and family and facilitate parent/child interaction during contact.
- (4) A program's governing authority, training and experience of visitation supervisors, and other resources shall determine the range of services provided and number of clients served.

E. Roles

- (1) The chief judge in each judicial circuit has responsibility for:
 - a. the oversight of a program operating under the auspices of the court; and

- (2) The role of the judge is to determine when supervised contact is appropriate and to ensure that referrals for supervised contact are comprehensive and specific as to the conditions under which the supervised contact is to occur, including the party responsible for the payment of fees for the supervised contact services. The judge shall also ensure that referrals are appropriate for the level of service available in a program.
- (3) The role of a program is to provide a safe, independent site at which supervised contact between the noncustodial parent and child may occur; to ensure that program staff have adequate training to observe the contact; and where appropriate, provide written information about such contact to the court.
- (4) The role of a program director/coordinator is to ensure the overall quality of services provided and he/she will also be able to assume roles associated with that of visitation supervisor.
- (5) The role of the visitation supervisor is to:
 - a. maintain independence from parties;
 - b. ensure that contact between parties proceeds pursuant the visitation agreement and court order;
 - c. relay relevant information relating to the child's welfare between the custodial and noncustodial parent at the commencement and conclusion of supervised contact (e.g. special needs, medication, diet, etc.);
 - d. intervene, where necessary or appropriate, to ensure the welfare of the child or parent;
 - e. if necessary, facilitate child/parent interaction during the supervised contact;
 - f. terminate the visit if the child's safety or that of other parties or staff cannot be maintained;
 - g. provide constructive feedback, correction, or redirection;
 - h. document the visits consistent with the program agreement.

The visitation supervisor may use a visitation monitor/observer to assist in these roles, but the supervisor is ultimately responsible.

Commentary

Nothing in these standards shall be construed to restrict the court in ordering supervised visitation or exchange by the Department of Children and Families, any private mental health professional, and/or other third party as designated in a court order.

II. PROGRAM ADMINISTRATION

A. Governing Authority. Each program shall have a governing authority as defined in these standards.

B. Administration of Programs

- (1) All programs receiving judicial referrals shall comply with these minimum standards.
- (2) Program services shall be provided in a location suitable for the type of supervised contact services provided and be accessible for clients with various needs.
- (3) Independent programs shall annually submit an Affidavit of Compliance with these minimum standards to the chief judge.
- (4) The chief judge may monitor the programs for compliance with the program agreement.
- (5) In the event of a conflict between these minimum standards and local requirements, the chief judge may apply to the Chief Justice for waiver of applicability.
- (6) A program must immediately notify the chief judge of any changes to a program's role, function, operational policies and procedures and/or capacity that affect the program's services provided to the court or its clients.
- (7) A program shall comply with all applicable local, state, and federal laws, statutes and/or regulations.

C. Operating Policies and Procedures. A program shall have comprehensive written operating policies and procedures, which shall include, at a minimum:

- (1) types of services and manner in which they are provided;
- (2) case acceptance and discharge policies;
- (3) procedures for communication with the court, including how the program and the court will avoid impermissible ex parte communication;
- (4) procedures for providing reports to the court;
- (5) the visitation agreement;
- (6) payment of fees;
- (7) hours of operation that are accessible to use;
- (8) restrictions for transportation of children;

- (12) 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.

D. Case Acceptance

- (1) Referrals from the court for any supervised contact service shall be by court order. However, these standards shall not preclude programs from entering into contracts with entities other than the court, such as the Department of Children and Families.
- (2) Upon referral and prior to accepting the case, programs will conduct an intake, for the purpose of obtaining relevant information about the case, the parents, and the child, including special needs of the child.
- (3) Programs shall not discriminate against any client due to race, religion, gender, sexual orientation, national origin, age, disability, marital status, or inability to pay.
- (4) A program shall decline to accept a case for which they cannot reasonably ensure the safety of all clients, program staff, and volunteers, including but not limited to the following reasons:
 - a. the volatile nature of the case or client;
 - b. visitation supervisors are not adequately trained to manage issues identified in the intake;
 - c. facilities are not adequate to provide the necessary level of security;
 - d. insufficient resources; or
 - e. conflict of interest.

Commentary

Programs are encouraged to provide services on a sliding fee basis for clients who have limited financial resources. The court and the program should consider developing a protocol for dealing with the nonpayment of fees, such as civil contempt or other coercive measures available to the court. Also, the court should consider assessing costs against a parent failing to participate in a scheduled supervised contact without good cause or proper notice to the program or other parent.

It is not intended that a program use its authority to decline a case because the program or its personnel believe that contact should not be allowed in a particular type of case or disagrees with a judge's decision to allow contact in a particular case.

E. Intervene or Terminate Contact

- (1) A visitation supervisor shall intervene or terminate a supervised contact whenever he or she believes that the safety of clients, program staff, and volunteers cannot be reasonably ensured.
- (2) A visitation supervisor may intervene or terminate a supervised contact for the following reasons:
 - a. 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 of referral;
 - b. The child becomes ill; or
 - c. The child cannot be comforted for a period exceeding 30 minutes.
- (3) A visitation supervisor shall have the sole discretion to withhold presentation of any inappropriate item or gift from the noncustodial parent to the child.

Commentary

Failure to pay should not be confused with inability to pay. Ability to pay is determined by the court.

F. Discharge

- (1) A program shall suspend or discharge clients for the following reasons:
 1. termination of court referral;
 2. safety concerns that cannot be addressed or other issues involved in the cases that cannot be effectively addressed by the program.
- (2) A program may suspend or discharge clients for the following reasons:
 - a. the case 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 of referral;
 - c. the client continually refuses to pay court ordered fees for supervised visitation services; or
 - d. expiration of the time limit set out by the program or visitation agreement.
- (3) A program shall immediately (within 72 hours) provide written notice to the court and the parties if:
 - a. program services have been suspended or terminated under a condition outlined above;
 - b. the parties agree that they can manage visits or exchanges without supervision; or

G. Records Management

- (1) **Maintaining Records Generally.** A program operating under the auspices of the court shall maintain records pursuant to rule 2.075, Florida Rules of Judicial Administration; independent programs shall maintain all records for a period of 5 years from the last recorded activity, or until the child reaches the age of majority, whichever occurs first.
- (2) **Financial Records.** A program shall maintain appropriate and accurate financial records and follow generally accepted accounting principles.
- (3) **Policies and Procedures.** A program shall make written operating policies and procedures available for review, upon request of a client.
- (4) **Personnel Records.** A program shall maintain a written personnel record for each employee or volunteer, including but not limited to:
 - a. application or resume;
 - b. job title/description;
 - c. law enforcement records check;
 - d. copy of a valid photo identification card recognized in this state for the purpose of indicating a person's true name and age;
 - e. documentation of employee or volunteer's satisfactory completion of minimum training requirements provided in these standards; and
 - f. any other documents obtained or created by the program pertaining to the employee or volunteer.
- (5) **Client Records.** A program shall keep records of all supervised contact services provided pursuant to court order, including but not limited to:
 - a. intake information to include at a minimum:
 1. case name, case number, and nature of referral;
 2. division of court;
 3. court order/referral to program;
 4. photo identification of custodial parent, noncustodial parent, authorized person, and persons authorized to deliver, pick-up, or transport a child, excepting an authorized agent of the Department of the Child and Family Services;
 5. safety and medical concerns; or

6. photo and authorization for alternative custodian, if any.
- b. written correspondence concerning each client or case, including reports to the court; and
- c. cancellations, closures, documentation and written observations, if any.

H. Disclosure of Case Information.

A program shall maintain all records in a discrete manner and shall not disclose, or participate in the disclosure of, information relating to a case to any person who is not a party to the cause, except in reports to the court or as provided by law or court order. Each program shall have a policy protecting any information that might reveal the location of domestic violence victims and their children or any other information that is confidential, as provided by law or order of the court. Release of case information shall be covered by written policies and procedures.

I. Out-of-Circuit Referrals and Courtesy Monitoring

A program has the sole discretion to accept or decline a case referred by the court from another jurisdiction. When such cases are accepted, the program must direct all communication to the referring court.

J. Complaints

- (1) A program must have written procedures regarding the internal management of complaints lodged by clients, or any other party to a case.
- (2) If complaints cannot be resolved through a program's internal grievance procedure, the complaint may be brought to the court's attention by motion to the court.
- (3) Complaints about a program's operational policies and procedures, administration, or management must be directed to the chief judge for resolution.

K. Security

- (1) A program must have written security policies that include:
 - a. evacuation procedures in case of an emergency;
 - b. agreements with local law enforcement;
 - c. handling of critical incidents such as violent, dangerous, or inappropriate behavior of clients, for example, the attempted abduction of a child; and
 - d. handling of medical emergencies, client, staff, or volunteer injuries, and worker's compensation procedures.

procedure, for identifying cases that may have security issues and risks prior to providing supervised contact services.

L. Insurance

A program must have general and liability insurance for staff and volunteers.

Commentary

It is not intended that programs operating under the auspices of the court obtain general and liability insurance in addition to that provided by risk management in the court system.

III. PROGRAM STAFF/VOLUNTEER CERTIFICATION AND TRAINING REQUIREMENTS

A. General Requirements

Prior to receiving assignments from the program, all program staff, whether paid or volunteer, who have direct contact with program clients or children, must have:

- (1) attained the age of 19 years;
- (2) acceptable results of a background check in accordance with Florida Department of Law Enforcement standards for child care providers;
- (3) attended a screening interview with the Program Director/Administrator or his/her designee that includes:
 - a. an application review;
 - b. having executed a signed statement which addresses the areas of confidentiality;
 - c. having executed an affidavit of moral character; and
 - d. having executed an affidavit of disclosure that lists any and all active pending criminal or civil litigation;
- (4) successfully completed any additional training requirements for the position as specified in this section.

Commentary

These requirements shall not apply to individuals, groups, or organizations who may be providing special services to the center (e.g., maintenance, cleaning, or other in-kind or school public services) requirements which are unrelated to direct supervised visitation services.

B. Employment Categories and Specific Requirements

- (1) **Program Director/Administrator.** A program administrator is responsible for the operation of the center, employment and supervision of staff, and the administration of programs. Employment and volunteer applicants, regardless of qualifications, shall be accepted and/or terminated at the discretion of the Program Director/Administrator. Persons acting in this capacity by a different title in any center shall meet the qualifications, and have the authority, of a Program Director/Administrator. Persons performing in this capacity report directly to the governing board or the governing authority for the program.

Minimum Qualifications:

Graduation from an accredited college or university with a bachelor's degree in social services or related field. Progressively responsible experience in the area of child abuse, domestic violence, custody, visitation and/or family issues may substitute for the recommended college education on a year for year basis; and

Two (2) years professional experience which includes knowledge of child abuse, domestic violence, custody, visitation and/or family issues.

Demonstrated proficiency in competency based training as specified by the Florida Clearinghouse on Supervised Visitation.

- (2) **Visitation Supervisor and Monitor/Observer.** Persons performing in this capacity are responsible for supervising noncustodial parent contact with children in accordance with the program's goals and objectives. They may record observations of visits on the center's standardized form, complete checklists, and may prepare reports to the court, as provided in Section IV of these standards.

Minimum Qualifications: Prior to supervising visitations, persons in this capacity shall complete:

Two (2) hours of orientation training in the following areas: practice, policy and procedures; use of forms; confidentiality; security; levels of supervision; observation techniques; and recording observations; and

Five (5) hours in a mentoring program with a practicing supervised visitation monitor either at an existing visitation program or with a licensed professional who has at least one (1) year of experience in supervising visitations.

Training:

Demonstrated proficiency in competency based training as specified by the Florida Clearinghouse on Supervised Visitation, which shall include, but shall not be limited to the areas of child development, child abuse indicators, mental health, substance abuse, parental alienation, domestic violence, cultural diversity and crisis intervention.

- (3) **Clerical/Maintenance Staff.** Clerical staff provide services in the program office, or in areas of the program where specialized training in visitation supervision techniques is not required.

Minimum Qualifications:

Educational level, or work experience, sufficient to meet the responsibilities of the specific task(s);
and

Completion of an orientation program of at least two (2) hours which includes an overview of the center's goals and objectives, the assignments of administrative staff, confidentiality, and security for clients and staff.

- (4) College Interns. College interns perform services under the guidance and direction of the program director or visitation supervisor staff. The internship shall be a learning experience with specific goals and objectives. Besides the general requirements specified for other staff who have contact with clients, interns shall meet the following additional qualifications:

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

Official enrollment in a college or university in an area of major studies related to the function of the center;

Presentation of clearly defined educational goals and objectives related to supervised visitation.

IV. REPORTS TO THE COURT

Each circuit is responsible for developing an agreement with local providers which sets forth procedures for providing reports to the court. Regardless of the procedures or format selected, programs should use checklists or clear and concise statements to record what happens during the contact and should avoid including opinions and judgments. The supervisor should only report attendance and observable behaviors. These standards should specifically address:

A. Frequency of Reports

- (1) immediately upon incident;
- (2) upon request from the court or other agency;
- (3) by subpoena; or
- (4) periodically.

B. Reporting Method

- (1) written; or
- (2) verbal.

C. Report Format

- (1) Detailed Observation. Detailed observations offer a comprehensive account of events that took place between the noncustodial parent and child. Providers may use a checklist during the visit which records the level of adherence to visitation arrangements by the parent, for example, compliance with scheduling and program rules. Providers may also wish to include an objective account of all behaviors and actions observed between the parent and child as they occur.
- (2) Summary. Summary reports provide an overview of the interaction that took place between the parent and child during a supervised visit. The summary report must be factual, objective and absent of any professional recommendations. Unlike the detailed observation report, the summary report shall not contain a comprehensive list of all behaviors observed between the parent and child. Instead this report is meant to provide the court with a brief synopsis of the visitation.
- (3) Incident. Incident reports provide a detailed account of potentially harmful behavior exhibited by a parent or child, either towards another client or program staff, during the supervised contact. Typically the provider observes a behavior or action from the parent that he/she perceives as an indication for alarm and will immediately submit a detailed account of the incident. This account would include, when the incident took place, what initiated the behavior, how the incident occurred, the reaction of the clients, and the action(s) taken. Once again, this shall strictly be a factual account and shall not offer a professional opinion as to what course of action should be sought regarding this incident.
- (4) Evaluative. Evaluative reports provide an assessment which offers professional opinions and recommendations as to the observed contact between the parent and child. Such reports should be completed 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.

Commentary

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.

4. All observation notes or reports should indicate that the contents of the notes reflect the various levels of training and experience of the different observers; 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.

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SAMPLE

July 11, 2007

The Honorable R. Fred Lewis
Chief Justice, Supreme Court of Florida
500 S. Duval St.
Tallahassee, FL 32399-1925

Dear Chief Justice Lewis:

Chapter 753 of the Florida Statutes was amended during the 2007 Legislative Session to provide for the development of standards for Florida's Supervised Visitation Programs. §753.03 requires the Clearinghouse on Supervised Visitation, within the Florida State University Institute for Family Violence Studies, to create an advisory board to assist with the creation of those standards. The Clearinghouse Advisory Board must include a circuit court judge who presides over domestic violence proceedings and a circuit court judge who presides over dependency proceedings, appointed by the Chief Justice of the Supreme Court.

Please submit the names of the two circuit court judges whom you nominate to fulfill this requirement. The Advisory Board will meet by phone, email, and perhaps one or two in-person meetings between August and December 2007 to create the Standards, and again through 2008 to assist with the development of the criteria and procedures for the certification and monitoring of supervised visitation programs.

The term of the Advisory Board will be August 2007 – December, 2008.

We ask that you advise the Clearinghouse of the names of your two appointees by August 1, 2007, if possible. Please include the title, address, phone number, and email of the appointees. You or your representative may respond to this letter by telephone, email or regular U.S. mail.

Thank you for your assistance in this important matter. Please call me directly if you have any questions.

Sincerely,

Karen Oehme, J.D. Program Director,
Clearinghouse on Supervised Visitation
Institute for Family Violence Studies

Sample

Re: Two issues from first phone conference; minutes; sample referral; next meetings

Dear Advisory Committee:

Chief Justice Lewis has appointed the two judges for the SV Standards Committee. They are Judge Jeri B. Cohen and Judge Clyde Wolfe. I have attached a new and updated Committee Member list with their information. I hope everyone can join our discussion on Tuesday, October 9th at noon (eastern). Please remember to dial in at 850-644-2255.

We also have a third meeting planned for Wednesday, Oct. 24 at noon. The number to dial in is 850-645-6338 (note the number change, please).

The minutes from the first phone conference are attached. If you have any additions/changes for them, please let me know.

The agenda for October 9th will be:

1. Welcome and review of minutes
2. Introduction of Security Personnel Issues: from cell phones to high-tech screening
3. Discussion of Security Personnel Issues
4. Need for additional information?
5. Any consensus?

The applicable sections of the draft Safety Principle on this issue are as follows:

Security Personnel

A program's ability to provide a safe visit depends on whether there is a direct correlation between the capacity of the program, the service being provided, and the needs and risks presented by the family. Some cases will require the presence of law enforcement personnel on site to provide safety at the visitation program.

At a minimum, programs which accept referrals from Injunctions for Protection Against Domestic Violence must have law enforcement personnel or private security personnel onsite to enhance safety or demonstrate that the response time of law enforcement is less than five minutes.

Regardless of the type of case, each file must contain evidence that the program staff considered the risks in the case when determining the level of security provided in that case.

Programs that use security personnel must ensure that such personnel are trained in the dynamics of family violence and are educated as to the mission and goals of the program. Security personnel must be informed of the need for respectful interaction with clients and children.

GIFT POLICY Ideas for Committee

To follow up on the Committee's questions last week with regard to gift giving and sexual abuse case rules, I have attached the Children's Justice Center's policies and Committee Member Arlene Carey's notes. We will discuss this – and see if there is any consensus - on Oct. 24.

I have drafted some possible language for you to think about:

Program directors have the discretion to prohibit or allow gift-giving at their programs. All policies must be in writing. If parents are allowed to bring gifts for their children, the program must have a written gift policy that takes into account the following:

1. The potential for manipulation of the child by the parent.
2. The potential for the gift to create a trigger that reminds the child of abuse.
3. The opportunity for using the gift as a means to communicate with the other parent.
4. The socio-economic constraints of parents.
5. The potential for other families to feel as though they must compete with the gifts.
6. The need to treat all participants fairly.

However, no program will allow gifts to be exchanged in cases of alleged sexual abuse for the protection of the child.

Does the Committee want to be more specific? For example: 1. Gifts must be unwrapped 2. In cases of domestic violence, the non-offending parent should be consulted regarding whether the gift is appropriate 3. There is a prohibition on war toys/guns/knives or other violent games 4. Only gifts on birthdays/ holidays celebrated by the family 5. Only gifts with a value of less than \$____. 6. Other?

Referrals from DCF/CBC

Attached is a sample Referral Form from the Judge Ben Gordon Visitation Program. In the phone conference, we talked about whether the Committee would recommend a Referral Form. What changes would you make to this one?

Where to find more SV Material

Several members have asked for more supervised visitation material to review. Our website has a great deal of information available 24/7, including training materials, background information, and toolkits. Feel free to log on at:

<http://familyvio.csw.fsu.edu>

Thank you for your time and attention. I look forward to your comments and I offer any assistance you may need.

Sincerely,

Karen Oehme

Attachments:

Minutes and Committee List

Tampa Policy

Service Referral Form

Notes from Arlene Carey, DCF Representative.

Example of Policy from Children's Justice Center in Tampa:

"For the safety of children and other members present at the Center, items brought for the child will be displayed for staff prior to the visitation. Gifts must be unwrapped or in a gift bag to allow for inspection. Any other items will be secured and returned upon termination of the visit. No electronic devices (i.e. radio, CD players, head phones, tape recorders, cell phones, etc.,....) are allowed in the visitation room.

Food is only allowed in the visitation room for special occasions (i.e. birthday, Christmas, Valentine's Day, etc...) with no less than twenty-four (24) hour notice and prior approval from the CJC staff.

If there are allegations of sexual abuse between the child and the visitor, the visitor will be asked to limit physical contact to hello and goodbye hugs, providing the child is willing. In addition,

CJC may ask the visitor to refrain from certain discussion, activities, taking photos, giving gifts, showing photos or subject the child to any references that are deemed traumatic or associated in any way to the allegations.

The staff will read the following information to the visitor: Inform the visitor of Children's Justice Center policy regarding allegations of Sexual Abuse, on Videotape, before the first visit occurs, and document the date informed below.

"We are aware that there are allegations. We have no opinion about this matter, however, it is the policy of the Children's Justice Center that, due to the nature of the allegations, there are certain restrictions.

It will be up to you to redirect your child so that you stay within these guidelines:

- with infants, any holding and touching must be limited and within appropriate boundaries;
- child(ren)'s clothes will remain on at all times - diapers will be changed outside the visitation room by the custodial party;

- limited physical contact (defined as):

- a hug at the beginning and end of the visit, with no prolonged hugs or kisses

- no child(ren) sitting in your lap

- no hand holding, hair combing, or stroking the child

- no rough-housing or tickling

- no forcing of physical attention

- no cards, gifts, money or candy, unless for birthdays or holidays;

- no cameras or cell phones;

Do not bring any items with you to the visit, including: toys, games, books, written material, photographs, music, tapes (audio or video), dolls, jewelry or household items.

Policies are strictly enforced unless the court order dictates any changes."

SAMPLE

October 18, 2007

Re: Follow-up to Oct. 9th meeting; agenda for Oct. 24 phone meeting

Dear Supervised Visitation Advisory Committee Members:

Thank you for attending the October 9th phone meeting of the Supervised Visitation Standards Committee. This letter serves as a follow up.

1. Minutes of that meeting are attached. If you have changes/additions/re-phrasing suggestions, please let me know by email or telephone (850-644-6303).
2. Domestic Violence Risk Assessments: At the meeting on the 9th, the committee asked for several things that are attached to this letter:
 - a. A copy of the Risk/Lethality/Danger Assessment currently included in the statewide training materials. Please note that although categories of danger exist, there is currently no scoring attached to this sheet – thus, danger is not categorized into behavior that would exclude a family from supervised visitation or result in a mandate of having security personnel at visits.
 - b. A copy of Campbell's Danger Assessment. This is a widely circulated tool familiar to many DV advocates.
 - c. A copy of a domestic violence intake form used in an SV program. Attached is Trish Waterman's intake form from Tampa.
3. There appears to be some consensus around the following statement, which needs some polishing.

The Committee acknowledges that the circumstances which result in judicial orders to supervised visitation sometimes also pose risks to families and staff on-site. Accordingly, security personnel would ideally be present during program hours of operation. We realize, however, that low-risk cases are also referred to supervised visitation. In addition, constraints on resources may preclude the constant presence of security personnel. Thus, we recommend that programs conduct danger assessments on all cases in order to selectively identify those cases in which the presence of security is necessary.

Do we follow up with language that reiterates "Program Directors retain discretion to reject cases for which the program can not provide adequate security" and/or "We recognize that some cases may present such a level of risk that even the presence of security can not provide an adequate degree of safety."

4. "Scoring" of domestic violence danger assessment. At the meeting on the 24th, the committee will be asked if it would like to propose language that might "trigger" a requirement that security be present during a visit. Proposed language could include a specific number ("more than X number of yes responses indicates a heightened level of danger that may/will necessitate

on-site security personnel” but the X seems artificial) or simply directives to the Program Director to scrutinize the case closely.

5. Question regarding recommendation to legislature: Because the Committee seems concerned about underfunding of supervised visitation programs and lack of resources, does the Committee wish to make a recommendation in the upcoming “Preliminary Report to the Legislature” to increase funding for programs? Regardless of the state of the economy at any given point, is this an aspiration that should be addressed by the Committee? If the answer is yes, I will draft language for consideration.

6. Agenda for October 24: Dial 850-645-6338 at Noon (EST)

- a. Additional discussion of security personnel
- b. Scoring of assessments
- c. Question regarding recommendation to legislature regarding funding
- d. Consideration of common intake form
- e. Consideration of means to return case to court.

Thank you again for your work on this important committee. I look forward to speaking with you on October 24 at noon. (850-645-6338). If you need to contact me before then, please call the office at 850-644-6303.

Sincerely,

Karen Oehme, J.D.
Program Director

Sample

September 10, 2007

Advisory Members

Re: Data Report and Safety Standard Draft for SV Standards Committee

Dear :

Attached is the full data report from the Clearinghouse, as well as the first draft of Safety Standards for review at our meeting next week. These safety standards are the companion to the First Principle, on Safety.

You should have already received a yellow folder with supervised visitation materials, including the four guiding principles. These should be placed in that folder.

I look forward to speaking to you on September 19 at noon, eastern. Please dial 850-644-2255 to join us. Feel free to call me if you have any questions. (850-644-6303.)

Sincerely,

Karen Oehme

Committee Member Responses to October 24, 2007 Meeting

Arlene Carey

SARA

SARA is going to take a great deal of training (and consequently, lots of time, money and education) in order to implement, the feasibility or viability of which is questionable.

The summary of the study makes the following points (pp. 81-82) , which I think are noteworthy:

“By most analytic strategies, the Danger Assessment had the strongest psychometric properties, including the predictive statistics.”

“The DA [Danger Assessment] is the only instrument that was meant to be an interview of victims which is the way the study was implemented.”

“Risk assessment instruments or methods should not be the only factors considered in making decisions about victim safety or offender sanctions, especially at our current state of the science. Rather, they are meant to be one source of information among many others.”

“Before a particular approach can be recommended unequivocally for use in the domestic violence realm, it must be tested in the field, comparing the predictive accuracy of the instrument to or in combination with expert judgment.”

Given the above, I think we run the risk of actually inventing the wheel if we were to venture into this arena of a “scored” DV or lethality assessment right now, especially with all of its ramifications. I feel that if we are to require use of an instrument for assessment purposes at this time, my vote would be for the Danger Assessment to be utilized in conjunction with background history and information provided by the case manager (in dependency cases).

Draft Recommendations

I think the Access to Court section needs to be before the Funding section.

I think that it needs to open with a mission statement--something which speaks to the issue of the program working in partnership with the court in an effort to protect the child while promoting safe and healthy interaction with the parent(s).

Access to Court might even be renamed Partnership with the Court, in order to drive home the point that the SV programs work in partnership

with the judiciary to provide judges with vital information to be used in decision-making and problem-solving very difficult cases.

I'm not sure that Funding and Security should be together... (they may be able to be split, because they really are two issues. One is what we need, the other issue is how to pay for it. But, if you keep them together, then I would suggest that Security needs to be first, then Funding, instead of the other way around.

Under Security, I would also add the risk of revictimization (either parent or child).

Instead of optimally, I would recommend "...concludes that, ideally, all supervised visitation programs..."

In the Security/Funding section, I would recommend addressing the fact that part of the problem is that in order to be able to accept certain cases, the SV program must have adequate training, security, etc., and if not, they must decline the referrals of those cases. Thus, many programs could cease to exist, thereby preventing children at risk from having a safe, monitored place to visit with their parents, which would preclude maintaining the familial connections necessary to a successful reunification (again, in 39 cases).

Just from a legislative standpoint, I think I would refrain from "chronic," and just cite the statistics (e.g., due to budgetary constraints, of the 58 sv programs currently operating in the State of Florida, only 13 are financially able to provide on-site security). I would also add some info in there about the cases of assaults/deaths which have occurred (in other states, I think you said on the phone) at supervised visitation programs, so that the legislators can understand the extent and nature of the security issue (to be sure, none of them wants something like that to happen in his or her district, so we need to drive the urgency of the point home in a very personal and meaningful way).

Patricia Waterman

I have completed my review of the information you sent us on Intimate Partner Violence Assessment Validation Study, Final Report. As you know, the report is lengthy and the data somewhat intense. However, I think I have the gist of it and I have the following comments.

1. I believe the reports relates to organizations which have full time advocates working with victims of domestic violence. Because of the great demand for supervised visitation in Florida, I believe most Visitation Centers are using the majority of their resources to supervise visits and do not have dedicated advocates to conduct lengthy assessments.
2. The cost of Mosaic is expensive, roughly \$2,000.00 for the software and an average of \$1,500.00 annually thereafter, depending on how many users you need to access the system.
3. I do not know the cost of the other products, but even if we could just obtain forms to do the Campbell assessment, then there would have to be cost considerations for initial and on going training to consider.

4. I believe the safety and security issues raised by the panel are of course concerning. These are the same concerns which have been voiced by directors for years. Since we are discussing the evaluations only for centers who do not have full time security, I think it is important to note that if resources were better, all centers would have security. Full time security at each center should be recommended to the legislature. In the meantime, each agency has worked toward safety planning in different ways for their staff and families using their centers. Some centers have cases which have domestic violence components to visit only when they have security. Some centers have to reject cases due to lack of security and some double up on staff and call 911 the minute something goes awry.

5. In the summary of the study, the authors' state," risk assessment instruments need to perform significantly better than expert judgment, the view of experiences victim advocates, law enforcement officer, probation officers, or other practitioners or they are not worth the time and effort they take." I am not advocating that an assessment tool should not be used; I would like to see something tailored more for visitation programs which would take several factors into consideration for overall safety of staff and participants.

Nina Zollo

This just came in on Barbara [Hart]'s listserve. I thought this was very interesting considering our discussion.

Ed Gondolf writes:

I recently read a meta-analysis review of risk assessment from Karl Hanson and colleagues in Canada. Like the previous Kropp review, it shows at best "moderate" prediction (which is a generous label) and raises cautions about using risk assessment instruments. It is also interesting that the various instruments had similar prediction and, as previous studies have shown, the non-DV risk instruments do about as well as the DV risk instruments with DV. The study doesn't get to some of the implementation and misuse problems of risk assessment that may be contributing to their less than desirable prediction. Not sure what to make of all of this: some researchers say that the poor performance just points to the need for further development and caution in the meantime; others point to the need to rethink the risk business and move toward on-going risk management.

BJH replies: YES to on-going risk assessment.

I've been opining to any who would listen for several years that Risk Assessment and Safety Planning in light thereof is a PROCESS not a PRODUCT. A singular risk assessment is merely a snapshot. Ongoing assessment and safety planning are essential. Anyone engaging a battered woman in risk assessment MUST also teach/engage her in safety planning. A BW should be encouraged to continue risk assessment (posed by the abuser, by institutional failures, by her personal circumstances and culture) and safety planning. As the daily realities of her life and the life of the batterer change, additional assessment and planning are critical. For example, if she is hospitalized, she should consider whether the abuser will attempt to contact/visit her and engage the hospital in the creation of safety protocols. If her

batterer starts attending her church, she should assess and plan and share her conclusions with selected laity and clergy. If her children tell her that their father/the batterer is going to take them on a splendid vacation and such a vacation is not contemplated by a custody order, she should assess and plan, enlisting the review of the court if she concludes that the batterer/father is likely to abduct the children.

Anyway, I wonder whether research on ongoing assessment of risk and safety planning by battered women (after learning approaches to both assessment and planning vs. assessment and planning by BW not trained thereon vs. singular assessment by a professional) would produce more nuanced assessments that more accurately project dangerousness.

I am not sure that the tool provided could be used by all centers effectively. I am concerned that staff would probably need training to make sure it is used correctly, and I wonder about the time it would take to use it correctly. I am afraid it would not be used. The more I think about this issue, the more I am inclined to say that the visitation centers need on site security period. Going back to my meeting with judges in Orlando (which was about other issue—the supervised visitation issue simply came up), the judges all talked about the preventive value of simply having the sheriff’s vehicle parked right in front of the entrance.

Karen, on the draft recommendation, I suggest eliminating “optimally” in the funding and security section and instead put all centers “should have on site security personnel...” This is different than access to security personnel. Also, fyi, I met with the DV court judges in Orlando on Friday, and they told me that they convinced the Orange County Sheriff to include in the Sheriff’s budget funding for officers to provide security at all supervised visitation centers in the county. Judge Evans said that they pointed out to the Sheriff the incredible costs of a SWAT team if there was a hostage or kidnapping situation at a center, or the high cost of a homicide investigation. The sheriff decided those costs were much higher than the preventive costs of supplying deputies. Judge Evans said he would be happy to talk with the committee about this

...

Standards Advisory Committee
Safety Standard Conference Call
19 September 2007

Members Present:

Karen Oehme
Arlene Carey
Sharon Rogers
Leo Mesa
Julie Mayo
Dana Dowling
Kris Nowland
Nina Zollo
Rick Komando
Trish Waterman

Jennifer Dritt/Joe Nullet, present next phone call

KO: We have to submit a preliminary report to the legislature (and DCF) in November, which means we should have at least two other conference calls in October and one in November. We do not have the names of the judges yet. Rose Patterson at OSCA says those names are forthcoming. I have called again to remind OSCA for names, please.

It is agreed that Tuesday, Oct. 9, at noon is the date for our next conference call. Call this same number.

KO will send an email to everyone regarding the meeting.

KO tentatively planned another meeting for Wednesday, Oct. 24, at noon. KO asked that everyone schedule it in. KO will send out an email to check on members' availability.

KO welcomed everyone to the conference call, mentioning that although the Committee does not have any Circuit Court representatives yet, the Chief Justice is sending out a letter this week so hopefully the representatives will be present at the next meeting.

KO provided a brief history of the supervised visitation system in Florida and how the Standards Committee came to be. It is the job of the Committee to develop standardized criteria for supervised visitation in order to ensure the safety/quality of each visitation program throughout Florida. The standards are to address issues such as training, qualification, etc. From the creation of the mission of what standardized visitation is supposed to be came the Guiding Principles. From the Principles came the standards. Compliance measures flow from the standards. A mandate from the Florida legislature exists for a set of standards for supervised visitation. The Committee must have a draft/framework for the legislature by November 2007. The Committee has a full year to develop the details of the standards.

KO asked if there were any questions about the history. No questions.

KO asked if there was anything about the mission statement of the Florida Supervised Visitation Program anyone would like to change, amend, add. KO asked if anyone had questions about the statement.

(No)

KO stated that the four guiding principles come from the mission statement. The first principle, Safety, is the topic of today's conference call. Safety issues in supervised visitation have been a little thorny. SV programs in Florida accept all different kinds of visitation referrals—there are now over 60 programs in Florida. The State has realized through research that there are lots of commonalities in the types of problems and families; although it is possible to separate out the cases by referral source, it is a false delineation. Programs need to meet the unique needs of each case.

KO went on to further state that SV programs are now supposed to respond to the different needs of the families, children, etc. Programs will not work if they respond to just the case-type “label” or referral source.

AC asked if every SV program accepts every kind of referral.

KO responded that it depends on the funding—the agency may affect the types of referrals a program accepts or the amount of funding may make a difference. Some monies are designated for particular cases and not every program may be equipped for all case types.

KO returned to the four principles, naming them in order: First, safety. Second, training. She stated that training is a big issue in Florida because the funding is not always available for proper training. Furthermore, programs may use volunteers and the volunteers may not be trained properly. KO stated that the Committee is considering recommendation that all people associated with SV be trained. Three: dignity and diversity. Four: coordinated network. KO stated that as Florida has grown, the programs have also grown. Discussion of SV is not to be part of a community network, which may not be easy. KO stated it is important to be careful of overburdening programs that have limited resources.

KO posed a question: regarding the safety principle, how much discussion do you want below the principle but before the standards?

RK asked if all standards apply to all cases.

KO answered yes. There is no plan to change from that. At the moment, the only cases for which special rules apply are sexual abuse (SA) cases (mention: bottom, pg. 7). KO asked if it was okay to separate out SA cases for special standards?

AC stated that yes, there has to be hypervigilance concerning SA cases. It is important to separate out SA cases.

KO mentioned a case in south Florida up for appeal that applied keeping children safe. It is the general consensus that there are special safety protocols for children with sexual abuse.

RK asked if that could be kept in the standards. RK asked if SA cases would be allowed the same standards.

AC asked if the SA cases include any extra safety standards?

RK asked if everyone does or does not agree with the fact that SA cases should be considered a specialty under the safety standard? RK stated that if there are specialized safety issues with every case, there should be broad safety standards.

KO asked: if special safety protocols are added for each kind of case, are there different standards for every kind of case?

NZ asked: can there be basic standards and then special considerations for special cases?

KO will send out a draft of basic standards, then stated however that if basic standards are created and special considerations given only for cases considered special, it is possible that only some of the issues for one case will be acknowledged.

NZ stated that it is important to constantly screen cases; part of the standard needs to be that all possible safety issues are considered. Families are multi-need, with multiple dysfunctions, etc.

SR stated that the minimum standard should be high enough to encompass most cases.

AC referred to the “no notes/gifts” protocol for SA cases. AC asked whether or not some of those safety protocols could be applicable to other cases?

KO asked: what is true for all cases? In order to answer that, you have to first consider risk, relationships between parents/child(ren), the positives/negatives, etc.

NZ stated that while SV has been considered appropriate for some cases, it is important to monitor situations to make sure the child is not being scared or influenced. Gifts/notes apply to this as well.

AC stated that unsupervised visitation may not be safe a child.

KO mentioned “degree of risk and nature of supervision,” which are two concerns addressed in the safety standards. KO asked: for the purpose of SA cases, should the Committee mandate that visitation must continually be one on one?

AC stated yes.

KO asked a second question relating to the first: how should the Committee respond to physical/verbal contact? Is that good for all cases?

(yes)

KO asked: should we not allow exchanges of gifts, money, cards? Lots of programs allow the parents to bring stuff. There are rules about gift giving, but in SA cases, generally the children are not allowed to have things brought to them.

DD (?) asked for clarification: in SA cases, the visitor doesn't get to bring gifts?

NZ asked if the rule dealt with testimony issues?

KO stated that in the past, unidentified child SA cases were being referred to programs, labeled as something else. "Triggers were brought to children by sexual abuse perpetrators and kids were being re-victimized. SV programs are now hoping to get some control about the situation in order to protect the kids.

KO asked: is it okay that programs prohibit gifts/money/cards in SA cases?

KO asked: should gifts/cards/money be prohibited in all cases?

AC and SR stated that the "no exchanges" policy remain isolated to just SA cases; families should have the opportunity to bring gifts for birthdays, holidays, etc.

(agreement)

RK stated that in many dependency cases, gifts are parents' meager attempts and that sometimes, gift-giving is documented by caseworkers.

NZ returned to the "trigger" issue and stated that the same concerns apply in DV cases as in SA cases. NZ asked: if cases haven't been labeled SA, but there has been some sexual abuse of the child in the past and the visitor brings gifts, how can that situation be monitored?

KO responded that programs have been grappling with the issue. How can that be separated out? It is clear that kids have been traumatized by gifts and that others benefit. Programs are constantly trying to weigh benefits and risks.

Someone (?) suggested that the Committee should possibly explore this issue in our intake...part of the risk situation...in initial assessment of each case.

AC recommended that perhaps there needs to be something provided to caseworkers to give them clues on how to monitor for case types within case types. In most cases, my agency allows photography, audio, video, etc., of the child unless a caseworker says no; the caseworker is the most familiar with the family and the child. It is important for the caseworker to know the limits of a particular program.

KO asked: would the committee recommend a sample caseworker survey or something? There isn't one standardized document that caseworkers fill out. Programs have their own forms that caseworkers fill out that seem to be a "mixed cooperation" of sorts.

KO asked: should there be a Uniform Referral Form?

(agreement...suggestion that the Uniform Referral Form should be a part of the minimum standards for SV)

RK (?) – AC cautioned against creating stigma/label; we need to be careful about our approach in how we question kids/families)

KO clarified that the Uniform Referral Form would be different from the Intake form; rather, it would be an overall assessment for the case manager to determine at outset.

KO stated she could develop a draft for a Uniform Referral Form.

? stated that it would be an optimum scenario to get info from the caseworker.

? mentioned that in some cases, caseworkers may not be aware of the “no exchange” policy. If proper information is brought to the forefront for each case—if the caseworkers know what types of things are prohibited, what types of things are allowed—the caseworker will have a better sense of when to say yea or nay in each case.

KO asked: what about prohibiting audio/video across the board?

TW stated that in her office, photos are allowed at the beginning of the visitation and at the end and that no audio/video is allowed in any case because of noise.

SR stated that sometimes video can be identified as a “trigger” and that other times, video is used to build a case.

LM stated he had many concerns with the safety issue. LM stated that “material affection” is not the best practice for children or their parents. SV folks should encourage emotional engagement between kids and parents. For example, if it’s the child’s birthday, spend the visitation time interacting with them; don’t bring a gift. Time spent during a visitation is a good time to connect with a child. ? agreed that it was a good idea. However, not every program has the same resources (ie, crayons, games, paper, etc) . There needs to be a balance.

LM asked if interactive parenting practices should be included in the overall standards?

KO asked: what if I draft a separate standard that required programs to create/think about their own policies on gifts, money cars, and we pointed out what the problems were? No entire prohibition of gifts for kids. However, we all agree absolute prohibition in SA cases?

(agreement)

LM referred to DV cases, mentioning the possibility that a batterer may use a gift as a form of manipulation.

KO stated there is lots of room for flexibility regarding the ways for allowing exceptions.

KO asked: when is the prohibition of gifts important? Under what standards?

KO asked TW, KN, and (Karen?) to email their respective organization's gift-giving policies.

KO brought up another side of the gift-giving issue—there are complaints that programs are too sterile. Comfort for children, comfort for families cannot be overlooked.

SR stated she would not support across the board prohibition; it would harm the goal of SV. Flexibility should be allowed to address each case as unique. Policies should for exceptions in order to fit the needs of the families.

AC agreed that advising people who are referring programs would be a good idea.

LM asked: what standards would err on the side of safety, regardless of circumstances? Training has to do with competency...I'm concerned about that. Hopefully we can find a middle ground.

KO stated she would send an email asking for each member's opinion of: special safety protocols? And others across the board as prohibitions?

KO stated she would like a page of comments from each. From that, a report will be made; put it all together.

KO stated the issue for the next conference call on Oct.9 will cover law enforcement on site, or the issue of "security personnel." Law enforcement is the thorniest issue in supervised visitation. Would programs ever need law enforcement? What if yes, what if no? Most programs say they would allow security if they had money...but would they still have visitation if they didn't have the money. Programs are afraid of what kinds of standards would be mandated for them if they couldn't afford security personnel.

NZ asked is a program's main concern regarding law enforcement is financial or also philosophical?

KO said she knew that some other out of state programs had expressed concern that police presence was intimidating, but that she had not heard that from any FL program. In fact, programs that use security are very positive about it; victims like it; perps think it is for the "other guy." But it is very expensive, and a resource issue.

KN stated that the law enforcement at her organization actually makes it easier for scheduling and providing a standard coverage of security. Also, security personnel is a well-received detail in most police departments in her area. Sometimes the police officers provide good relationships for kids who have only seen police as bad, intimidating people.

SR stated that her police do not wear uniforms, and are present at DV and some Dependency cases. Her program likes security.

Next meeting will be all about what to recommend as far as security personnel are concerned. Will there be a requirement of either personnel or response time? If not, what will be the security issues?

Standards Advisory Committee
Safety Standard Conference Call
9 October 2007

Attending:

All members present

Karen Oehme

Joe Nullet

Kris Nowland

Dana Dowling

Arlene Carey

Nina Zollo

Captain Johnson

Trish Waterman

Sharon Rogers

Leo Mesa

Rich Komando

Jennifer Dritt

Judge Jeri Cohen

Judge Clyde Wolfe

Next conference call at noon on October 24 at this number: 850-645-6338

KO introduced the issue of security. Current Supreme Court standards...don't say very much about security. Bare bones structure, with hardly any direction regarding security. Security personnel isn't mentioned at all.

KO: what about mandating that programs have designated security personnel? What kinds of cases should have security personnel? What are the reasons not to have security?

RK stated that any time it's a DV situation, there should be mandatory security

AC, JD agree

JC asked about the kind of security situation being discussed. When I have DV situations, I make sure that either parents aren't visiting the child at the same time, or that they have the potential to pass each other. When do you need security?

RK: sometimes the visits are back to back, which could require security

JC: is that situation frequent? Are there any other alternatives? Security is very expensive and I'm not sure we should say, across the board that in DV cases there must be police security on site. It's broad.

JN stated that in every case, the protocol is to stagger visitation arrival times. However, other security risks exist, including risk to staff in dealing with high-conflict individuals.

Having said that, as a director I'm concerned for an under-funded program...security costs money. You can have security protocols to protect against risk...maybe a policy to not accept cases. I have a concern about mandated security

CW: I agree. Alternatives exist; full-time security could be cost-prohibited for many nonprofits. Conflict can come from dependency cases, too and visitation personnel happen to be the ones to argue with. Visitation personnel are at risk in dependency cases, not just DV.

JC stated that if people do not behave correctly, she cuts off the visitation. People should be able to behave appropriately.

CW: I agree. Part of the training for the folks at the visitation center should be that if such a behavior problem exists, you have to let the offending person know; the offending person will be reported to the court.

JC: we are not babysitters. I think the mandate for security is extremely expensive. I think the money should go towards training supervisors to handle specific situations.

KO asked LJ about the presence of security at his center and his experience?

LJ: people find ways to get around security measures. We have tried to control these situations with deputies. Maybe security could be mandated on a prior-need basis, but there's no real way to tell exactly which cases require security.

JC asked: isn't that the exception?

LJ responded not in his experience.

JN stated that it is the exception. In my experience, parties who violate the rules about arrival time are at risk of violating the court order and are at risk of losing their visitation rights. Our preventative measures have kept difficulties/rule violation at bay. I can't deny that incidents do occur, however, and that we are concerned about the safety of our children/staff. We've had hired security for the past 7-8 years and are currently in the process of training security people directly, instead of the personnel being hired by a third party. We want to do the training.

KO asked what the security personnel would be trained in.

JN: we're developing the position now. Cell phone, panic buttons, access to metal detectors, screening, policies, etc.

JC asked: what is there is a mandate that panic buttons be put in all the visitation centers? From a cost-perspective...what about this idea?

AC asked: how can we determine which programs already have security and which don't?

JD stated that the issue of security can be addressed from two perspectives: prevention and response. They are very different. We have to consider both. I'm primarily a "security-as-prevention" person...

My question is, is it reasonable/feasible to have security personnel to prevent incidents? I understand the situation with funding, but...we know how dangerous DV cases are.

SR: our center has experienced having security and not having any at all. We had incidents of violence and problems which brought about security. The main difference isn't that they're responding to acts of violence, it's just not happening now. People don't come into the center thinking they can control the visitation.

TW: we are a court program. We have someone assigned to us, which is great. I think the preventative measure keeps us safe. When we survey our parents, they say they feel safe at our program.

SR stated that security is a deterrent. We hire off-duty police officers...the same ones over and over. They are trained and are a great resource for some parents. We have security for DV cases, not for all the cases we take. As far as dependency goes, we go case by case. Our staff feels extremely safe. We don't do intake interviews without security. Without security, we'd have to turn down some cases.

AR: so, you have to turn away referrals vs. paying for security.

SR stated that cases that require security are scheduled around the same times. We schedule all the cases we need security for as concisely as we possibly can. We pay \$20/hr for my deputy. Our center makes the decision for which case needs security.

JN stated that allowances for security need to be made. If programs don't want to hire security, there needs to be evidence that there's adequate training, policy of which cases to accept, etc. There are some people who don't want security for programmatic reasons.

SR stated that the best scenario is to have security on site for those cases that have the propensity for violence. If you're not going to do that, you need to have security guidelines...a hotline...you have to submit a security protocol.

JD asked: Is it incorrect to assume that every DV case has the potential for violence?

?? stated that some cases have more potential than others. Not every DV case is as bad as the other; varying levels of violence.

CW asked: isn't there a standardized risk assessment? Maybe we could have each SV center consult with their local law enforcement for a security survey to see which security measures is/is not needed. Every case, every community is different.

KO: what about discretion? According to the first draft of the Safety standard, the idea would be that the directors had the ultimate discretion to reject a case...wasn't controversial last time. However, if a director rejects a case because they don't feel they have the capacity to handle a case, they feel that the judge gets angry. Programs are afraid that if they don't allow the case to be taken, due to lack of security measures, the case will be unsupervised.

JD: the issue is that the center/program...won't be able to accept referral to start with because of lack of security?

CW: if that's the issue, as a judge, I need to know right away so that alternatives can be considered/addressed.

KO: what kind of guidance can we give programs for security as prevention? Where does the ultimate discretion reside?

JC stated that the directors of the center have the ultimate discretion. The directors need to make decisions in conjunction with the court. Courts often have very limited information. The program directors are the ones with the information...and liability. If a visitation center comes to me and talks about a case, I listen to the director. They are in the best position to know the family and the situation

KO stated that communicating with the court is a problem for directors because visitation is not party to the cause. How do you get back to court when there is not periodic review of the cases—especially DV cases?

JC stated that there has to be a way for centers to easily access the court.

KO asked: if you order SV in DV cases, can you work in a mandatory review?

JC stated that judges don't want to create more work for themselves. There has to be a mechanism... the SV centers can motion the court to get it on calendar. But then you have to get attorneys, etc. Rather, though than a periodic review, the directors do need to access the court.

CW stated 100% agreement. If the director believes there is something special about a case, bring it to the court.

KO stated she wasn't sure what a "snap-off" form was. Asked if there was a standardized form for program directors to fill out regarding requesting court involvement.

CW stated that the form to address the court can be whatever works for that particular center, the letter can be in its own style; all the program has to do is ask.

JC stated there is a need for a form to trigger a hearing before the court; some way to get before the court to address problems.

KO stated that going back to court is a chronic problem! KO asked: do we design a statewide form and say, if programs don't have a letter, we have a standardized form?

JC: cases with DV, aggressiveness, mental health...determined past aggressive behavior, there needs to be security. We know some programs can't afford it. Therefore, each program should have time to come up with its own measures. No security, then what about quick response, hot line, panic button. If not affordable, we'll leave it to the program to come up with some type of security. And it has to be submitted to the court.

CW stated that if security is an issue, judges have the option to pass the cost of the security on to others...

JD: we're talking about knowing which cases are potentially more lethal. Is there a problem with a standard, danger assessment? What about J. Campbell's five risk factors? Is there a reason a SV program would not ask a battered woman these questions upon intake?

KO: programs are encouraged to use, but not mandated, to use the risk factors.

KO asked: can we demand that programs use the risk factors to assess the case?

JD: it seems to be the most reasonable way to assess the risk and plan security accordingly.

KO asked: do you mean if you have a certain number of indicators according to the risk assessment... that triggers the mandatory presence of security on site?

JD: I don't know...but the use of the tool would allow the center to accurately assess the case and need for security.

KO opened a question to the directors: how does your danger assessment affect security?

SR: it depends on custodial parent intake. We ask what they think they need. I think all centers are working towards a danger assessment.

JC stated she is in favor of a standardized form.

JD: I think Campbell's should be used. It's researched-based.

JC stated that the goal is to standardize things. Research-based is good. We need to provide recommendations for security—optimum security.

CW asked: are there any standards/guidelines on NASV Centers?

KO: yes, we sent those to you the SVN guidelines...they haven't been incorporated in any state. Florida is way ahead in following the guidelines.

JN stated that program directors clearly need agreement with court. Couldn't we have a standard: either have security in place or establish an in-court agreement between provider and the court; there needs to be an agreement that they have reviewed the security protocols and that it's the best way to handle the case.

KO: it's an option. But we have not had good compliance in programs having agreement with the court.

JC asked: who is the monitoring entity?

KO: not the judges.

KO asked: would we recommend that some independent group undertake the job of certifying programs?

KO: is there consensus that optimally it would be the safest option to have security on site for cases with violence, but as we understand not everyone can afford it, if the program can't afford security, here are some alternatives?

JD: practice minimum standards?

KO: what about response time in security protocol?

LM: security is in the safeguards. We provide all programs throughout the state with a clear, outlines of all the safeguards in all cases...there may be some specialized safeguards for sexual abuse cases. It seems to me that universal safeguards need to be developed. Quality assurance is important. Security issue will be determined by directors.

LM asked: do we know how many programs currently do not have security personnel? How do those programs handle that?

KO: It looks like about half the SV programs that have responded to us have security personnel at least during some cases. We have limited information for about 40 programs.

KO asked: What about response? KO stated that she'll send out memos and a follow up with Campbell's assessment. Is there any consensus as to what is an appropriate response time?

AC: response time is important, although I imagine that distance can play a part in response time... and the kind of issue you're having at the moment.

JC stated: the only way you're going to handle any security problem—low, moderate, high—is to have an officer on site.

?? stated that: Concern if the program doesn't feel that they're able to accept special cases, the program winds up going out of business if they can't take cases.

JC stated: I'd hate to see visitation centers go out of business because we've overacted the risk.

KO: what about response time? What do you think in your experience? What about 5 minutes? How can we construct a bright line—if you can't guarantee there's a response in this amount of time, then you cant take the case?

LJ: An emergency is an emergency. When a response is needed, it will be prioritized with what's going on at the time. Five minutes sounds good...but it depends on the agency, the size, and the time it comes in. I personally feel that building in a response time to the minimum standards depends on what we're looking for. What is everyone going to be comfortable with as a response time?

JC: it goes back to the seriousness of the incident? What's the risk/degree of violence? The response time depends on this.

LM: what system for implementation of safeguards?

KO: If we tell programs they have to institute a risk assessment, when they do score high, do we say, “you have to have this, this, this in place?”

TW: yes

NZ: yes. This is tough. I agree with most spoken thus far. I wish we could have a bright line rule, but at the same time I want supervised visitation offered to DV cases. If programs can’t afford to have security, they shouldn’t be taking the high lethality cases. You can never predict violence, but we have good indicators on how to prevent. I don’t think we’re doing anyone a service if we don’t have a bright line rule based on the predictors.

JC: we could take the risk—if programs score a certain number on risk assessment, there must be security on site or else you can’t take the cases. We can look at other levels of risk, we can give the programs guidelines. Take the risk assessment and break it down per level and create guidelines for each level. This will help the judges too.

KO: does anyone else have anything to say?

JC: what does everyone think about the risk assessment and adopting it...work our guidelines around each level?

KO: I’m going to prepare some proposals based on this consensus.

CW: check with local DV shelters. They may have assessments already available in the DV cases they’ve done with their clients. Key is to establish partnerships, relationships for good communication. In the meantime, I’m going to look up the National Conference of Juvenile Family Court Justice.

KO: thanks. Don’t forget the phone conference on Oct. 24, at noon. I’ll send an email with number.

Standards Committee Conference Call
Wednesday, October 24, 2007

Members Present:

Karen Oehme
Rich Komando
Arlene Carey
Trish Waterman
Joe Nullet
Jennifer Dritt
Kris Nowland
Leo Mesa
Judge Cohen
Nina Zollo
Sharon Rogers

KO: asked if there were changes to last conference's minutes.

AC: I was person with indicated by the question marks.

KO: Topic of DV risk assessments. Last conference, the committee asked about Jackie Campbell's danger assessment. There was a question about whether there would be any ranking of danger or levels or dangerousness in cases—which would be used to help determine the need for security on site. The identification of a number of behaviors may trigger existence of security on site. Looking at the Risk Identification for DV Referrals (Table 5.4), it does not allow for a summarization or magic number of behaviors that would trigger the need for security; rather, it is just an identification tool.

JC: We need an assessment that can be scored.

KO: Campbell's assessment doesn't deal with SV. Nina, can you speak about Campbell's assessment and how it may be scored to use in-person security?

NZ: You can assign numbers based on lethality assessments? 1, 2, 3...we'd probably have to use another instrument to help assess hierarchy of lethality. However, it's always hard to develop a hierarchy because of the uniqueness of each situation. I think there's at least some general consensus among advocates of lethality that there truly are red flags in some instances. I can look at what FCADV does.

KO: There's also the issue of timing; of when the behavior occurred. What happens when the score-card goes to court? How do you score alleged dangerous behavior? What about dangerous behavior that occurred years ago?

KN: I'm not sure what tools FCADV uses. And I'm skeptical of assigning numbers. What if you assign "low risk" because the behavior has not happened yet? Measuring the amount of lethality in DV case seems...new?

KO: What happens with your 39 cases?

KN: Those cases come to us when there's no where else to go. We have to have funds available all across the board, for every kind of case and each case is treated exactly the same at our center with regards to security. Our reasoning: there is always the possibility that DV is involved.

NZ: I agree with you regarding lethality; there has to be some sort of measure. However, there is no perfect solution.

JC: We need an assessment that can be scored. Our court visitation program always has security...and the parent who is bringing the child arrives 15 minutes early, with no leeway time. You cannot leave the area while you're there. And the visiting parent who's coming on the hour must come on the hour. To prevent the visiting parent from coming early, we refuse visitation if they come early. So far, it's working well. During the visit, parents stay on-site in different rooms.

SR: We have other provisions for other circumstances...can't have hard and fast rules. In some cases, there are visiting parents who are being victimized, for instance. We can add additional time if a parent thinks they need more time (for example, they use a bus). We adjust based on the information we get from the parents.

KO: Absolutely -- different parking, elevators, escorting—programs have used these kinds of things for years.

SR: I think it's a safety risk to have both parents on site at the same time. I wouldn't want to see something like this as a standard.

KN: Because we have security, having the other parent there isn't a safety issue.

KO: Back to the scoring. How would we score this? I'm pretty sure we may be the first ones doing this regarding SV if we come up with a scoring tool.

JC: What if we don't score the danger assessment, but instead we concern ourselves with a certain number of "yes" responses...or is that the same thing as scoring? Do we need a standardized form? And are we sure there's nothing in the country that is offered in this field?

KO: Regarding assessment, I've heard: if you answer "yes" to 4 questions...that mandates security. The problem is we don't want people to think that if they "only have" 3, that we didn't want to be the one to say that doesn't result in high risk.

JD: It seems to me that answering yes to any one of those questions reflects risk—why wouldn't any one of those require increased safety? DV by definition is danger.

LM: I think the Judge makes sense. We need an objective measure. From the DV perspective, all the cases need to be taken seriously. Instead of giving programs the sense of subjectivity...if we're not going to agree to universal security, we can have universal safeguards/guidelines to provide visitation to cases. Regarding the scale of lethality, there's one called the SARA (the Spousal Abuse Risk Assessment)—it is an objective measure with high inter-rater reliability...it's a possibility. It would give the facility objective information. But I don't think it should be used to determine whether or not security is used. What if the SV directors provided us with what they consider to be the most strin-

gent set of guidelines and we work there from a policy perspective?

KO: Do you mean that some might never take cases that require the presence of security personnel?

LM: Well, under what circumstances? We can do that, or we can have the scoring, but we have the potential of misidentifying.

KO: Are there things in the Risk Identification list in the Training Manual that the committee would agree...if you have this, you have to have security? Are there mandatory things this group agrees with? Not to say you wouldn't have security in other cases. But if you ever have cases that get this (#19 in the Risk Assessment for instance), is there consensus that at that point, security personnel is mandated?

LM: Has Table 5.4 been researched?

KO: It is the result research; it is not empirically objective because there is no scoring guidelines. We do know in cases where there have been fatalities, these are common denominators.

LM: Table 5.4 isn't very objective. I'm suggesting SARA because we used it and it seemed to be subjective and has been highly researched. Chances of taking this to court will carry more weight.

KO: I think SARA doesn't deal with SV. We'll have to mold it. Can you send it?

LM: I'll send the SARA to the committee. It decides low, moderate and high risk.

KO: What about this idea—anything that scores up to a high risk...would mandate security on site? And what if the score is moderate? And would all programs have to use the assessment/scoring in all cases? Kris doesn't use standard risk assessments because she has security onsite all the time.

LM: If you always have security, the assessment could be a systemic piece. I would encourage use of this anyway.

NZ: I'm struggling with...what does risk boil down to? For me, the issue/concern is the coming/going, to/from the visit. Do SV centers have metal detectors?

KO: Yes and no: some centers use wands. Would we want to mandate that piece of security equipment?

KN: Wands cost \$100. Our staff does the wandering, and we ask questions of security if we need.

KO: Regarding disarming someone...an untrained lay person disarming someone could get tricky. And there is no certification needed to use a wand. Some people like metal detectors, some say it's a false sense of security. It's supposed to be preventative...

KO: Concerning the statement on pg.1 of the letter we sent—the Committee acknowledges that security personnel would ideally be present. Our recommendation: conduct danger assessments to indicate necessary of security. Should we include this in the preliminary report to the legislature? The

letter is due in December. We don't have to indicate which instrument we will use, but we want them to know where our thinking is heading. I can say that the Committee is looking at using empirically tested, objective tools.

(LM/JC agree)

KO: The next part: costs for security are prohibitive. In this preliminary report...there is nothing going to the legislature that acknowledges lack of resources. Do we want to speak on that?

JC: If security is something we want to have funded, we should start now. We can say that we think it's important to have security at all sites, but we realize it could be expensive which is why we are using these assessments. However, the ultimate goal is that each site has security personnel.

(agreement; consensus)

KO: That would be big...costs for security has never been legislatively mandated before.

JC: Well, we all agree the ideal is to have security onsite. If that is the goal, we can take various steps leading up to that. It may take several legislative cycles...

KO: What about another big problem—getting back to court when something does happen. Is there something the legislature could do that wouldn't cost money that would make it easier for programs to get the courts attention?

AC: I read the Campbell assessment...in a 39 case...it ought to be that the SV contact person contacts the case manager who will then take it to court; going to court wouldn't be incumbent up on SV person.

JC: In dependency, case managers can get into court. Even though judicial review occurs every 6months, it's not hard to get on the docket. Problem is family court.

KO: That is different from what I heard during a statewide SV directors conference call yesterday... the Judges tell the SV folks to wait till the next hearing. It doesn't run as seamlessly as it should. Would there be any harm in allowing SV staff to be court participants?

JC: No. But the goal is not to allow service providers to become participants. I think we should say: SV centers have limited resources and they are also in a position where they deal with dangerous situations. They need access to court in case they need to get onto the court calendar. The Case Manager has an obligation, then to put the case on the judge's calendar. We cap court visits here. In order for a visit to be filed, we have a form and the judge has 30 days to respond. Once the visitation center is ordered to provide visits, there has to be a provision to bring them to court.

TW: That's exactly what we need...we need it across the state.

JC: Yes. Statewide form for referral...when the SV center takes the case, everyone signs the form and it says that either the number of visits are capped and you have to come to court to get them extended,

and that the visitation center can motion to come back into court in cases.

AC: This is relative to dependency cases as well. Good. This would cover lots of bases.

JC: We can come up with a list of contingencies? Example: drugs, mental health, intoxication, unnecessary SV, etc. Do you perceive this inaccessibility to court is a big problem?

(voices responding “yes”)

JC: Are there waiting lists at the centers? Do they eat up resources? Does it eat up taxpayer dollars? These are all reasons to mandate the courts to put it back on their calendar.

(voices = agreement)

JC: If we articulate the issue as such and we can get this mandated by court...I envision...if a SV center has any of the following problems, they file it with the judges JA, cc the parents...have the clerks send the notice to the parents and the lawyers (do we need a mechanism for that?)...then the JA has to docket it with 30 days. That's with family court.

KO: Change with rules of civil procedure? In 61 cases we don't have the law yet.

JC: I think so? We probably need a rule change.

AC: Directors: what do you do...how do you notify Case Managers? Do you have issues with Case Managers not taking your issues seriously?

TW: If there's a problem, we call. If they say they're going to court, we provide an overview. We also generate a report every 6 months. Sometimes there are problems...sometimes the problem is the Case Manager.

JC: Why can't you go to court? There's no reason why anybody providing the service can't come to court.

TW: I'm a court program, but it would be constant research to find out when the hearing is.

KO: We'll research the issue of a rule change. Right now, every program is supposed to have a means to communicate with the court. Problem: that has never been upheld across the state.

JC: Even if you allow the protocol to be administrated, there has to be a rule. Once judges see “pursuant to...,” they'll respect the circumstance.

KO: What about a counterpart that the caseworker has to pay attention to?

(voices = agreement)

AC Enabling SV staff to have free access to the court (e.g., via a reporting form), would fall in line directly with the new 39.0139(6)(a)F.S., where the law requires that (in cases of sexual abuse) the court be notified if a

party determines that a person is attempting to influence the testimony of the child. My point is, who better to advise the court than the staff person from the supervised visitation center who witnessed or overheard that child being influenced? Thus, a reporting mechanism from the SV program to the court would be ideal.

KO: Next meeting...Friday, November 9, 12-1pm. I'll email everyone the phone number. And I'll send you a list of things that will go in the report to DCF on 11/13. I'll want to get your permission on: draft mission statement, draft principles, draft issues on security, draft recommendation on funding, draft recommendation on rule change for 61 and 39.

KO: What about DV statute change?? How can we get the courts attention in cases when there is no pending 61 or 39 action, regarding a request for a hearing?

KO: I'll do research into SARA and look into what kind of training is required. Thanks.

Next Meeting is FRIDAY, NOVEMBER 9 at NOON (EST).NOTE THE PHONE CONFERENCE
LINE 850-644-2255

Standards Committee Conference Call
November 9, 2007

Present:

Karen Oehme

Katie Gerber

Julie Mayo

Kris Nowland

Kristin Sakamoto

Nina Zollo

Arlene Carey

Joe Nullet

Judge Jeri Cohen

Judge Robert Evans - guest

KO: Welcome. Are there any changes on the minutes from the Oct. 24 meeting?

(no)

KO: Thank you for joining us Judge Evans. What are your views on security at SV centers? What has been your experience?

JE: We would not operate supervised visitation without uniformed, armed deputies there. The way ours is organized, we have 2 deputies in uniform and we specifically park a sheriff units car in such a place that people have to walk by it. Show is more important than substance, really. People are less likely to do something wild and crazy if they think the place is being watched...The County funds our coordinator for the unit. One deputy stays at the front door, one roams.

JE: Our security personnel were initially paid for by a federal grant. That lasted 3 years. After that, had a meeting with sheriff and county chairman to see about funding. Ultimately, citizens are paying for it (SV security) one way or another. Better to have a controlled setting other than chaos. Since the federal grant ran out, security at supervised visitation has been part of the county budget. They fund our deputies.

JE: Between the chief judge and me, we had a plan and we presented it to the county in a way that makes sense to them. I stated I wouldn't want to be involved with a center if it wasn't safe.

AC: What have your incidents been like, with security around?

JE: There's been a dramatic drop. If you meet with law enforcement, they'll have incident-related statistics. Ask them how many calls they've dealt with that are domestic? How many were related to the exchange of children? Talk to them—I'd say probably half of those calls are related to those issues. Then ask them how much did responding to those calls cost? The county is paying for it. Security (at SV centers) is a way to save you money, not costing you money. It really does save money.

KO: Any questions?

JE: If anyone wants to call me individually, I'd be happy to do that. Back line: 407-836-2337

KO: Thanks, Judge.

To group: Please look at #2 in the initial set of committee recommendations. It says that the committee urges the legislature to fund security. Is this the language we like? Should the recommendations go as is?

AC: I would use "onsite" security

KO: Alright. Good. Next...partnership and communication with courts. Ask legislature to amend 61 and 741...request that judges set hearings when alerted in writing? A request by program is a trigger to set a hearing if appropriate?

JC: I hate allowing for the option to choose, but I guess you have it. Either they (the program) is going to request a hearing cause there's something unhealthy for the child or they need to terminate the SV if its not necessary and make room for somebody else.

KO: So the language...it's not truly only that if there's a problem on site...it's if there's a problem with the case referral, too? There is some concern that there might be hearsay problems.

JC: Hearings don't need to evidentiary in nature.

KO: Is it okay if we don't limit it to something that happened on site?

JC: It's okay to say that. The main concerns are: the best interest of the child, the safety of the families and the staff, and the efficient use of time.

KO: What about the issue of 714...if it's opened in this legislative term, FCADV may have concerns about bad amendments?

NZ: If there's a way to address the issue without opening 741 that would be better...

KO: If there is any other way....741, those DV cases are the hardest to get back to court.

NZ: I can take a look at it and talk to our executive director and see if there's any other way. Those cases are very important.

JC: I understand what you're saying. There has to be a way...these SV centers have so much relevant information. There needs to be access to court. We don't want the visitation centers to abuse statutory directive, but we want them to get into court.

KO: Judge Cohen and I are working with lobbyists to make sure the bar won't oppose the language. Staff members at the legislature...say that there are members who may be looking for small bills and may think this one is a good one. If the bar doesn't oppose it, there could be some people who are interested. If we don't get to bring 741 along...it's half our battle lost.

KO: I'll send those two recommendations out today...I have to get DCF a preliminary report that says what we've done. Intro, rosters, approved draft definition, mission statement, 4 guiding principles, formal preliminary recommendation for upcoming session, discussion of safety standards, plan for 2008—hammer out standards that would wrap around guiding principles. Included appendix, court standards, and—if its okay—copies of minutes and meeting notes?

(general agreement)

KO: I won't discuss the lethality issue. Next thing: danger assessment. Feedback about SARA?

JC: This tool is not the appropriate tool to be used for a variety of reasons. There's no indication that it's particularly effective, it requires lots of training, it may be too lengthy as well. One suggestion is that we modify it to be relevant to the visitation center and administered at intervals. Do we want to keep going this route or what? Do we want something uniform or does it matter?

AC: Risk assessment matters less if we have onsite security...

(general agreement)

JN: It may be interesting to experiment with SARA...what would the implementation be like? Could it be done properly? I'm concerned it may be overwhelming.

KN: The length, the expertise needed. It's too much.

KO: I think there are programs who routinely ask these questions...but what do you do with it once you check off a certain number of these. When do you get security?

JN: Security can be preventative, as well as a deterrent...which can make a program possibly more effective.

KO: Does the committee think that a risk identification that asks the questions that are in all these tools/standards---is it helpful at all to ask these questions?

JC: SARA's meta-analysis says it's only moderately helpful. But we don't know if it really makes a difference. I need to see a meta-study. Directors can pick out questions based on their experience...if we can get agreement about crucial questions that make a determination that requires security...it's not scientific, but it may be the next best thing. What would constitute an absolute need for security? What's the very minimum? Not sure if that makes sense, but I'm trying to think how we could work with this.

KO: We can send out a survey to directors...there's probably a core of 10 directors with about 7-10 years of experience. But how does that work with recommendations for funded security?

JC: Funded security is the ideal. We still need to move forward with the need for security. In the meantime, send out the SARA or whatever to those 10 directors...saying something like, "in your experience, what are your top choices for security measures?" Then we can go to the different SV center heads with our survey results...and a guide for security.

KO: Kris, Joe, you'd be two of the 10.

KN: I'm going to be swayed...I work for DV. I also have security all the time. I may be biased.

JC: That's okay. Goal is to work towards security. We are doing this to minimize risk. I think the centers will be amenable.

KO: So...in your experience, which yeses would trigger security? I do think the 10 directors will be at centers with security.

JC: They need to reach a consensus. How many questions, what's a reasonable questionnaire...it's not perfect, it's not scientific, but we can work with what we have.

KO: Didn't we address this last week...the "what's the number that would trigger security" issue?

JC: Well, maybe not a number, but a "yes" to any one of these...

KO: I'll develop a tool. Joe, Kris, you're getting it first.

KO: Agenda's for next meetings: Long-term plans for 2008. What are our goals for the next few months?

NEXT MEETING: Monday, December 3, 12:00-1:30pm. Goal for that meeting is to plot out where we are going. By this time, you'll have the preliminary recommendation report—via snail mail and electronically.

FOLLOWING MEETING: Friday, December 14, 12:00-1:00pm

KO: Any questions? Thank you all.

DANGER ASSESSMENT

Jacquelyn C. Campbell, Ph.D., R.N.
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Several risk factors have been associated with increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when you were abused by your partner or ex partner. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking; bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones
4. Threat to use weapon; head injury, internal injury, permanent injury
5. Use of weapon; wounds from weapon

(If **any** of the descriptions for the higher number apply, use the higher number.)

Mark **Yes** or **No** for each of the following. ("He" refers to your husband, partner, ex-husband, ex-partner, or whoever is currently physically hurting you.)

- _____ 1. Has the physical violence increased in severity or frequency over the past year?
- _____ 2. Does he own a gun?
- _____ 3. Have you left him after living together during the past year?
3a. (If have *never* lived with him, check here_____)
- _____ 4. Is he unemployed?
- _____ 5. Has he ever used a weapon against you or threatened you with a lethal weapon?
(If yes, was the weapon a gun? _____)
- _____ 6. Does he threaten to kill you?
- _____ 7. Has he avoided being arrested for domestic violence?
- _____ 8. Do you have a child that is not his?
- _____ 9. Has he ever forced you to have sex when you did not wish to do so?
- _____ 10. Does he ever try to choke you?
- _____ 11. Does he use illegal drugs? By drugs, I mean "uppers" or amphetamines, "meth", speed, angel dust, cocaine, "crack", street drugs or mixtures.
- _____ 12. Is he an alcoholic or problem drinker?
- _____ 13. Does he control most or all of your daily activities? For instance: does he tell you who you can be friends with, when you can see your family, how much money you can use, or when you can take the car? (If he tries, but you do not let him, check here: _____)
- _____ 14. Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can.")
- _____ 15. Have you ever been beaten by him while you were pregnant? (If you have never been pregnant by him, check here: _____)
- _____ 16. Has he ever threatened or tried to commit suicide?
- _____ 17. Does he threaten to harm your children?
- _____ 18. Do you believe he is capable of killing you?
- _____ 19. Does he follow or spy on you, leave threatening notes or messages on answering machine, destroy your property, or call you when you don't want him to?
- _____ 20. Have you ever threatened or tried to commit suicide?

_____ Total "Yes" Answers

Thank you. Please talk to your nurse, advocate or counselor about what the Danger Assessment means in terms of your situation.

RISK IDENTIFICATION FOR DOMESTIC VIOLENCE REFERRALS^[KO1]

Before the first visit or monitored exchange, supervised visitation providers should make a routine effort to identify risk factors in cases in which an Injunction^[KO2] for Protection Against Domestic Violence has been granted. This risk identification is critical for the following reasons:

- To ensure that staff are aware of the level of risk presented by the referral;
- To ensure that staff/volunteers have adequate training and sufficient skill to address the issues present in the referral;
- To assess a need for additional security or modifications in existing security arrangements during scheduled visitations or exchanges; and,
- To justify the decline or refusal of a referral because of risk factors.

When should a risk identification be conducted?

A risk identification should be conducted by a program director or other designated staff whenever a case is referred by the court in which an Injunction for Protection Against Domestic Violence has been granted. Such an identification should also be completed in family law cases in which the judge orders supervised visitation because of prior history of domestic violence. Further risk screening should be an on-going process as long as services are being provided. Risks in individual domestic violence cases may increase, decrease, or stay the same after the case has been referred to supervised visitation. Staff should not assume that the risk decreases simply because the court has ordered supervised visitation.

How should a risk identification be completed?

Program staff should conduct a risk identification by completing the following tasks:

1. Require both parties or their attorneys to produce all relevant court, law enforcement or related records, such as orders for protection, law enforcement reports, custody orders, violations of protection orders, etc. This is the responsibility of the parties. It should not be the responsibility of the program's staff to copy this material from court files.
2. If the adult victim or alleged adult victim is staying in a domestic violence shelter, obtain a release of information form from the victim and discuss any safety

concerns shelter personnel may be aware of. Staff may also want to participate with shelter staff in the development of a safety plan relative to the victim and children. For example, discuss safety concerns relative to the victim's transportation to and from the visitation program. Be aware of the limits of confidentiality in these discussions; alerting the victim to the fact that the information she provides to supervised visitation staff may be subpoenaed at some point during the litigation.

3. Interview both parties, reminding them of the limits of the program's confidentiality policies, and conduct a risk identification using the assessment presented in this chapter. Be alert to denial and minimization of abuse.
4. Determine whether to accept or decline the referral, notify security, or assign particular staff with expertise in domestic violence issues to the case.

RISK IDENTIFICATION

Table 5.4 identifies factors that show a strong association for increased violence or even lethality to occur. This can be used by program directors or other designated program staff after reviewing court documents, background information, and intake notes.

Note: Program directors should be aware of these risk factors to ensure the safest visitation possible. Factors indicated by asterisks (**) indicate a heightened risk of harm. If these risk factors are present, program directors should re-assess the program's existing security arrangements and the training and expertise of staff and either make appropriate accommodations or decline the referral. Appropriate accommodation might mean the case is assigned to a staff member with domestic violence or other expertise and that the visit is scheduled at a time when the program has security personnel on site.

Table 5.4
Risk Identification for Domestic Violence Victims

	Present in this Case	Not Present	Unknown
1. In the past 12 months, there has been an increase in the level of physical or other types of violence.			
2. The victim/alleged victim has been choked or her partner has attempted to strangle her.**			
3. Abusive or allegedly abusive partner has recently acquired guns or knives.			
4. Abusive or allegedly abusive partner has become more threatening with guns or knives which he previously possessed.			
5. Batterer has stalked or attempted to use other surveillance tactics to monitor partner in the past 30 days.			
6. Batterer has threatened to kill himself in past 30 days.**			
7. Batterer has threatened to kill victim in past 30 days.**			
8. Batterer has threatened to kill children in past 30 days.**			
9. Batterer has criminal charges pending.			
10. Batterer has violated victim's order for protection.**			
11. Batterer has failed to appear for final hearing or order for protection.**			
12. Batterer has threatened to harm or has harmed family pets.			
13. Batterer has mental health conditions which increases violence.			

	Present in this Case	Not Present	Unknown
14. Batterer has destroyed mother's or child's personal property (clothing, furniture, personal belongings or car) in past 30 days.			
15. Batterer has threatened other family members or neighbors.			
16. Victim has filed for divorce and/or requested custody of children.			
17. Victim is pursuing criminal charges against the batterer.			
18. Batterer has tried to stop victim from seeking help from law enforcement, domestic violence shelter, supervised visitation program, court, or other agencies.			
19. Batterer has locked victim in the home or otherwise imprisoned her against her will in the past 30 days.**			
20. Victim is currently in domestic violence shelter or has made other efforts to leave batterer.			
21. Batterer has told victim he cannot or will not live without her and their children.**			
<p align="center">Please note that an absence of these factors does not mean that danger is not present for the victim</p>			

CHILDREN'S JUSTICE CENTER
Domestic Violence / Injunction for Protection
INTAKE INFORMATION

CUSTODIAL PARTY

Date of Referral: _____ **Source of Referral:** _____ **Judge:** _____

Division: _____ **Case #:** _____ **Intake Complete by:** _____

If initial supervised visitation fee is waived, check box: ☐

Custodial Party: _____ **Relationship:** _____

Address: _____

Home# _____ **Cell #** _____ **Work #** _____ **Other** _____

SS#: _____ **DOB:** _____

<i>PARENT INFORMED THAT THEY <u>MUST</u> PROVIDE THEIR PHOTO ID TO BE COPIED PRIOR TO FIRST VISIT</i>		<i>Staff Initials</i>	
<i>ID COPIED</i>		<i>Staff Initials</i>	

Requested Time:	
------------------------	--

Attorney's Name: _____ **Phone #** _____ **Fax #** _____

Attorney's Address: _____

Children's Names	Race/Sex	DOB	SS#

Visit Frequency:

<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Bi-Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Bi-Monthly
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	Yes	No	Date/Comment
Criminal History Checked			
Copy of Petitioner's Narrative? <i>(From the I.F.P.)</i>			
Copy of the Order granting the Injunction for Protection?			
Police Report Obtained?			

CHILDREN'S JUSTICE CENTER
Injunction for Protection - Intake Evaluation

Custodial Party

CASE NAME: _____ **CUSTODIAL PARTY:** _____

1. Who is allowed to visit the child (per court order)? _____

2. How long have you been in this relationship? _____ **3. How long have you been separated?** _____

4. Were there physical injuries related to this IFP? _____

5. Were the police called? _____ **6. Did anyone go to jail?** _____ **7. If so, who?** _____

8. Has anyone ever taken out an IFP against you? _____ **9. (If yes to 8) Explain:** _____

10. (If yes to 6) Have you ever violated an injunction? _____ **11. If yes, against whom?** _____

12. Do you own a weapon? _____ **13. If yes, what type?** _____

14. Where were the children when the violence occurred (which is outlined in the IFP)? _____

15. How do you think the situation affected them? _____

16. When was the last time the Respondent visited with your children? _____

17. What subjects would you not want the visitor to discuss with the child(ren)? _____

18. Do the children have any health problems? _____ **19. If yes, explain.** _____

20. Is there any history of mental health issues? _____ **21. If yes, explain.** _____

22. Is there any history of drug or alcohol abuse? _____ **23. If yes, explain.** _____

24. Do you have any security concerns? _____ **25. If yes, explain.** _____

Other important information. _____

Info taken by: _____ **Date:** _____

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