I. AUTHORITY
The Director of the Child and Family Services Agency adopts this policy to be consistent with the Agency’s mission and applicable federal and District of Columbia laws, rules and regulations as well as the LaShawn A. v. Gray Implementation and Exit Plan (December 17, 2010).

II. APPLICABILITY
All CFSA staff and contract agency personnel.

III. RATIONALE
The mission of the Child and Family Services Agency (CFSA) is to promote the safety, permanence, and well-being of children and families in the District of Columbia. This mission can best be achieved if Agency and contracted agency personnel ensure frequent, purposeful visitation and on-going contact between social workers and children, between social workers and parents, social workers and resource parents, and between children and their families.

Social workers are in a position to make informed decisions about the safety, permanence, and well-being of children when they visit children frequently and conduct thorough assessments of children’s needs as well as the extent to which their needs are being met and their progress toward permanence. Through frequent and purposeful visits with parents, social workers can engage families in advancing case plans, assess family interaction, adequately communicate expectations, and monitor children’s safety and progress toward their permanency goals. Children and families should have frequent visits with social workers to get needed services and supports for improving their outcomes.

Visitation with parents, siblings, and other kin is a child’s right, not a privilege or something to be earned or denied based on behavior of the child or their parent(s). The child, the parent or legal guardian, and each sibling have a right to visit as often as reasonably necessary to develop and enhance their attachment to each other. While the maintenance of familial connections is always important for children, it is particularly important for children with the goal of reunification. Reunification can best occur when the familial tie is maintained through the child’s frequent visitation and on-going interaction with their parents and siblings.
IV. POLICY

It is the policy of CFSA, as well as its contracted agencies, to ensure that social workers visit children and their families, and that children maintain frequent visits with their parents, kin, significant non-relatives and siblings as appropriate. Social workers shall document all visits in FACES within 24 hours (or the next business day) from the time the social worker or designee is aware of the visit’s occurrence.

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VI. PROCEDURES

Procedure A: Visitation General Requirements

An effective visitation plan helps to preserve the family bond and maintain significant ties with parents, siblings, adult relatives, and other significant non-relatives. Each visit should incorporate effective communication, furthering of the partnership with participants, and sensitivity to and respect for cultural differences. In addition, quality visits should support deeper engagement of parents (including birth fathers) with the child or youth and move them forward in line with their case plan.

1. The assigned social worker shall meet as soon as possible with the child’s parents, family members, and resource parents to develop a visitation plan.

2. In all cases, visitation and contact between parents, siblings, and other people with whom the child has a significant connection need to be in the best interest of the child.

3. The social worker shall engage the child’s birth parents, resource parents, and other team members in the development of a written visitation plan for all new in-home cases, initial placements, or re-entries into foster care. The social worker shall ensure that the safety and well-being of the children are the paramount concerns when developing the visitation plan.

   a. The visitation plan shall satisfy each of the following requirements:

      i. Include the names of each person, including the child’s siblings, with whom the child may or may not have contact.

      ii. Include the purpose and conditions of visits and contacts, including type, time of day, frequency, length, and location.

      iii. Identify who is responsible for ensuring that the visits occur and who is responsible for transporting the child(ren) to and from visits.

      iv. Describe the reason for supervision when supervision is required, and who will conduct the supervision.

      v. Indicate how the visit supports the ongoing safety plan.
vi. Use language that parents or legal guardians can understand.

b. When developing the visitation plan, the social worker shall complete all of the following tasks:

   i. Ensure that the type, time of day, frequency, length, and location of visits maximizes the contact between the parents (or legal guardians) and the child, while supporting the ongoing safety plan, permanency plan, and visitation order when applicable.

   ii. Whenever possible, arrange visits that do not disrupt the school schedule of the child or the work schedule of the visiting parent or legal guardian.

   iii. Arrange additional contact such as telephone calls, e-mail, and letters, and other activities (such as attendance by parents or legal guardians at doctor appointments, school events, and church) that support the ongoing visitation plan.

   iv. Address barriers to visitation that must be overcome in order for the parent, legal guardian, and child to participate in the visits. Examples include but are not limited to barriers concerning transportation, adaptations for those traveling long distances, health care requirements, and arranging child care for a child’s sibling.

   v. Take into consideration each parent’s or legal guardian’s employment and treatment obligations.

   vi. Ensure that the visitation plan considers the safety needs of any non-offending parent or legal guardian in cases involving domestic violence, including but not limited to scheduling separate visits for each parent or arranging safe drop-off and pick-up locations.

   vii. Explain to a parent or legal guardian the importance of maintaining consistent contact with the child, as this impacts the quality of their relationship with the child and progress of the case.

   viii. Take the actions necessary to assure culturally relevant visitation services as well as language-appropriate services.

   ix. Explain known or anticipated reasons for ending the visit (such as health or safety concerns).

   x. Discuss alternatives when visits are cancelled due to circumstances of the parent or legal guardian, substitute caregiver, or the Agency.

c. The social worker shall document the engagement of parents, resource parents, and other team members in the development of the visitation plan, and document the parents’ refusal or inability to participate in the process.

d. The visitation plan may be reviewed or revised at any time and must be reviewed every 90 days during the completion of the case plan.
4. The social worker shall be responsible for conducting an ongoing family assessment, in consultation with other team members, to continually assess for safety, risks, needs, and strengths during every visit, from initial contact to case closure, and document the assessment findings in FACES. During each visit with children (whether in home or in foster care), the social worker is responsible for assessing safety by meeting with the child outside the presence of the caregiver.

   a. Social workers shall assess the risk and safety factors in children’s home and settings other than the home environment, (e.g., the school, neighborhood, and homes of other biological family members), in order to ensure maltreatment does not occur.

   b. In assessing for safety at the location where visitation will occur, social workers must immediately address imminent safety issues in a manner that is relevant to the situation, e.g., by using techniques such as counseling, coaching, and teaching.

5. In all instances, visits shall take place in the most family-like setting possible. Social workers may contact the Healthy Families/Thriving Communities Collaboratives to assist with establishing visitation in family-like settings. The social worker should constantly assess the location and duration of visits and make flexible arrangements for all parties involved, which will result in updating the visitation plan as may be needed and appropriate.

   Note: Social workers shall use diligent efforts to ensure that visits occur in the home. Any restrictions shall be based on safety concerns that must be documented in the record.

6. During each visit the social worker shall help promote meaningful interaction and positive engagement between the child(ren) and those participating in the visit. The social worker shall promote such interactions, including but not limited to the following approaches:

   a. Talking about significant issues regarding the child or youth (e.g., medical needs, future plans, and how he or she is doing in school).

   b. Asking how the parents, caregivers, and other visitation participants would like to be involved.

   c. Asking whether other family connections can be made for the child in regard to continued support or permanence.

   d. Collaborating with the parents or those interested in becoming a placement resource to assess whether he or she could benefit from interventions or services.

   e. Inviting visitation participants to the next team meeting.

   f. Assessing whether visitation is appropriate and desired; if so, preparing the child or youth and parent for continued visitation.

7. A visit between the child (under the Court’s jurisdiction) and their parent or guardian, custodian, or sibling shall only be limited, suspended, or prohibited through court order.
a. If the social worker identifies a compelling reason for why visitation should be modified (e.g., limited, suspended or prohibited), the social worker, shall receive the approval of his or her supervisor, and program manager, to present a recommendation to modify visitation to the Court through the assigned assistant attorney general (AAG). The reason shall be well-supported by evidence. Such instances include, but are not limited to, the following circumstances:

i. The child’s safety cannot be managed by supervision.

ii. There is reason to believe a parent or legal guardian’s acts or omissions would result in child abuse or neglect during the visit.

iii. Visitation is detrimental to the child’s physical and/or emotional well-being.

b. If the Court modifies the visitation, the modification shall be documented in the visitation plan.

c. If the Court makes a decision that the social worker believes is contrary to the best interests of the child (e.g., issues related to safety, permanence, and well-being), the social worker shall raise the issue to his or her supervisor and to the assigned AAG.

8. The social worker, nurse care manager, and/or family support worker shall document visitation and contact within 24 hours (or the next business day) from the time the social worker or designee is aware of the visit’s occurrence, including documenting the safety of the child (see Procedure F below). Instances where visits are cancelled, not scheduled, or do not take place should be fully explained and documented in FACES.

Procedure B: Social Worker Visits with Families Receiving In-Home Services

Social worker visits with families receiving in-home services are central to the Agency’s efforts to prevent child abuse and neglect, and to strengthen families. Social workers can best adequately assess a child’s safety and a family’s stability through frequent visitation.

1. Families receiving in-home services shall receive two visits per month:

   a. A CFSA social worker or private agency social worker shall make at least one monthly visit to families for which abuse or neglect is substantiated and a determination has been made that children can be maintained safely in the home with services.

   b. A CFSA social worker, CFSA family support worker, private agency social worker, or a Collaborative family support worker shall make a second monthly visit at the home, school, or alternative location.

   c. The needs of the child and family shall determine the frequency of additional visits.
2. The social worker may continue to make unannounced visits when appropriate. The likelihood of such visits should be explained to families at the initial phase of engagement.

3. During every visit, the social worker shall assess safety and risk of the children in the home by meeting with the child outside the presence of the caregiver (e.g., health, educational, and environmental factors, as well as the initial safety concerns that brought this family to the attention of the Agency). The social worker shall assess the safety of the family, household, and community through each of the following steps:
   a. Talking directly with the child and asking him or her about safety.
   b. Engaging the family in discussions about the safety, stability, and well-being of children remaining the home.
   c. Assessing family dynamics (i.e., parent and child interactions) and parent responsiveness to the child’s basic needs.
   d. Observing the physical environment of the home for hazards, provision of food, and operable utilities.
   e. Collaborating with family members to identify family strengths and protective factors that reduce risk.
   f. Collaborating with family members to identify risk factors that make the child unsafe.
   g. Formulating a safety plan with the family in an effort to ameliorate immediate danger and risk in the future.
   h. Determining accessibility and availability of services needed to reduce risk to the child.
   i. Assisting the family with concrete services (e.g., food, housing, and medical care) in an effort to minimize crises.
   j. Determining the least intrusive intervention necessary to assure child safety and family stability.

4. During each visit with families receiving in-home services, the social worker shall complete both of the following steps:
   a. Ensure that the needs of all of the children in the home are being met.
   b. Assess progress on the family’s case plan and initiate updates through discussions with the parent(s).

**Procedure C: Social Worker Visits with Children in Out-of-Home Care**

Children in out-of-home care should have frequent visits from their social workers, regardless of the type of placement in which they live. Frequent visitation and contact with children in out-of-home care enables social workers to continuously assess and monitor children’s safety, permanency, and well-being.
1. To assure the child’s positive adjustment to a new placement, children entering foster care or experiencing a new placement while in foster care shall receive one visit per week during the first four weeks of placement.
   a. A CFSA or private agency social worker with case management responsibility shall make at least two visits to each child during the first four weeks after a child is placed in out-of-home care or undergoes a placement change. During each visit, the social worker shall meet with the child outside the presence of the caregiver to assess the child’s safety in the home.
   b. A CFSA or private agency social worker, family support worker, or nurse care manager shall make two additional visits to each child during the first four weeks of a new placement or a placement change.
   c. At least one of the above visits during the first four weeks of a new placement or a placement change shall be in the home where the child is placed.
   d. At least one of the visits held within the first four weeks of a new placement or a placement change shall include a conversation between the social worker and the resource parent in order to assess assistance needed by the resource parent from the Agency.

2. After the first four weeks of a new placement or placement change, each child in out-of-home care (i.e., foster family homes, group homes, congregate care, independent living programs, etc.) shall receive two visits per month.
   a. A CFSA or private agency social worker with case management responsibility shall visit with each child in out-of-home care at least once a month.
   b. A CFSA or private agency social worker, family support worker, or nurse care manager shall make a second monthly visit to each child in out-of-home care either at the child’s school or alternative location.
   c. At least one of the above-listed visits each month shall occur in the home where the child is placed.

3. If the child is placed more than 100 miles outside of the District of Columbia, a social worker from the receiving state shall supervise the placement through the Interstate Compact on the Placement of Children (ICPC). The child’s social worker (either CFSA or contracted placement agency) shall monitor the placement with monthly telephone calls to the social worker from the receiving state, monthly telephone calls to the child, and visits from the child face-to-face at least twice per year.

   Note: Depending on the circumstances, children placed more than 100 miles outside the District of Columbia may require more frequent visitation or contact. The social worker shall consult with his or her supervisor to assess the child’s needs and determine the appropriate level of visitation and contact needed.
4. During every visit, the social worker shall assess safety and risk of the children in the home (e.g., health, educational and environmental factors, as well as the initial safety concerns that brought this family to the attention of the Agency) by meeting with the child outside the presence of the caregiver. The social worker shall assess the safety of the family, household, and community through all of the following means:

   a. Speaking with the child or youth about activities and how to remain safe outside the home (i.e., in the community or at school) with a focus on preventing future harm.
   b. Speaking with youth about their ability to protect themselves from harm and practicing self-care, including health issues related to safe sex practices, avoiding use of drugs and alcohol, and taking steps to ensure gynecological health (for female youth).
   c. Assessing caregiver-child interactions, and caregiver responsiveness to a child’s basic needs.
   d. Observing the physical environment of the home for potential hazards, provision of food, and operable utilities.
   e. Identifying the factors that could make the child or youth at risk for child maltreatment.
   f. Identifying caregiver strengths as well as protective factors that reduce a child or youth’s risk of maltreatment.
   g. Formulating a safety plan with the caregiver, if needed, to ameliorate immediate danger and risk in the future.
   h. Determining accessibility and availability of services and activities need to reduce risk of maltreatment and to promote well-being.
   i. Engaging caregivers in the assessment of the child or youth life skills, and create a plan for the caregiver that supports attainment of these life skills.
   j. Discussing with the caregiver his or her relationship with the child or youth’s biological parents, and the caregiver’s potential role as a teaming partner or possible mentor for the biological parent.
   k. Spending part of each home visit with the caregiver and child or youth together and part of it alone with each.

5. Social workers shall discuss with caregivers all progress made on the case plan and identify next steps that need to be taken to move the case to permanency and safe closure.

### Procedure D: Social Worker Visits with Parents of Children in Out-of-Home Care

When a child’s goal is reunification, social workers shall visit with parents frequently. Efforts should be made by the social worker to involve the parents in the case-planning process in order to engage parents in the process and facilitate achievement of the permanency goal.
1. Parents that have children with a goal of reunification shall receive two visits per month for the first three months from the time the child has been removed, and one visit per month thereafter, unless there is documentation that the parents are unavailable or refusing to cooperate with the Agency or contracted private agency.
   a. For children with a goal of reunification, in accordance with the case plan, the CFSA or private agency social worker with case management responsibility shall visit and work with the child’s parent(s) at least once a month within the first three months post placement.
   b. A CFSA social worker, nurse care manager, or family support worker shall make a second visit during each month for the first three months post placement.
   c. After three months from the child’s removal from the home, the social worker shall continue to work with the child’s parent(s) as often as necessary to facilitate reunification, but with a minimum of once a month for as long as the goal is reunification, unless there is documentation that the parents are unavailable or refusing to cooperate with the Agency or contracted agency.

2. As part of continual family assessment, social workers shall use evaluation tools such as Structured Decision Making (SDM™), genograms, and family team meetings (FTMs).

3. In order to promote the reunification of children with their parent(s), the social worker shall strive to engage the parent(s) by conducting each of the following activities:
   a. Ensure continued progress on the child and family case plan.
   b. Assist the parent in obtaining needed resources.
   c. Affirm progress and address concerns.
   d. Discuss the family and child’s separation and loss issues.
   e. Examine other issues related to the delivery of services to identify and remove or reduce barriers to the attainment of those services.
   f. Discuss any medical, dental, mental health, or educational needs or appointments for the child.

4. During every visit with a birth parent, the social worker shall assess the safety and risk of children remaining in the parent’s home. Social workers shall complete the following steps:
   a. Talk directly with the child and ask the child about safety.
   b. Engage the family in discussions about the safety, stability, and well-being of children remaining in the home.
   c. Assess the family’s dynamics (i.e., parent-child interactions) as well as caregiver responsiveness to the child’s basic needs.
   d. Observe the physical environment of the home for hazards, provision of food, and operable utilities.
e. Identify with the parent the strengths and protective factors that reduce risks for maltreatment.

f. Identify with the parent the factors that could make the child or youth remaining in the home at risk of maltreatment.

g. Formulate a safety plan with the family in an effort to ameliorate immediate danger and risk in the future.

h. Determine accessibility and availability of services to meet the needs of children remaining in the parent’s home.

i. Engage the family in discussions about the needs of children remaining in the home, and assist the parents with accessing services.

j. Social workers should address concrete needs of families as soon as possible and assist the family by providing appropriate remedies (e.g., clothing vouchers, food, housing, medical care, assistance with payment of utilities) in an effort to minimize crises.

5. At every visit, the social worker, nurse care manager, and/or family support worker shall discuss permanency goals, visitation requirements, and required action steps in the case plan. The social worker shall document case plan progress in the case notes (FACES).

### Procedure E: Visitation Between Children in Out-of-Home Care and Their Families

Children in out-of-home care should have frequent visits with their parents, siblings, and other kin unless the Court determines and orders that it is not in the best interest of the child to have visitation. Maintaining these family relationships can provide a sense of stability to children who have been removed from their homes. It also provides birth parent(s) with the opportunity to demonstrate they can meet their children’s safety and developmental needs. Visits with kin also promote children’s safety and well-being, as well as permanency; whether kin are becoming permanency resources themselves, or assist with identifying additional relative placement resources.

1. The frequency of visits from parents, and siblings with children placed in out-of-home care shall occur in the following manner:

   a. Agency and contracted-agency social workers shall assure that children who are removed from the home visit with parent(s) or legal guardian(s) within the first week of removal.

   b. Children with a permanency goal of reunification shall visit with their parents or legal guardians at least once a week, unless clinically inappropriate and limited, suspended, or prohibited through a Court order.

   c. The social worker shall use reasonable efforts to ensure that siblings who are removed at the same time and are initially placed apart shall have contact with each other within 48 hours of placement.
d. Children placed apart from their siblings shall have visits at least twice a month with some or all of their siblings unless clinically inappropriate and limited, suspended, or prohibited through a Court order.

2. Through the case-planning process the social worker shall develop a more detailed child visitation plan with parents, siblings, and significant relatives and non-relatives with input from the family team. The visitation plan shall be outlined in both the child and family case plans. Social workers shall assist (along with consultation by the family team) in making specific visitation arrangements between the parents and out-of-home caregivers, including suggested dates, times, and identifying individuals responsible for transporting and attending visits. The visits shall occur in the least restrictive manner in which the child’s safety can be managed.

3. The Agency shall make reasonable efforts to engage parents and siblings in maintaining visitation and contact with the child. In instances where visitation is cancelled, not scheduled, or does not take place, the social worker, nurse case manager, or family support worker (FSW) shall document this in FACES, and provide a reasonable justification as to why the visit did not occur despite the Agency’s best efforts to facilitate it.

4. In instances where visitation is limited, suspended, or prohibited, the Agency shall demonstrate the following:
   a. The social worker, along with his or her supervisor, with approval of the program manager, and/or the child’s therapist determine visitation to be clinically inappropriate (i.e., visitation is not in the child’s best interest). This clinical determination shall be documented in FACES by the approving program manager.
   b. Visitation is limited, suspended or prohibited via a Court Order.
   c. A treatment plan is put in place within 14 calendar days from the time visitation is limited, suspended, or prohibited. The treatment plan shall address the factors that resulted in the visit being limited, suspended, or prohibited, and the steps being taken to resolve these factors.
   d. At a minimum, the assigned social worker and the family team shall review the treatment plan and the decision to prohibit, suspend, or terminate visitation every 90 days during the completion or update of the case plan.

5. Unless the Court has entered a specific order regarding visitation, the social worker shall prioritize visits with the child’s parents or legal guardians, siblings, and other adult relatives or non-relatives. The social worker shall consider the preferences expressed by the child.
   a. When the permanency plan is reunification with a parent or legal guardian, the first priority of the social worker shall be to provide visits with parents or legal guardians, siblings, and any other adults granted visitation by the court.
b. When the permanency plan is a plan other than reunification, the visitation priority shall be to preserve the child’s attachment to parents or legal guardians and siblings, and to promote the child’s attachment to the placement resource.

c. The social worker shall consider establishing visits with significant non-relatives with whom the child has a significant attachment, when appropriate.

6. When siblings who were living together are removed and are placed apart, the social worker shall use reasonable efforts to ensure that there are sufficient visits and frequent contacts (i.e., phone, mail, and/or email communication) among the entire sibling group to help preserve the sibling bond. The social worker shall encourage activities that promote contact between siblings such as family visits, sleepover visits, attendance at one another’s school and sporting events, having siblings join the same sports teams, etc.

7. The social worker shall assure that children visit with incarcerated parents, unless the social worker determines through an individualized assessment of the child and his or her circumstances that visitation should be limited or denied. (See Engaging Incarcerated Parents Policy.)

8. At every parent and social worker visit, the social worker shall discuss permanency goals, visitation requirements, and required action steps in the case plan, and reflect the progress or lack thereof in case notes.

9. During every visit with parents, siblings, and significant others, the social worker shall also assess the safety of the children (e.g., health, educational, environmental factors, and the initial safety concerns that brought the family to the attention of the Agency) and document his or her assessment in the case notes.

10. In many instances, the parent and child or youth visitation must be supervised, based on the Court’s own finding or recommendations by the social worker, resulting in the Court ordering supervised visitation. When visitation is supervised, the social worker shall continuously encourage all of the following positive parenting skills and healthy parent and child interaction.

   a. Observe parent and child interactions and provide feedback and positive reinforcement.

   b. Assess awareness of child development and whether parents have realistic age-appropriate expectations for their children.

   c. Discuss with parents their child or youth’s academic and vocational progress, as well as any strengths and challenges.

   d. Model healthy interaction and communication between an adult and child or youth.

   e. Join with the parent to offer the child or youth opportunities to build skills and abilities, such as going on outings during visits.

   f. Provide examples of developmentally appropriate and non-physical options for discipline.
g. Be alert to signs of stress in parents, and initiate efforts to normalize parental stress.

h. Coach the biological parent towards the development of structure, family ritual, and routines (e.g., morning and bedtime schedules, and eating meals together, sitting down as a family).

11. For unsupervised family visits, the social worker shall work with the child or youth and parent to plan ahead and establish goals for the visits.

a. Social workers shall communicate with the parent before the visit to make the visit meaningful and to ensure that appropriate parenting skills are demonstrated. This may include planning a visit to a museum, a picnic, spending time with extended family members, celebrating holidays together, etc.

b. Social workers shall talk with the child or youth before the visit to prepare them and address any issues or concerns.

c. Social workers shall assist the family, whenever possible, in accessing the material resources needed to make visits more meaningful.

d. Social workers shall communicate with the parent, child or youth, and caregiver after the visit to assess how it went and if anything needs to be addressed before the next visit.

e. In order to assess and plan for the future, social workers should periodically observe unsupervised visits.

12. The social worker shall communicate to the resource parents and their responsibility in helping to maintain, support, and improve the child’s relationship with his or her family, including facilitating family visits, which may include with agreement by the resource parent visits in the resource parent’s home.

13. A child who is placed more than 100 miles outside of the District of Columbia in out-of-home care may travel home at the Agency’s or contracted agency’s reasonable expense, as frequently as is deemed appropriate through an individualized assessment of the child and her or her circumstances. If the parent has moved out of the District and the permanency goal is to return to the parent, the child may also travel to visit the parent, as frequently as is deemed appropriate through an individualized assessment of the child and her or his circumstances, at the Agency’s or contracted agency’s reasonable expense if the parent cannot afford to purchase the necessary tickets.

14. Between visits, social workers shall encourage children and families to maintain contact through telephone calls and written communication. Kin or out-of-home caregivers may only censor or monitor a child’s mail or phone calls (or other means of communication) to and from family with the express permission of the social worker who shall document the reasons for the limitations to communication.
Procedure F: Documentation of Visitation

Planning child visitation and a visitation plan with parents, legal guardians, siblings, and other significant persons shall be the collective effort of the social worker and the family team members.

1. The social worker shall document the visitation plan in FACES (in both the child and family case plans). (See Procedure A.2 above for information regarding the contents of a visitation plan.)

2. The social worker shall record in the contacts section in FACES the following information about every visit the child has with his or her social worker, parent(s), siblings, relatives, and other significant parties within 24 hours (or the next business day) from the time the social worker or designee is aware of the visit’s occurrence:
   a. The date of the visit
   b. The location of the visit, who attended, and the length of the visit
   c. The persons present for the visit
   d. The purpose of the visit
   e. What occurred during the visit, including the content of the visit with the child outside the presence of adult family members
   f. The impact of the visit on the child, in particular how these interactions impact on the child’s safety, permanency, and well-being
   g. The family’s progress since the previous visit

3. Instances where visits do not occur (e.g., visits are cancelled, not scheduled, or modified through court order) shall be fully explained and documented in FACES.

Note: All documentation regarding visit and contacts shall comport with Medicaid requirements. (For more information, please refer to the Agency’s Quick Reference Guide on Elements of Good Documentation.)