Recently, social workers’ visits with children in foster care have become a “hot topic.” What has brought increased attention to the value of such visiting? Notice comes from evidence gathered from the recent Child and Family Services Reviews (CFSR) that a linkage exists between positive outcomes for children in foster care and visits from a social worker. However, the reviews under CFSR also disclosed uneven attention to visitation, and a lack of standardization of practice among Minnesota counties.

Although there has been a long-standing recognition of the importance of some kind of surveillance to monitor the well-being of a child in care, now there appears to be a concerted effort to improve practice in this arena.

There are now several “works in progress” addressing the issue of visitation. Among them are: A PIP (Program Improvement Plan) under development by the Minnesota Department of Human Services; a project, “Family Connect” (through Family Alternatives); and initiatives sponsored by county child welfare staff.

Our contribution, in this edition of Practice Notes was informed by the wisdom of experienced practitioners and an exploration of national initiatives.

In our preparation, we scanned the literature; searched for protocols from other states; and uncovered fugitive guidelines that were embedded in unpublished papers. Somewhat surprisingly, given the importance of the topic, the literature references were few; detailed protocols from other states were scarce; and guidelines were rarely age-related. It was the field that yielded knowledgeable social workers who articulated for us their intuitive wisdom; their keen and sensitive observations derived from long experience; and their grasp of a child’s response to loss and deprivation. From practice experience, the keys to establishing a trusting relationship were identified. The challenge was finding ways to translate the “intuitive instincts” and the storehouse of skill and competencies of experienced social workers into tangible guidance for those assigned to do the valuable work of visitation.

Practitioners in the field were generous in their time and willingness to share their experiences. We are indebted to them (see “Acknowledgments”) for a large portion of this edition of Practice Notes. ~E.W.

GUIDELINES FOR PRACTICE: THE LEGISLATIVE REQUIREMENTS

The visit will provide a response to the legislative requirement that a local agency placing a child in foster care must:
A. Provide at least one pre-placement visit for the child unless the child is placed because of an emergency or is under six months old;
B. Provide social services to the child as necessary to meet the child’s needs;
C. Provide social services to the child’s family as necessary to:
   1. Remedy the conditions that caused placement; and
   2. Prepare for the child’s return home or, if return home is not possible, involve the family in making an alternative plan;
D. Assist the foster care providers in meeting the needs of the child; and
E. Provide follow-up services to the family and child if the child returns home.

Further, the Child and Family Services Improvement Act of 2006 requires case managers to visit monthly with foster children. The majority of these visits occur in foster care.

Source: Minnesota Rule 9560.0580 Service Requirements, based on Minnesota State Statutes 256.01, 256.82 and 260C.212.
Q: What are the important steps in preparing for the first visit?
A: 
- Always review the file as thoroughly as possible to acquaint yourself with this particular child.
- If possible, review the medical record.
- Consult ahead of time with the foster parents to determine concerns, if any.

Q: Should the visit always be with the child alone?
A: Yes. A portion of every visit should be devoted to a private discussion between the caseworker and the child. This can take place in a room with a closed door, on a walk with the child, “windshield time” in a vehicle, or in a neutral location, such as a restaurant, coffee shop, or a park.

Q: How do you clarify the purpose of your visit with foster/kinship foster parents?
A: Yes. In most cases, foster parents have been trained to expect that social workers will want to speak directly with the child in a one-on-one setting.
- Be sure the foster parent knows about the visit in advance and always thank the foster parent upon departing.
- When working with a child in kinship care, engage the kin in identifying the needs of the child for case planning and mutual interest in the well-being of the child.

Q: Do you ever stop by for a visit with the child unexpectedly, without the permission of the foster parent?
A: Yes. If your assessment tells you that for the safety of the child you need to have a candid look at the setting and the child’s lifestyle.

Q: Does the age of the child impact the arrangements for visiting?
A: Yes. In general, 12 years is the boundary age. Children over the age of 12 can decide where and when they want to meet with the social worker. The social worker should make decisions about visiting arrangements for children under the age of 12.

Q: How do you arrange visits when siblings have been placed together?
A: An observant first visit can give you direction for meeting siblings in a group or with individual children (or both).

Q: Should you arrange a visit at school?
A: Use the child as a guide. Some children do not want their classmates to know that they are living with a foster family. If the child is okay with a school visit, this is supplementary to the required face-to-face visit in the child’s home environment.

Q: How do you determine the frequency of the visits?
A: Several factors may influence the frequency of visits.
- Complete a well-being assessment for the child, and determine the necessity for visit frequency based on that assessment.
- Comply with the stated guideline to visit, face-to-face, at least one time every month.
- Visit more frequently if the placement is new to the child and circumstances require frequent checks to assure the stability of the placement.

There may be many “eyes on the child”: teachers, therapists, school social workers. Familiarity with their observations provides a detailed profile of the child.
THREE TASKS SHOULD BE ACCOMPLISHED IN THE FIRST VISIT:

- Introduce yourself to the child, with an explanation of your role.
- Discover the child’s family relationships.
- Provide the child with your name and phone number, and give assurance of your availability.

PRACTICE PROMPTS:
INTRODUCTION AND FAMILY RELATIONSHIPS ADAPTED TO AGES AND STAGES

For infants, toddlers, and preschool children, a public health nurse may accompany the social worker to assess developmental progress and well being.

A useful tool for discovering the family relationships of a very young child might be the HELPING HAND. The child is asked, while pointing to each finger, who is in the family and who is living with mom/dad. (Or, they can be asked to signify an adult/friend on each finger who is supportive.)

For a younger, school-aged child, the introduction might include language such as, “I am a social worker, and I am here to make sure that you are safe and doing well, while you are away from your family.” Contact information should be provided: “Here is my contact information—name, phone number. You can call me if you need anything. Let’s put your name and phone number on a card for me.”

Questions regarding the child’s family relationships might include: “What does your family look like?” - an adaptation of the genogram. “What do you call your foster parent?/What do you call your parent?”

For the adolescent, your introduction might convey the way you want to be addressed (i.e., first name) and explain your role as a social worker. In addition, you might include a question such as, “What would help to make the most of your situation?” and suggest what your role might be in that request.

In discussing family relationships, you might ask, “What does your family tree look like?”; “Do you have a significant adult/relative with whom you are close; on whom you rely?”; “How do you address your foster parent?” Leave a card with contact information.

*Olmsted County Community Services. (Last revised, August 17, 2006). “My Family”, a worksheet used by child protection workers. (Provided by Jessie Stratton.)
INVITE QUESTIONS

- “Is there any part of your new living situation that you do not understand?”
- “What do you like best about this placement?”
- “What would help to make the most of your situation?”
- “If you could name one thing that needs improvement, what would it be?”
- “What kind of relationship did you have with your mother? Your father?”
- “How are these relationships different from your relationship with your foster care mother and father?”

BE HONEST

Acknowledge the difficulties of the situation, but also ask the child what she/he wants to happen.

For older children, a discussion is in order as to why their parents behaved the way they did and how that situation has changed.

- Children are usually very protective of their parents and they will rarely disclose circumstances that they think will endanger their parents. Respect this as a privacy matter.
- Let the child know that if they share information that indicates that he, she, or a sibling is in danger, that you will have to report this information.

KEEP YOUR PROMISES

The child will need to know how often he or she will see you.

PRACTICE PROMPTS

In exchanges with the child:

- Give the child plenty of time to respond.
- Allow for silence.
- Acknowledge the child’s feelings.
- It is important to try to create a safe space for the child to feel comfortable asking questions.
- As you near the conclusion of the relationship because of pending reunification, prepare the child by telling him or her that it is a good thing that your visiting is coming to an end. “Now mom and dad can take care of you”.

Sources:


Best Practices in Engaging the Child

STAY ATTUNED TO IMPORTANT EVENTS IN THE CHILD’S LIFE –
- Birthdays
- School achievements
- Special events

USE A STRENGTH-BASED APPROACH WITH THE CHILD. FIND SOME ELEMENTS IN HIS OR HER BEHAVIOR THAT MERITS POSITIVE RECOGNITION –
- Adaptation to foster care
- School achievement
- Quality of friendships
- Sensitivity to the concerns of others

OPEN UP A CONVERSATION ON DAILY ROUTINES, DISCIPLINE, AND ETHNIC/CULTURAL TRADITIONS.
- Do you have rules in your foster home on things you should or should not do? What happens when the rules are broken? Do you think this is fair?
- What does your daily routine look like: taking medication, homework, bedtime?
- Do your foster parents know that you, your family and extended family have special ways to honor holidays, festivals, church attendance, and food preferences?

“Above all, discover what there is in this child’s life that gives them some happiness . . . moments of joy . . . something to look forward to . . .”
- Dr. Paul Steinhauer, Psychiatrist, University of Toronto, scholar-in-residence for Health Promotion:

A SIGNIFICANT TRANSITION: PREPARING FOR REUNIFICATION
- What happened that brought you into foster care? What do you think about that?
- Why do you think your parents behaved the way they did? Do you think their childhood influenced the way they behaved?
- Are you ready to go back to your parents? What do you think would help you in going back to be with your family?
- Perhaps your family will tell you about their experiences while you were away. In return, perhaps you can tell them what happened to you while you were in foster care: what you liked; what you didn’t like.
- When you are together, do you think you can tell them what you are looking forward to?

Some practitioners recommend bringing something small to give to the child. Books are always a good option and are often readily accessible at a low cost. Children’s services workers in Olmsted County have recently organized a used book collection. The goal is to collect one appropriate book for each individual child in care.

- Olmsted County Community Services

“IT is important to grasp the trauma suffered by children in separation from parents. At the same time, if we expect to see absorption in grief and disorganized behavior, we may fail to see the normative range of reactions . . . don’t over-pathologize . . . the child may provide a coherent account of adverse experiences and an acceptance of the reality of the situation.”
- Wendy Negaard, “Family Connect”, a Project of Family Alternatives
These are young people who are chiefly ages 13–14 years, with multiple behavioral issues; incidents of running away; homelessness; in and out of the correction system; periods in shelter care, residential treatment, substance abuse treatment programs, or foster care.

During the interval when the child is in foster care the responsibility for visiting to assure safety and a measure of well being is required.

- First, recognize that these young people may be involved with personnel from several agencies and community programs – legal services, outreach workers for emergency shelter, foster parents, residential or shelter staff, probation officers for delinquency. Child protection is, however, the agency responsible for planning for the youth’s safety, permanency and well-being.
- With stability, permanency, and well-being in mind, engaging the youth in future planning is paramount. Talk with him or her about permanency:
  - Review with her the known information about birth family and kin.
  - Discover the adults he trusts and explore how they can be involved with the youth’s planning.
  - Find out her interests, talents and aspirations: Are the youth’s interests represented in the plan?
- In the complex intersecting environments of the court, the school, child protection, health care, mental health care, and substance abuse systems, clarify your role and review the out-of-home placement plan with the youth.
- Ask the child about what is going well and who in all the intersecting systems he or she trusts. Acknowledge the child’s strengths and include them in the plan.
- Review your visiting plan with the youth to check on concerns and well-being. Again, provide a card with name and phone number.

### Preparing the Older Youth for Independent Living

**RESPOND TO PENDING SEPARATION WITH ADEQUATE AND REALISTIC PLANNING:**

- Review progress towards vocational and educational goals that includes next steps and resources
- Ensure the youth has a written copy of his or her health and social history
- Consider with the youth his or her previous service needs and develop a list of adult services and information about how to access those services.
- Help to clarify the relationship between the youth and the foster family after the foster care placement has ended.
- When appropriate, assist the youth in developing a plan to maintain contact with the birth family.
- Teach the youth how to access personal documents such as a birth certificate, social security account, and tribal documents, when applicable.
- Review the social history with the youth and answer questions about family history (If you do not have the answer to the youth’s questions, figure out how to determine this information together.)
- Provide the youth with a list of his or her medical providers.
- Discuss the availability of support groups that can share concerns with sex, drugs, friends, jobs, and risk-taking behaviors.

Ensure the youth has at least one supportive, caring adult in his or her life.
From your agency’s perspective: “If you didn’t record your visit, then it didn’t happen”.

DOCUMENTATION SERVES THREE PURPOSES:

- Accountability: Data for the Social Services Information System (SSIS) to record time, date, and barebones content of a face-to-face visit.
- Continuity: Notes in a record allow continuity in the event of a change in the assigned social worker.
- Case Planning: A continual assessment of the child’s well-being and a child’s evolving needs.

A CHECKLIST FOR DOCUMENTATION: TO IMPROVE THE FREQUENCY AND QUALITY OF SOCIAL WORKER VISITS

Record:

- Date and location of contact
- Physical health / completion of health exam
- Emotional and behavioral well-being: Coping skills with anger, stress, challenges in home, school, and community
- Completion of mental health screening
- School information: Grade completion, specialized education plan
- Changes in family relationships
- Names and contact information of individuals who comprise the child’s support network
- Length of time in care
- Special needs
- Are sibling visits occurring?
- Are visits with parents occurring?
- If the child is in counseling or therapy, record the name and phone number of therapist
- Consultations / referrals

At the End of Case Notes:

- Summarize current problems or needs
- Note issues for further exploration

Sources:


An insert is available on “Developmental Ages and Stages,” as well as a note on “Safety Tips.” These may be accessed via the CASCW website at: http://cehd.umn.edu/SSW/cascw/.


Acknowledgments

We are grateful to the following practitioners for their contributions:
Suzanne Arntson, Scott County Children’s Services; Kristina Thompson, Chisago County Children’s Services; Tammy Kincaid, Pierce County Department of Human Services; Jessie Stratton, Olmsted County Children’s Services; Ed Frickson, Foundations for Success, Ramsey County; Terri Fields and Becky Michaels, Hennepin County Children’s Services; and Weida Allen, Children’s Law Center.

We are especially indebted to the following practitioners for their clarification, guidance, and contributions:
Richard Hacker, Olmsted County Children’s Services; Gayle Kittleson and staff, Ramsey County Community Services; Carole Wilcox Johnson, Minnesota Department of Human Services; Joan Riebel and Wendy Negaard, Family Alternatives; Deborah Beske Brown and staff, Minnesota Department of Human Services; and Kami Alvarez, Child Welfare Training System, Minnesota Department of Human Services.

Editor for Practice Notes
Esther Wattenberg, with support from the Center for Urban and Regional Affairs and assistance from Annie Welch, MSW/MURP Candidate, School of Social Work, Hubert H. Humphrey Institute of Public Affairs.

Support Staff: Mary Kaye LaPointe, CASCW, CURA; Design and layout provided by Heidi Wagner, CASCW

Suggested Citation: