



Considerations for Conducting Remote Supervised Visitation for Families Experiencing Domestic Violence in a Time of a National Health Crisis - Part 2*

*Released on April 22, 2020. Please be advised that new information is being released to the public very rapidly, and updates to these considerations may need to be taken into consideration. Please be mindful that these are considerations and not programming requirements.

Determining Safe Modified Supervised Visitation Options for Families

During the current public health crisis created by COVID-19, supervised visitation and safe exchange programs are faced with new challenges. We are supporting supervised visitation and safe exchange programs to take protective measures and consider possible programming modifications during this time of uncertainty. Many programs are faced with limiting the level of services available, not being to provide services to some families, or modifying how some services can be provided to families while still maintaining high quality, trauma-informed, adult and child survivor-centered, safety-driven services that successfully meet the unique needs of families impacted by violence.

When creating modified supervised visitation services, programs should take into account the varied safety needs of each family ordered to use the services. There is room for unintended consequences that can pose a risk to families if services are not maintained with a high level of expertise related to adult and child safety. Different and changing levels of risk will require different levels of response. Many family circumstances are unique and will change over time, so remaining flexible and willing to adapt as needed will be important.



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Continuum of Modified Supervised Visitation Service Options

Supervised visitation programs have several options to provide ongoing support and connection for families. Every family utilizing services will have unique needs and safety considerations that will determine the type and level of modified services you may be able to provide to each family.

You may be able to engage some families in a number of these options, while for other families, you may only be able to engage in one method of connection. It is important to remember that risk and safety are not static; they will change over time. What may be safe and workable at one point may not be safe at a later point in time. The parent who needs protection and the child should be the guidepost for what feels safe and workable.

The continuum of options could include:

1. Ongoing check-ins with each member of the family.
2. Center-facilitated and screened exchange of letters, notes, or drawings between a visiting parent and their children.
3. Center-facilitated and screened video or audio recordings between a visiting parent and their children. For example, a parent or child could record a greeting, read a short story, sing a song, or tell a joke.
4. Remote supervised visitation time.

Please note: The primary focus of the remainder of this document will focus on conducting remote supervised visitation.



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When is it Safe to Engage a Family in Remote Services?

It is not recommended to proceed with remote supervised visitation if:

- The adult survivor or children indicates fear or risks associated with remote access.
- There is ongoing stalking behavior.
- There are continued threats or acts of violence, intimidation, and harassment.
- There are allegations or findings of child sexual abuse.

It is recommended to proceed with caution if:

- The person who caused harm has used the center to manipulate, undermine, or as a platform for ongoing power and control tactics while participating in on-site SV services.
- Center staff has had difficulty redirecting behavior during on-site visits in the past.
- The center has not previously provided center-based services to a family.

Visitation Safety Planning for Remote Visits

Understanding the safety considerations and risk factors for each family will help determine which method of connection is best for each participating member of the family. When planning for safety, consider the following questions to guide the process with survivors:



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- How will we support **SAFETY** for the person who needs protection?
- What are the unique triggers? What are the safety risks?
- How will we **CONNECT** with each person in the family in a deliberate, intentional, and thoughtful way?
- How will we lead with **CARE** and **COMPASSION**?
- How will we ensure we acknowledge the **HUMANITY** and **UNIQUE** life circumstances of each individual?
- How will we **COUNTERACT** the experiences and tactics of coercion and power and control.

Be survivor-led by:

- Taking time to learn from survivor parents and children about what they need to be more secure during these uncertain times.
- Creating space and opportunities to listen, learn, and support their safety.
- Creating opportunities for survivors to be honest about partner contact. It is common for parents to have some type of contact with each other. As a provider, you will want to be able to plan and provide support that is responsive to each survivor's circumstance.
- Tailoring each modification in service to be responsive and reflective of individual survivors.

Make time to connect with survivors by:



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- Creating ongoing opportunities for survivor parents to connect with staff.
 - Supporting survivors to explore what resources they may need, who can offer help when needed, and who they can create time to connect with for ongoing connection and support.

Key considerations to explore with the parent needing protection:

- If the survivor's location is protected, ensure modified service options have safety and security mechanisms in place to protect the identity and location. Be sure to fully explore ways the parent causing harm could use modified service delivery to determine a survivor parent's location.
- Explore with each parent about other people joining or making an unplanned appearance in remote visits.
- Explore what unsafe messages may be and how they could be passed along during a remote visit.
- Explore what children need to feel safe before, during, and after each remote visit.
- Explore what the person who needs protection will need before, during, or after remote visits.

Remote Visitation Connection Options

Inspire Action recommends that the program staff is always connected to a virtual platform - whether on or off the live camera feed. The connection options to join participants to the platform include:



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- The child and visiting parent are only connected by phone (via the virtual platform phone connection option), and the monitor remains connected directly to the platform connection.
- Each party is connected via a virtual video and computer audio connection.
- A combination of each of these simultaneously.
- The monitor and child are connected via video/audio connection, and the visiting parent is connected only by phone.
- The visit monitor and visiting parent are connected by video/audio connection, and the child is connected only by phone connection.

Program Technology Requirements

Recommended virtual platform functions and settings:

- The platform offers a secure and encrypted connection with a password protected meeting code or required log-in to join.
- The visitation monitor has an enabled and functioning video camera and microphone on their computer.
- Video- or phone-only connection options within the same call.
- Controls that allow the host to join individuals to the call when ready (such as a “waiting room” or “on-hold” option before being allowed to join).



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- Host-only controls that support an instant mute function for both audio and video connections.
- Host-only controls to move participants out of the session quickly.
- Host-only controls move participants into another “room” or “breakout session” quickly so the visitation monitor can talk privately with anyone on the call.
- Host-only monitoring of everyone who is on the call.
- Host-only ability to mask the call-in number of participants before joining the session.
- Host-only ability to monitor or turn off any chat features.
- Host-only screen sharing mode and blocking ability.

Several virtual platform options can be used to conduct remote supervised visitations. Using a platform that supports both video and phone-only connection options allows the program to decide what is the safest method for each participant to join the call. It also supports the functionality of a supervised visitation monitor by increasing their ability to engage necessary security features.

Zoom is one virtual hosting platform option. If you have chosen Zoom to use as your remote SV&SE platform, we have created “[A Guide to Using Zoom for Remote SV Services](#)” to help you set your Zoom account settings. Ensuring you have the correct settings enabled will help you



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create a safe and secure platform with the necessary functionality to conduct remote supervised visitation services.

Program Participants Technology Assessment for Remote Visitation

Once you have determined that it is safe to proceed with remote visitation, it is essential that you conduct an assessment of technology with each parent to further determine the feasibility of setting up remote visitation.

The following questions should be included in your technology assessment to decide about remote visitation:

Q: Do you have access to a telephone – cell phone or landline?

Q: Do you have concerns about the length of time you can use your phone (limited minutes or limited phone carrier plan)?

Q: Can you use a cell phone to connect to the internet?

Q: Do you have a tablet or computer that you could use to connect to the internet?

Q: Do you have a reliable Wi-Fi internet connection or an internet data plan that would support your connection time?

Q: Do you have a private space where you could go and not be in sight or sound of others?

Determining the Length of Remote Supervised Visitations

The length of in-person visits shouldn't automatically translate to the length of remote visitations. Shorter visits should be considered.

- Consider the age and developmental ability of each child and



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their ability to connect remotely.

- Consider any prior remote connection experience of the child and what this connection experience was like (e.g., have they previously used technology to connect to the visiting parent or connect to friends, family members, teachers, clergy, youth leaders, and coaches?).
- Consider the safety risks unique to each family.
- Consider access issues for parents (limited data, limited phone minutes, limited/unreliable/no internet connection).

Create a Safety Support Plan

When we are in crisis and experiencing trauma, it is hard to think about what we might need to mitigate both the short-term and long-term impacts of a situation. Visitation programs can support survivor parents by offering tools and strategies that can work to limit stress and trauma and promote resilience and healing. Working with survivor parents to provide what they might need before, during, and after visits will help them consider current risks and needs and provide an opportunity for visitation programs to partner with survivor parents.

Remember that planning for safety and support is a process and not a one-time event. It will be important to check in regularly; safety is not static and may change over time. It is important to remember the differing needs of survivor parents, as some survivor parents may have custody of their



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children, and other survivor parents may be the visiting parent. For example, a survivor parent who has custody may have a lot of concerns about “bringing” the other parent into their home via phone or video. In contrast, a visiting parent may weigh that risk differently and be more focused on making sure they are able to remain connected to their children. It is important to listen to what each survivor parent describes as their unique risks and concerns.

Additional suggestions:

- Offering an opportunity to think about and plan what kind of support a survivor might need can help both survivors and their children during this time.
- Explore with each survivor their concerns about bringing the image of the person who caused harm into their living space via phone or video.
- Thinking about what survivors might need before, during, and after visits will help them consider their own strategies.
- Enquire about how the kids are feeling about modified visitation and if they have any fears or concerns that need to be addressed.
- Ensure there is regular and open communication with the adult survivor parent about any unintended consequences that may emerge as a result of remote supervised contact.
- Ensure there is a regular, intentional time to check in with each child engaged in services.
- Ensure there is a regular, intentional time to check in with the parent



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who has caused harm.

- Work with adult survivors to ensure they have supportive social connections and needed resources.
- Recognize the diverse cultural, social, ethnic, racial, and religious backgrounds of the parents, and explore who and what they may turn to in times of social isolation to reinforce support.
- Breaking isolation and helping parents build a community of support is vital. “Pod Mapping” is a strategy that can be used with parents to explore their social supports. Here is a document to support that process: <https://batjc.wordpress.com/pods-and-pod-mapping-worksheet/>

Before each visit, establish the following:

- The logistics of how the remote visit will take place.
- Where the survivor parent will be located during the visit.
- If the survivor parent is the visiting parent, ask what additional support they may need to feel safe during the remote visit. Explore concerns and how they may want you to intervene or support them during visits.
- What assistance might they need to prepare their children.
- Hold a remote orientation practice session with each parent and child using the connection method that has been selected for



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each person.

During each visit, establish the following:

- How the survivor parent can care for themselves during the visit.
- If the survivor parent is the custodial parent, explore what may be needed of this parent to help facilitate the connection. Based on the age of the child, the custodial parent may need to remain with the child during the visit or help the child get connected to the visit.
- Explore in detail the role the custodial parent will have during the visit.
- Explore what the custodial parent may need from staff to support them.
- Explore what the staff could do during the visit that would support their well-being or offer a distraction if needed. For example, another staff person or an advocate could use the time of the visit to check in with this parent.
- Plan for how the survivor parent can connect with staff during a visit if needed.

After each visit, establish the following:

- How the survivor parent can continue to check in with staff



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before and after visits.

- What kind of support parents and children have in place after visits.
- Strategies for how parents can support their children after the visit.

Considerations for Supplemental Remote SV Participant Guidelines

Conducting remote supervised visitation is a temporary response to our current public health crisis. It is important to remember that moving to remote services may not be safe for every family. If you are not able to ensure safety or mitigate risk as a program, you should not move to provide such services. You may also determine after providing remote services to a family that you are not able to continue such services safely. The staff should understand this, and your supplemental program guidelines should be clear that this is a temporary solution during the current public health crisis.

When developing your supplemental participant guidelines specific to remote services, it is important to remember your program's mission and the OVW Supervised Visitation Guiding Principles that guide your work. Many of the participant guidelines you have in place when you conduct on-site supervised visitation services should remain in place for remote services.



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There are several factors unique to conducting remote services that may create new risks or an added layer of complication that should be considered when developing participant guidelines:

- It may be more challenging to read body language or hear an indication of a change in behavior or subtle change in emotions that might be escalating while in a remote context.
- It may be difficult to intervene as quickly as when you are conducting an in-person visit.
- It will be more difficult to regulate and be prepared for what is being shown, who is in view of the screen, or who joins a call during remote visits.
- A visual or auditory connection may create an unintended disclosure of personally-identifying information.
- The physical location of the person who has caused harm is not known, and if you are only connecting by phone, this parent can move locations during a visit. The mobility of a parent who has caused harm may pose a risk to the parent or child survivor.

To help limit, manage, or mitigate safety risks, you may consider setting specific guidelines for families where risk exists. Remember that each family has unique and distinct safety risks, and program guidelines should be responsive to this reality. What you need to do for one family may not be needed or safe for another family.



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Possible participant guidelines you may consider to help limit, manage, or mitigate risk could include:

- Set parameters that outline the agreement and understanding that recording any portion of a visit is not allowable under any circumstance.
- Set an agreement to not allow photos or screenshots at any point during a visit.
- Create a plan for how you will pause, stop, or intervene in a visit if there is an issue, with the caveat that if harm is caused, you will do what is necessary to interrupt the behavior immediately.
- Set an agreement that staff may change the virtual background at any time during remote visits if necessary.
- Set an agreement that staff may mute any audio connection at any time during remote visits if necessary.
- Set parameters around who can join remote visits.
- With the person who has caused harm, determine, in advance, their location during a remote visitation and have a clear understanding that this location should not change without notice to staff.

It's very easy to create a laundry list of parent guidelines around what is allowed and not allowed during service delivery. We would encourage not



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to create a laundry list of remote service guidelines but rather present your program guidelines in a manner that conveys the level of understanding, respect, care and compassion you hold for each family that utilizes your services. If you start from a place of care and compassion and offer full transparency about why you established each guideline it will do several things: (1) ensure parents have clarity about your role and why you have put each guideline in place for their family, (2) allow staff to reinforce each guideline and respond to the unique circumstances that may require adaptability when situations are not black and white, and (3) allow flexibility when needed; many family circumstances are unique and will require varied and tailored responses. It is important to recognize that some families will require more rigid and strict guidelines to be in place to support safety. However, not all families require that same level of scrutiny. In fact, for some families, when guidelines are imposed that are not relevant or applicable to their life circumstances, they can create an unsafe circumstance and perhaps unnecessary conflict and tension between staff and parents. Parents who cause harm may try to find ways to question or challenge the visitation program staff. If program guidelines are reflective of each family's unique safety needs and relevant to the circumstances of each family, it will be easier to respond with a clear, transparent response that is connected to why the parent is visiting. Some typical “red flag” guidelines include:

- ▶ Guidelines that require participants to stay in the “here and now.”
- ▶ Guidelines that require children to filter or be censored.



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- ▶ Guidelines that focus on redirecting poor parenting.
- ▶ Guidelines that assume the person who uses violence is the visiting parent and doesn't account for the safety needs of survivors of domestic violence who use center services as the visiting parent.
- ▶ Guidelines that impose a particular cultural value that is not universal, for example, developmental expectations that vary across cultures.
- ▶ Guidelines about how time should be spent during a visit.

Final Check: Anticipate and avoid unintended negative consequences. When developing guidelines, ask the following questions:

- How is the guideline a reflection of your beliefs?
- How does the guideline support your vision/mission/philosophy?
- Does this guideline support the OVW Supervised Visitation Grant Program Guiding Principles?
- Who is the guideline established for – who does the guideline benefit?
- Why is the guideline established? What is the intent of the guideline?
- How does it account for the realities of all of the unique needs and cultural identities of the possible participants?
- How will the guideline be evaluated?



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- Does the guideline account for the safety needs of survivors of domestic violence who are the visiting parent?
- Does the guideline conform to any larger organizational rules, laws, or regulations?
- Does this guideline anticipate how a person who uses violence might circumvent the intent of this guideline or find ways to use this guideline to cause further harm?
- Will you ever need to make exceptions to this guideline?
- Does this guideline reflect an understanding that there will be varying degrees of danger and safety risks for each family? Does this guideline assume the greatest potential of risk and impose that level on every family?
- Is there clarity around why this guideline has been established and who the guideline benefits?
- Is there clarity around how this guideline will be implemented?

For additional information and considerations for policy development, refer to Inspire Action's "[*Developing Policies and Procedures for Supervised Visitation Programs*](#)".